



MALAHAYATI INTERNATIONAL JOURNAL  
OF NURSING AND HEALTH SCIENCE  
ISSN 2620-9152 (Print)  
ISSN 2621-4083 (Online)  
DOI: 10.33024



ARTICLE INFORMATION

Received: May, 4, 2026

Revised: July, 29 2026

Available online: July, 30, 2026

at: <https://e-jurnal.iphorr.com/index.php/minh>

## Nursing students' experiences of developing multicultural leadership in community-based HIV/AIDS programs in Papua

Edison Kabak

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: [edi976kabak@gmail.com](mailto:edi976kabak@gmail.com)

### Abstract

**Background:** Cultural diversity in health care, particularly within HIV/AIDS programs in Papuan communities, necessitates that nursing students develop leadership skills sensitive to variations in values, beliefs, and community practices. Cultivating multicultural leadership is therefore a critical component in strengthening the professional competence of future nurses.

**Purpose:** To examine the experiences of nursing students in developing multicultural leadership during the implementation of HIV/AIDS programs in Papuan communities.

**Method:** A descriptive phenomenological study was conducted among 12 nursing students using purposive sampling. Data were collected through semi-structured interviews and analyzed using Colaizzi's seven-step phenomenological method.

**Results:** Five major themes emerged: (1) multicultural awareness as the foundation of leadership; (2) adaptation processes in culturally diverse settings; (3) the role of mentors in leadership development; (4) communication challenges in community practice; and (5) the formation of culturally sensitive leadership. Field experiences were found to play a pivotal role in shaping students' multicultural leadership competencies.

**Conclusion:** Multicultural leadership among nursing students develops through experiential learning, reflection, and community engagement. Integrating culture-based learning into nursing curricula is essential to prepare students for the complexities of delivering health services in diverse populations.

**Keywords:** Community; HIV/AIDS; Multicultural Leadership; Nursing Education; Nursing Students.

### INTRODUCTION

Healthcare systems worldwide are currently facing complex challenges due to the increasing mobility and cultural diversity of people. Differences in cultural values, norms, and beliefs also affect individual and community health behaviors (Flores, Dator, Olivar, & Gaballah, 2023; Teixeira, Cruchinho, Lucas, & Gaspar, 2023). In efforts to combat HIV/AIDS, a culture-based approach is an important factor in increasing the success of programs (Vos, Lim, Abbafati, Abbas, Abbasi, Abbasifard, & Bhutta, 2020; Militao, Salvador, Silva, Uthman, Vinberg, & Macassa, 2022). Nursing students, as future healthcare professionals, have a strategic role in developing

leadership skills that are adaptive to cultural diversity (Wittmann, Weyland, Seeber, Warwas, Striković, Krebs, & Wilczek, 2022). Therefore, multicultural leadership is an important competency that needs to be developed in community nursing practice, especially in regions such as Papua (Fitriani, 2023; Medianto, Taridi, Susanto, Kundana, Ardianto, Avitasari, & Widiyanto, 2024; Kabak, Halitopo, Auparai, & Hadi, 2022).

However, the understanding of nursing students' lived experiences in developing multicultural leadership is still limited (Gu & Sok, 2023). Few studies in Papua, Indonesia, have examine student

involvement in HIV/AIDS programs in communities with distinctive cultures, such as Papua, have not been widely done (Aswar, 2026; Magai, Butu, Yatipai, Kurni, Haluk, Mote, & Ayomi, 2026). Wamena was selected as the study setting because it represents a culturally diverse area in the Papua Highlands, where multiple indigenous ethnic groups coexist and maintain distinct sociocultural traditions. This diversity provides a unique backdrop for understanding how cultural identity shapes health behaviors and community dynamics (Fiharsono, Carey, Hyde, Beazley, & Yektingtyas-Modouw, 2024). These characteristics make Wamena an appropriate setting for exploring how nursing students develop and apply multicultural leadership during community engagement. There is no clear picture of the challenges faced by students when interacting with people who have different cultural backgrounds (Haswani, Baharuddin, & Simbolon, 2023; Jayadi, Abduh, & Basri, 2022). The process of forming multicultural leadership through field practice experience has not been fully identified (Laeheem, Tepsing, & Hayisa-e, 2025). In addition, there is still a lack of information about effective strategies used by students in implementing cross-cultural leadership in the community (Flores et al., 2023; Scott, 2023; Lysfjord & Skarstein, 2024).

This study is important because the need for health workers who can lead effectively in multicultural contexts is increasing, especially in the handling of HIV/AIDS in a region with high cultural diversity, such as Papua. This study provides a novel contribution by delving deeply into the experiences of nursing students in developing multicultural leadership directly in the field, especially in Papuan community-based HIV/AIDS programs. This study aims to explore the experiences of nursing students in developing and implementing multicultural leadership during their involvement in HIV/AIDS programs in Papuan communities.

## RESEARCH METHOD

A qualitative research design with a phenomenological approach was employed to explore in depth the experiences of nursing students in developing multicultural leadership (Kaldheim, Fossum, Munday, Creutzfeldt, & Slettebø, 2023). A phenomenological approach was chosen to understand the meaning of participants' lived experiences of Diploma Nursing students in Wamena who participate in community-based HIV/AIDS programs in Papua (Sukatemin, Kabak, & Hardy, 2023).

A total of 12 participants were recruited through purposive sampling based on their active involvement in HIV/AIDS community activities. The study was conducted between January and May 2026 in an educational and community practice setting in Wamena.

Data were collected through face-to-face in-depth semi-structured interviews conducted in private settings, with each interview lasting approximately 45–60 minutes (Damsgaard, Overgaard, Dürr, Lunde, Thybo, & Birkelund, 2022). Data were analyzed using Colaizzi's phenomenological analysis framework, which involves data recognition, identification of important statements, formulation of meaning, grouping into themes, and validation of findings with participants to increase credibility and confidence of results (Annan-Frey, Boateng, Lomotey, Lartey, & Dzomeku, 2023).

The research was conducted in accordance with recognized ethical guidelines, emphasizing the social and scientific value of the study, fair distribution of risks and benefits, minimization of potential harm, and strict safeguards against inducement, exploitation, or breaches of confidentiality. Participants were fully informed about the study's aims, procedures, anticipated benefits, and their rights before consent was obtained.

**Edison Kabak**

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: edi976kabak@gmail.com

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

## RESEARCH RESULTS

Table 1. Characteristics of Participants (N=12)

| Participant Code | Age | Gender | Study Programs     | Semester | Clinical Practice Setting |
|------------------|-----|--------|--------------------|----------|---------------------------|
| P1               | 19  | Female | Diploma of Nursing | 3        | Health Center             |
| P2               | 20  | Male   | Diploma of Nursing | 4        | Intensive Care Unit       |
| P3               | 19  | Female | Diploma of Nursing | 3        | Inpatient Room            |
| P4               | 21  | Male   | Diploma of Nursing | 5        | Emergency Unit            |
| P5               | 20  | Female | Diploma of Nursing | 4        | Intensive Care Unit       |
| P6               | 22  | Male   | Diploma of Nursing | 6        | Health Center             |
| P7               | 21  | Female | Diploma of Nursing | 5        | Emergency Unit            |
| P8               | 22  | Male   | Diploma of Nursing | 6        | Health Center             |
| P9               | 20  | Female | Diploma of Nursing | 4        | Intensive Care Unit       |
| P10              | 21  | Male   | Diploma of Nursing | 5        | Outpatient                |
| P11              | 19  | Female | Diploma of Nursing | 3        | Inpatient Room            |
| P12              | 22  | Male   | Diploma of Nursing | 5        | Emergency Unit            |

Twelve students enrolled in the Diploma of Nursing program participated in this study. The respondents were aged between 19 and 22 years, with an equal distribution of male and female students. All were actively pursuing nursing education across different semester levels, ranging from the third to the sixth. They had undertaken clinical practice in diverse health service units, including community health centers, emergency departments, inpatient wards, intensive care units, and outpatient clinics. This breadth of clinical exposure illustrated the variety of learning experiences that contributed to their understanding of multicultural leadership within community health services.

The findings indicated that nursing students perceived the development of multicultural leadership in HIV/AIDS programs as a learning process that extended beyond health service delivery to encompass cultural awareness, adaptability, communication skills, and the cultivation of culturally sensitive leadership attitudes. Their understanding was shaped primarily through clinical placements in Papuan communities, direct engagement with local populations, and guidance from clinical supervisors. In-depth interviews with the 12 participants (P1–P12) revealed five interrelated themes that collectively represented the trajectory of their leadership development experiences.

### Theme 1: Multicultural Awareness as the Basis of Leadership

Students began to understand multicultural leadership from the realization that each individual in the community had a different cultural background and needed to be valued in the HIV/AIDS health programs.

P1: "I realize that the people here have different cultures."

P2: "I have come to understand more about the importance of respecting differences."

P3: "Culture influences the way they receive health education."

P4: "Everyone has habits that we should respect."

P5: "I learned to be more open to other cultures."

These findings indicated that cultural awareness was the initial foundation in building students' multicultural leadership.

### Theme 2: The Adaptation Process in a Diverse Cultural Environment

After having this awareness, students began to face challenges in adjusting to the social and cultural conditions of the Papuan people.

P6: "At first, I found it difficult to adapt to the environment."

P7: "I have to learn to understand the customs of the local people."

Edison Kabak

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: edi976kabak@gmail.com

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

P8: "I have made mistakes because I don't understand the culture."

P9: "Over time, I started to get used to it."

P10: "I became more careful with every action."

This theme illustrated that direct experience encourages students to develop adaptability in a multicultural context.

### **Theme 3: The Role of Mentors in Leadership Development**

In the learning process, clinical supervisors or lecturers played an important role in providing direction and examples of relevant practices.

P1: "Lecturers often give examples of real cases in the field."

P3: "The explanation from the lecturer helped me understand the situation."

P5: "I learned from the experiences shared by the lecturer."

P7: "The guidance makes me more confident."

P12: "Lecturers help connect theory with practice."

This theme demonstrated that clinical supervisors had a role as facilitators in developing student leadership skills.

### **Theme 4: Communication Challenges in HIV/AIDS Programs**

Students also faced various obstacles, especially in terms of communication with people who spoke different languages and had different cultures.

P2: "I have difficulty communicating because of language differences."

P4: "Sometimes I get confused about choosing the right word."

P6: "I'm afraid of a misunderstanding."

P9: "I have to adjust the way I speak."

P11: "Communication is the biggest challenge in the field."

This theme suggested that communication was a major challenge in the implementation of multicultural leadership.

### **Theme 5: Culturally Sensitive Leadership Development**

Through these various experiences, students began to form leadership characteristics that were more empathetic, open, and respectful of cultural differences.

P1: "I became more patient in dealing with community."

P3: "I don't easily judge people by their culture."

P5: "I learned to care more."

P8: "I am more careful in my actions."

P12: "I feel more confident as a leader."

This theme emphasized that experience in the field contributed to shaping more mature multicultural leadership in students.

**Edison Kabak**

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: edi976kabak@gmail.com

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

**Table 2. Participant Analysis by Themes**

| Theme                                                    | Participants | Participant quotes                                                               | The Meaning of Experience                                                                    |
|----------------------------------------------------------|--------------|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| Multicultural Awareness as the Basis of Leadership       | P1           | "I am aware of cultural differences in society."                                 | Students realized that cultural diversity was an important aspect of public health services. |
|                                                          | P2           | "I became more sensitive to diversity in the healthcare services."               | This awareness formed an early perspective in multicultural leadership.                      |
|                                                          | P3           | "Culture greatly influences the acceptance of health programs."                  | Culture was understood as a factor that affected the success of a health program.            |
|                                                          | P4           | "Everyone has habits that we should respect."                                    | Appreciation of differences was part of the professional learning process.                   |
|                                                          | P5           | "I learned the importance of respecting cultural differences."                   | Openness was the foundation for the development of multicultural leadership.                 |
| The Adaptation Process in a Diverse Cultural Environment | P6           | "At first, I had a hard time adjusting to community."                            | Students had initial difficulties in adjusting to the culture of the community.              |
|                                                          | P7           | "I have to learn to understand local customs."                                   | The learning process occurred through an understanding of local customs.                     |
|                                                          | P8           | "I made a mistake in the initial interaction."                                   | Initial mistakes became reflective experiences that shaped learning.                         |
|                                                          | P9           | "I started to get used to it after some time in the field."                      | Adaptation developed gradually through hands-on experience.                                  |
|                                                          | P10          | "I became more careful with every action."                                       | Prudence emerged as a form of increasing professional awareness.                             |
| The Role of Mentors in Leadership Development            | P1           | "The lecturer gave examples of real cases in the field."                         | Lecturers played the role of facilitators in the leadership learning process.                |
|                                                          | P3           | "The lecturer's explanation helps to understand the condition of the community." | Real-life examples helped students understand the conditions of the community firsthand.     |
|                                                          | P5           | "I learned from the experiences shared by lecturers."                            | Lecturers' experiences became a meaningful source of learning.                               |
|                                                          | P7           | "The lecturer's direction boosted my confidence."                                | Guidance to increase student confidence in field practice.                                   |
|                                                          | P12          | "Lecturers connect theory with field practice."                                  | The interconnectedness of theory and practice strengthened the understanding of leadership.  |

**Edison Kabak**

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
 Corresponding author: E-mail: edi976kabak@gmail.com

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

## Nursing students' experiences of developing multicultural leadership in community-based HIV/AIDS programs in Papua

| Theme                                         | Participants | Participant quotes                                                         | The Meaning of Experience                                                                              |
|-----------------------------------------------|--------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Communication Challenges in HIV/AIDS Programs | P2           | "I have difficulty because of the language difference with the community." | Language differences were the main obstacle to communication with the community.                       |
|                                               | P4           | "I'm not sure about delivering health messages."                           | Students experienced self-confidence in conveying health messages.                                     |
|                                               | P6           | "I'm afraid of misunderstandings when communicating."                      | The risk of misunderstandings affected the interaction process in the field.                           |
|                                               | P9           | "I have to adjust the way I communicate."                                  | Students learned to adapt their communication style according to the cultural context.                 |
|                                               | P11          | "Communication is the biggest challenge in the field."                     | Communication became an important skill in community leadership.                                       |
| Culturally Sensitive Leadership Development   | P1           | "I became more patient in interacting with community members."             | Students experienced a change in attitude to become more emotionally mature.                           |
|                                               | P3           | "I no longer judge people based on culture."                               | Patience developed in the face of cultural differences in community.                                   |
|                                               | P5           | "I learned to be more empathetic."                                         | Empathy grew through hands-on experience on the ground.                                                |
|                                               | P8           | "I'm more careful in making decisions."                                    | Evaluations of individuals became more objective and culturally unbiased.                              |
|                                               | P12          | "I feel more prepared to be a leader in the community."                    | Multicultural leadership emerged as an important component of professional readiness in the community. |

The table above indicated the meaning of multicultural leadership development in nursing students in the HIV/AIDS program in the Papuan community, which was formed through five main aspects, namely cultural awareness, the process of adaptation in diverse environments, the role of clinical supervisors in learning, communication challenges in the field, and the formation of culturally sensitive leadership attitudes. These five aspects were interconnected and showed that students' learning experiences were not only obtained through theoretical learning, but also developed through direct involvement in the community, social interaction with the community, and reflection processes from practical experiences. Overall, the set of experiences contributed to shaping multicultural leadership competencies as an important part of the professionalism of nursing students.

**Edison Kabak**

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: edi976kabak@gmail.com

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

## DISCUSSION

The results of this study showed that the development of multicultural leadership in nursing students in the HIV/AIDS program in the Papuan community was not only understood as a technical leadership ability, but also as a process of forming cultural awareness, social adaptability, strengthening communication, and forming a professional and diversity-sensitive leadership attitude. These findings confirmed that nursing learning is a holistic process that includes cognitive, affective, and psychomotor aspects through direct experience in the field and interaction with individuals from diverse cultural backgrounds (Kabak, Olivar, & Tukayo, 2024).

Findings indicated that students started the process of developing multicultural leadership from the awareness that community had diverse values, beliefs, and cultures. This awareness was an important foundation in shaping students' perspectives on the communities they served. This is in line with the concept of *cultural awareness*, which emphasized that leaders in the health sector must first understand and appreciate diversity before being able to provide effective services (Jewell & Ebener, 2025; Laeheem et al., 2025).

These findings also fill the gap in previous research that still focused a lot on the theoretical aspects of leadership, without delving deeply into the students' experiences in the real context of the community. In this study, cultural awareness was not only gained through classroom learning, but also formed through direct experience during involvement in HIV/AIDS programs in Papuan communities. Thus, multicultural leadership was understood as a process of internalizing values that developed through social experience and field practice (Sadarang, 2022; Bidzha, Ngepah, & Greyling, 2024; Dwomoh, Douglas, Charles-Unadike, Komesuor, & Manu, 2024).

The findings further showed that students experienced an adaptation process when interacting with the community. This process included adjusting attitudes, communication patterns, and decision-making in complex field situations (Ashour, Banakhar, & Elseesy, 2022; Xu, Zuo, & Zheng, 2024). At first, students faced confusion and challenges in adjusting, but over time, they could develop adaptive skills through repetitive experiences and reflective learning (de Koster, Thummerer, Scandurra, Langendijk, &

Both, 2023; Randolph, Johnson, McGee, Adimora, Ramirez, Bailey & Relf, 2022).

These findings reinforce the experiential learning theory that skills and knowledge are formed through reflection on hands-on experience. In this context, adaptation is an important part of the formation of students' multicultural leadership competencies (Jewell & Ebener, 2025). This study also revealed that the process of adaptation in the context of different cultural communities had not been explored in depth in nursing education (Cho, 2021).

Furthermore, clinical supervisors or lecturers had an important role in supporting the development of students' multicultural leadership. The supervisor not only acted as a mentor but also as a facilitator who bridged theory with practice through real-world experience in the field and reflective discussions. This role helped students understand how leadership concepts were applied in real-world situations in the community (Luukkonen, Kuivila, Kaarlela, Koskenranta, Kaučič, Riklikiene, & Mikkonen, 2023).

These findings are in line with a constructivist learning approach that emphasizes that knowledge is built through social interaction and experience. In this case, the existence of a supervisor is an important factor in strengthening students' understanding of culturally sensitive leadership practices (Luukkonen et al., 2023). Thus, the quality of mentorship is one of the key elements in the success of multicultural leadership development.

Consistent with these findings, communication was one of the main challenges in the implementation of HIV/AIDS programs in the community. Differences in language, cultural values, and ways of interacting with people were often obstacles to building effective communication (Haswani et al., 2023). Students realized that communication skills in this context were not only technical but also required cultural sensitivity and the ability to understand social contexts (Sari, Suhoyo, Mulyana, & Claramita, 2023).

These findings support the concept of effective communication in healthcare that emphasizes the importance of empathy, clarity of message, and understanding of the patient's or society's cultural background. This study shows that the aspect of cross-cultural communication still needs more attention in nursing education, especially in leadership

### Edison Kabak

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: edi976kabak@gmail.com

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

development in the community (Feola, Crudele, & Celenta, 2024).

The results of the study also show that the experience of involvement in HIV/AIDS programs in the Papuan community contributes to shaping student leadership that is more empathetic, patient, responsible, and respectful of cultural differences (Militao et al., 2022). This attitude is formed through a continuous process that involves cultural awareness, field adaptation, and learning from clinical supervisors and practical experience (Nilsson, Masiello, Broberger, & Lindström, 2023).

These findings are in line with the concept of *cultural competence*, which states that professional leadership in nursing includes the ability to appreciate the values, beliefs, and diversity of society (Oikarainen, Kaarlela, Heiskanen, Taam-Ukkonen, Lehtimaja, Käsämänoja, & Mikkonen, 2022; Visiers-Jiménez, Baeza-Monedero, Ríos-Díaz, Llinares, Martínez-Gimeno, Mattys, & Jiménez, 2025). Thus, multicultural leadership is not formed instantly, but through an ever-evolving process of experience in field practice. (Teixeira et al., 2023).

## IMPLICATIONS

This research demonstrates that nursing education needs to strengthen the field experiential learning approach in a multicultural context, especially in public health programs such as HIV/AIDS. Lecturers and clinical supervisors are expected to be more active in integrating real community experiences into the learning process and providing space for reflection for students (Huber, Rabl, Höge-Raisig, & Höfer, 2023). In addition, the nursing curriculum needs to emphasize the development of cross-cultural communication and adaptive leadership so that students are better prepared to face the challenges of health services in a multicultural society.

## LIMITATIONS

This study has several limitations that should be considered when interpreting the findings. First, the study was conducted within a single community-based HIV/AIDS program in Papua, involving nursing students from a specific educational context. Therefore, the findings may not be transferable to other nursing education settings or cultural environments with different characteristics. Second, the study employed a qualitative phenomenological

design with a relatively small number of participants, aiming to obtain an in-depth understanding of students' lived experiences rather than statistical generalization. Third, the findings were based on participants' self-reported experiences, which may have been influenced by recall bias or social desirability. Future studies could include multiple institutions, different cultural contexts, and longitudinal or mixed-methods approaches to further examine the development of leadership in multicultural settings, competencies and strengthen the transferability of the findings.

## CONCLUSION

This study demonstrates that multicultural leadership development among nursing students in a community-based HIV/AIDS program in Papua is a continuous learning process through direct field experience. This process fosters cultural awareness, adaptability, effective communication, and empathetic and professional leadership. Integrating multicultural learning experiences into nursing education has the potential to enhance students' preparedness to provide care and leadership responsive to cultural diversity. Future research is recommended to involve various institutions, regions, and healthcare contexts to test the transferability of the findings.

## REFERENCES

- Annan-Frey, L., Boateng, E. A., Lomotey, A., Lartey, C., & Dzomeku, V. (2023). Lived experiences and coping strategies of persons seeking infertility treatment in the Kumasi metropolis: a descriptive phenomenological study. *BMC Women's Health*, 23(1), 74.
- Ashour, H. M. A. A., Banakhar, M. A., & Elseesy, N. A. E. (2022). Clinical leadership behaviors among critical care nurses in private and governmental hospital: A cross-sectional survey. *International Journal of Nursing Sciences*, 9(3), 357-363.
- Aswar, S. (2026). Pengaruh edukasi kesehatan dalam meningkatkan pengetahuan dan sikap pencegahan HIV/AIDS di Kabupaten Biak Provinsi Papua. *Health Research Journal of Indonesia*, 4(4), 233-240.

Edison Kabak

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: edi976kabak@gmail.com

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

Nursing students' experiences of developing multicultural leadership in community-based HIV/AIDS programs in Papua

- Bidzha, M. L., Ngepah, N., & Greyling, T. (2024). The impact of antiretroviral treatment on the relationship between HIV/AIDS and economic growth. *Economic analysis and policy*, 81, 368-387.
- Cho, E. (2021). How cultural competency of community health care providers reflects multicultural education: A case study on nursing majors. *Medico-Legal Update*, 21(2).
- Damsgaard, J. B., Overgaard, C. M. L., Dürr, D. W., Lunde, A., Thybo, P., & Birkelund, R. (2022). Psychiatric care and education understood from a student perspective: Enhancing competences empowering personal and social recovery. *Scandinavian Journal of Caring Sciences*, 36(4), 1241-1250.
- de Koster, R. J., Thummerer, A., Scandurra, D., Langendijk, J. A., & Both, S. (2023). Evaluation of deep learning based synthetic CTs clinical readiness for dose and NTCP driven head and neck adaptive proton therapy. *Medical Physics*, 50(12), 8023-8033.
- Dwomoh, F., Douglas, M., Charles-Unadike, V. O., Komesuor, J., & Manu, E. (2024). Motivation, responsibilities, and experiences of HIV/AIDS counselors in the Volta Region of Ghana: a descriptive phenomenological study. *AIDS Research and Therapy*, 21(1), 60.
- Feola, R., Crudele, C., & Celenta, R. (2024). Developing cross-cultural competence in entrepreneurship education: What is the role of the university. *The International Journal of Management Education*, 22(3), 101055.
- Fiharsono, A., Carey, M., Hyde, M., Beazley, H., & Yektiningtyas-Modouw, W. (2024). Culturally based learning needs of Korowai students in a lowland-remote area of Indonesian Papua: school physical environment and building design. *The Australian Educational Researcher*, 51(2), 611-629.
- Fitriani, M. I. (2023). Management of inter-religious harmony through multicultural leadership roles: A case study of Hindus' way of celebrating diversity in Takbiran Parade. *Jurnal Penelitian Keislaman*, 19(2), 103-115.
- Flores, I. F., Dator, W. L. T., Olivar, J. J., & Gaballah, M. K. (2023). Congruence of effective leadership values between nurse leaders and staff nurses in a multicultural medical city in Saudi Arabia: A sequential mixed-methods study. *Healthcare*, 11(3), p. 342. MDPI.
- Gu, M., & Sok, S. (2023). Factors influencing multicultural acceptance of Korean nursing students. *BMC nursing*, 22(1), 427.
- Haswani, F., Baharuddin, B., & Simbolon, N. (2023). Multicultural education in English language teaching: a study of paradigms, perceptions, and implementation strategies. *World Journal of English Language*, 13(2), 424-424.
- Huber, A., Rabl, L., Höge-Raisig, T., & Höfer, S. (2023). Well-being, mental health, and study characteristics of medical students before and during the pandemic. *Behavioral Sciences*, 14(1), 7.
- Jayadi, K., Abduh, A., & Basri, M. (2022). A meta-analysis of multicultural education paradigm in Indonesia. *Heliyon*, 8(1).
- Jewell, M. R., & Ebener, D. R. (2025). Adaptive pastoral leadership in a multicultural church. *Religions*, 16(5), 577.
- Kabak, E., Halitopo, Y., Auparai, N. S., & Hadi, N. (2022). Description of character shift of nursing students during the Covid-19 Pandemic era: A review. *International Journal of Advanced Health Science and Technology*, 2(2), 60-68.
- Kabak, E., Olivar, J. J. R., & Tukayo, I. J. H. (2024). Towards an inclusive nursing education of multicultural pedagogies and frameworks in Indonesia: A systematic review. *Public Health and Safety International Journal (PHASIJ)*, 5(02), 435-450. Retrieved from: <https://mand-ycmm.org/index.php/phasij/article/view/1134>.
- Kaldheim, H. K. A., Fossum, M., Munday, J., Creutzfeldt, J., & Slettebø, Å. (2023). Professional competence development through interprofessional simulation-based learning assists perioperative nurses in postgraduation acute clinical practice situations: A qualitative study. *Journal of Clinical Nursing*, 32(11-12), 2757-2772.
- Laeheem, K., Tepsing, P., & Hayisa-e, K. (2025). Confirmatory factors analysis of multicultural leadership of youth in the three southern border provinces of Thailand. *Societies*, 15(7), 202.
- Luukkonen, A. L., Kuivila, H., Kaarlela, V., Koskenranta, M., Kaučič, B. M., Riklikene, O., & Mikkonen, K. (2023). Mentors' cultural competence at mentoring culturally and linguistically diverse nursing students in clinical

**Edison Kabak**

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: [edi976kabak@gmail.com](mailto:edi976kabak@gmail.com)

DOI: <https://doi.org/10.33024/minh.v9i5.3156>

Nursing students' experiences of developing multicultural leadership in community-based HIV/AIDS programs in Papua

- practice: An international cross-sectional study. *Nurse education in practice*, 70, 103658.
- Lysfjord, E. M., & Skarstein, S. (2024). Empowering leadership: a journey of growth and insight through a mentoring program for nurses in leadership positions. *Journal of Healthcare Leadership*, 443-454.
- Magai, M. G., Butu, Y., Yatipai, J. D., Kurni, R. R., Haluk, M. B., Mote, B. S., & Ayomi, M. B. (2026). Penyuluhan HIV/AIDS pada mahasiswa asrama Nabire Kota Studi Jayapura-Papua Tahun 2025. *Jurnal Pengabdian Masyarakat Kesehatan*, 12(1), 9-13.
- Medianto, M., Taridi, T., Susanto, S., Kundana, D., Ardianto, H., Avitasari, I., & Widiyanto, W. (2024). How does a teacher's multicultural leadership affect the students' moderation? A study of junior high school students. *International Journal of Science and Applied Science: Conference Series*. 8(2), 72-83.
- Militao, E. M., Salvador, E. M., Silva, J. P., Uthman, O. A., Vinberg, S., & Macassa, G. (2022). Coping strategies for household food insecurity, and perceived health in an urban community in Southern Mozambique: A qualitative study. *Sustainability*, 14(14), 8710.
- Nilsson, T., Masiello, I., Broberger, E., & Lindström, V. (2023). Digital feedback during clinical education in the emergency medical services: a qualitative study. *BMC Medical Education*, 23(1), 156.
- Oikarainen, A., Kaarlela, V., Heiskanen, M., Taam-Ukkonen, M., Lehtimaja, I., Käsämänoja, T., & Mikkonen, K. (2022). Educational intervention to support development of mentors' competence in mentoring culturally and linguistically diverse nursing students: A quasi-experimental study. *Nurse Education Today*, 116, 105424.
- Randolph, S. D., Johnson, R., McGee, K., A. Adimora, A., Ramirez, C., Bailey Jr, D. E., & Relf, M. V. (2022). Adaptive leadership in clinical encounters with women living with HIV. *BMC Women's Health*, 22(1), 217.
- Sadarang, R. A. I. (2022). Prevalence and factors affecting discrimination towards people living with HIV/AIDS in Indonesia. *Journal of Preventive Medicine and Public Health*, 55(2), 205.
- Sari, S. M., Suhoyo, Y., Mulyana, D., & Claramita, M. (2023). The interactional communication of feedback in clinical education: A focused ethnographic study in a hierarchical and collectivist culture. *Heliyon*, 9(3).
- Scott, C. L. (2023). Incorporating multicultural and workforce diversity leadership attributes and efforts in contemporary leadership practices. *Annals of Reviews & Research*, 10(1), 1-5. Retrieved from: <https://juniperpublishers.com/arr/ARR.MS.ID.555777.php>
- Sukatemin, S., Kabak, E., & Hardy, S. (2023) Implementation of 2030 free from HIV/AIDS policy in Papua according to Van Metter and Van Horn Model: A systematic review. *Jurnal Aisyah: Jurnal Ilmu Kesehatan*, 8(1), 187-194. Retrieved from: <https://aisyah.journalpress.id/index.php/jika/article/view/1564>.
- Teixeira, G., Cruchinho, P., Lucas, P., & Gaspar, F. (2023). Transcultural nursing leadership: A concept analysis. *International Journal of Nursing Studies Advances*, 5, 100161.
- Visiers-Jiménez, L., Baeza-Monedero, M. I., Ríos-Díaz, J., Llinares, S. M. L., Martínez-Gimeno, M. L., Mattys, K., & Jiménez, L. V. (2025). Cultural competence of European nursing faculty. An international cross-sectional study. *Journal of Nursing Scholarship*, 57(3), 452-471.
- Vos, T., Lim, S. S., Abbafati, C., Abbas, K. M., Abbasi, M., Abbasifard, M., & Bhutta, Z. A. (2020). Global burden of 369 diseases and injuries in 204 countries and territories, 1990–2019: A systematic analysis for the global burden of disease study 2019. *The lancet*, 396(10258), 1204-1222.
- Wittmann, E., Weyland, U., Seeber, S., Warwas, J., Striković, A., Krebs, P., & Wilczek, L. (2022). Test sensitivity in assessing competencies in nursing education. *Empirical Research in Vocational Education and Training*, 14(1), 3.
- Xu, T., Zuo, F., & Zheng, K. (2024). Parental educational expectations, academic pressure, and adolescent mental health: An empirical study based on CEPS survey data. *International Journal of Mental Health Promotion*, 26(2), 93.

**Edison Kabak**

Jurusan Keperawatan, Politeknik Kesehatan Kemenkes Jayapura-Papua  
Corresponding author: E-mail: [edi976kabak@gmail.com](mailto:edi976kabak@gmail.com)

DOI: <https://doi.org/10.33024/minh.v9i5.3156>