

# Cultural Competence Interventions for Staff in Long-Term Care: A Scoping Review

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## Introduction and Objective

- In 2019, there were approximately 703 million older adults in the world<sup>1</sup>, of which 2 to 5% of them reside in long-term care (LTC) facilities<sup>2</sup>
- While reports show that the majority of these residents are Caucasian<sup>4,5</sup>, recent demographic changes and global immigration patterns have led to greater numbers of ethno-culturally diverse, non-Caucasian and minority residents living in LTC<sup>6</sup>
- The LGBTQ2S+ older adult population also remains an understudied field of research despite the growing number of individuals identifying in this population group<sup>8</sup>
- Although cultural competence (CC) was explored in other healthcare settings, there is limited research regarding CC training in LTC, and of the research available, it has not yet been synthesized in a review
- Therefore, the objective of this review was to identify CC training for staff in LTC and investigate the impacts

## Methods and Results

- The extracted data were tabulated and incorporated with the following information: publication year, first author, location of study and long-term care, total population, type of staff participants, framework of cultural competence, description of training used, and major outcome(s) and finding(s)
- 1003 studies were screened at the title and abstract level, and 112 full-text articles were thoroughly evaluated
- Data were summarized from 11 studies that examined CC for staff in LTC
- 8 interventions were conducted in the United States, 2 training sessions occurred in Australia, and 1 training took place in Canada.
- The methods of delivery were categorized into four groups: (1) self-paced content modules; (2) both modules and discussion-based sessions; (3) in-person discussion and presentation-style delivery; and (4) companionship program
- \*For a brief summary of these cultural competency interventions, please email [catherine.tong@uwaterloo.ca](mailto:catherine.tong@uwaterloo.ca)

## Major Findings and Conclusion

- Five trainings focused on LGBT residents, four interventions were specific to ethnocultural groups, and two training sessions increased CC generally
- The majority of participants were nursing staff, but others included allied healthcare professionals, management, recreation, and some caregivers and service users
- Five studies used only educational modules, four studies used a one-day combination of lectures with a group activity, one delivered a half-day lecture session with a group discussion of real-life example, and one used a companionship program with a provider of the same ethnic background
- General improvements in knowledge, skills and attitudes were achieved post-training
- Very few studies have assessed the longer-term impact of these interventions, and only two studies included the perspectives of caregivers and residents
- Future studies should focus on changes that can be implemented institutionally, through policy changes, post-training

