



Cultural Competency in Nursing Research

Diane G. Cope, PhD, ARNP, BC, AOCNP®

According to data from the U.S. Census Bureau (2010), the demographics of the United States will change dramatically in the next 50 years. Non-Caucasians will more than double from 116.2 million in 2012 to 241.3 million by 2060, representing 57% of the U.S. population (U.S. Census Bureau, 2010). The Asian population also is expected to double in the next five years and comprise 8% of the U.S. population (U.S. Census Bureau, 2012). The United States also is becoming an aging population. By 2060, about one in five residents will be aged 65 years and older (U.S. Census Bureau, 2012). Individuals aged 85 years and older will more than triple to 18.2 million and represent 4% of the U.S. population (U.S. Census Bureau, 2012).

As a result, cultural sensitivity and cultural competence in nursing will be even more critical and have dramatic implications in the practice and research setting. Cultural competency has been viewed as a means to reduce health disparities and improve access to high-quality care that is knowledgeable and respectful of the healthcare needs of diverse patients (Agency for Healthcare Research and Quality, 2014). In this article, the concept of cultural competence as it influences the research process will be discussed, with strategies to facilitate cultural awareness and competence in nursing research.

Definitions

Several terms, such as *awareness* and *sensitivity*, have been used interchangeably with cultural competence. Therefore, a brief review of the various definitions are helpful to understand this concept. *Culture* is defined as beliefs, values, and customs shared by a specific group that hold meaning for members of the group. *Cultural sensitivity* is defined as awareness and sensitivity to a group's

values and beliefs, and recognizing how these differ from one's own values and beliefs. *Cultural competence*, on the other hand, is a broad concept that not only incorporates awareness and understanding of unique characteristics of a group's social and cultural attributes, health beliefs, and values, but also encompasses interventions that reflect this awareness (Cross, Bazron, Dennis, & Isaacs, 1989). Cultural competence in research is defined as "the ability of researchers and research staff to provide high quality research that takes into account the culture and diversity of a population when developing research ideas, conducting research, and exploring applicability of research findings" (Harvard Clinical and Translational Science Center, 2010, p. 6).

Strategies to Facilitate Cultural Competency in Research

Cultural competency, first introduced in the 1980s, initially focused on education, the provider-patient interaction, and models of care. An abundance of literature focuses on cultural competence and healthcare provider education, but literature on cultural competence in research is limited. However, basic concepts and strategies from educational literature can be borrowed and applied to cultural competence in research (Seibert, Stridh-Igo, & Zimmerman, 2002). The following discussion will highlight strategies to consider when embarking on research with cultural groups.

Complete Cultural Competency Training

An initial step for any researcher interested in conducting a study involving cultural groups is the completion of cultural competency training. The goal

of this type of education program is to acquire knowledge and skills in culturally and linguistically appropriate health care and to promote self-awareness about attitudes, beliefs, biases, and behaviors. Training programs, such as the free continuing education session "Culturally Competent Nursing Care: A Cornerstone of Caring" (<https://ccnm.thinkculturalhealth.hhs.gov>), are available online. Several systematic reviews have shown beneficial effects for healthcare providers following culturally competent educational interventions. Beach et al. (2005) conducted a systematic review of healthcare provider educational interventions and found that cultural competence training improved the knowledge, attitudes, and skills of healthcare professionals, and training affected patient satisfaction. In a systematic review of interventions to improve cultural competency in healthcare providers, Truong, Paradies, and Priest (2014) found moderate evidence of improvement in healthcare providers' cultural competency knowledge, attitudes, and skills. However, the studies reviewed had considerable heterogeneity in relation to interventions used, patient populations, healthcare provider populations, and outcomes of care. The authors concluded that the concept of cultural competency as it relates to practice and research is complex and that additional research is needed.

Examine the Population of Interest

Research involving cultural groups that differ from a researcher's own

ONF, 42(3), 305–307.

doi: 10.1188/15.ONF.305-307