Beginning the Journey to Cultural Humility and Cultural Competence  

By Linda J. Keilman, DNP, MSN, GNP-BC, FAANP, and Fatima Sheikh, MD, MPH, CMD  

Strength lies in differences, not in similarities. —Stephen R. Covey  

The current global pandemic has brought to the forefront the health inequities, disparities, and racism that have existed in health care and in long-term care for decades. The Institute of Medicine’s report Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care (National Academies Press, 2003) stressed the importance of cultural competence (CC) in health care (available at https://bit.ly/3Po6YMI).  

Although CC has been emphasized in trainings for health care professionals, it appears it has not made a true difference in the way individuals are being treated within health care systems in the United States. We present a brief overview of culture as the foundation for understanding and interacting with diverse human beings holistically within the environment of health.  

Culture  

Culture includes beliefs, norms, values, ideas, customs, manners, habits, and behaviors that are passed down from one generation to the next. Culture may evolve from ethnic, racial, religious, geographic, and other social groups, but it’s important to note that culture is not stagnant, nor is it homogenous. Individuals may contest or adapt the cultural norms within their cultural groups.  

As Tamatha Arms, PhD, and colleagues point out in “Culturally Informed Mental Health Care of Marginalized Older Adults,” one’s culture “can often be identified symbolically through language, behaviors, music, art, literature, food, clothing, jewelry, makeup, hair, mannerisms, and religion that is integrated into daily life” (Advances in Family Practice Nursing, vol. 4, ed. L.J. Keilman, 37–53 [Elsevier, 2022]).  

It is important to recognize various cultural viewpoints that older adults have regarding life, physical health, and mental health. This can be done through always striving for CC but practicing cultural humility (CH) as well.  

Cultural Competence  

Competence refers to having sufficient knowledge and skill for a particular duty or role. When applied to culture, it refers to having sufficient knowledge and skills related to cultural diversity. CC can also be defined as “the knowledge, skills, attitudes, and behavior required of a practitioner to provide optimal health care services to persons from a wide range of cultural and ethnic backgrounds” (Health Aff. 2002;21:90–102).  

Over the last few decades, the cultural composition of the U.S. population has changed, and this change is reflected in the diversity of the older adult population in nursing homes. The staff working in nursing homes have become more culturally diverse as well. Given the culturally changing landscape of health care, to meet the needs of the culturally diverse population in nursing homes it is crucial for health care professionals to have an accurate baseline knowledge of different cultures.  

It is also imperative that staff have the skills to address cultural differences in a sensitive and empathetic manner. Nursing home organizations should have regular CC training/education for all staff. The goal of CC is to learn about another person’s culture rather than reflect on one’s own background. Becoming culturally competent would enable staff to be sensitive to cultural differences and allow for mutual understanding and respect.  

CC is much needed in long-term care, and this is an opportunity for nursing home culture to embrace and integrate cultural diversity. In addition, it is important for each one of us working in nursing home environments to be aware of our personal biases: cultural humility is a first step toward CC.  

Cultural Humility  

Cultural humility (CH) is the ability to reflect on and critique one’s own knowledge and attitudes about and toward cultures that are different than one’s own.  

Regarding physician training in multicultural education, Melanie Tervalon, MD, MPH, and Janh Murray-Garcia, MD, MPH, have described four aspects of CH (J Health Care Poor Underserved 1998;9:117–125):  

1. A personal and lifelong commitment to self-evaluation, self-reflection, and self-critique.  
2. “Patient-focused interviewing and care” that “signals to the patient that the practitioner values what the patient’s agenda and perspectives are.”  
3. “Community-based care and advocacy,” including a desire to develop partnerships with people and groups who advocate for older adults.  
4. Institutional consistency and accountability, such as developing specific goals (e.g., CH training) to be accomplished in a certain time frame.  

CH also takes an ongoing commitment to recognizing and realigning the power dynamics and imbalances among health care professionals, staff, and administration in facilities where care of older adults occurs. None of us will ever reach 100% CC or be an expert in any specific cultural population, including the cultures we identify with ourselves. But we can make the 5Rs and the four components of CH part of our everyday lives. We can seek to achieve CH and strive for CC to ensure health equity in nursing home communities. We can engage in this journey, and the difference will be amazing!  

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### BOX 1. 5RS OF CULTURAL HUMILITY  

<table>
<thead>
<tr>
<th>Concept</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Reflection</td>
<td>The act of thinking about one’s own feelings, behaviors, attitudes, and biases to understand who one is as a unique individual; key to self-awareness and understanding why one may think or act in a certain manner.</td>
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<tr>
<td>Respect</td>
<td>Acceptance of self and others for who they are as unique individuals regardless of age, gender, ethnicity, sexual identity/preference, religion, socioeconomic status; learned acceptance.</td>
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<tr>
<td>Regard</td>
<td>Having consideration, respect, and concern for others.</td>
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<tr>
<td>Relevance</td>
<td>Pertinence — the appropriateness of words or phrases given the situation and environment.</td>
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<tr>
<td>Resiliency</td>
<td>Cognitive, emotional, and behavioral flexibility and adjustment; creating positive relationships and purpose; mindfulness.</td>
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