

Learning Cultural Competence in Healthcare: Self-assessment and Education

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Introduction

Study 1

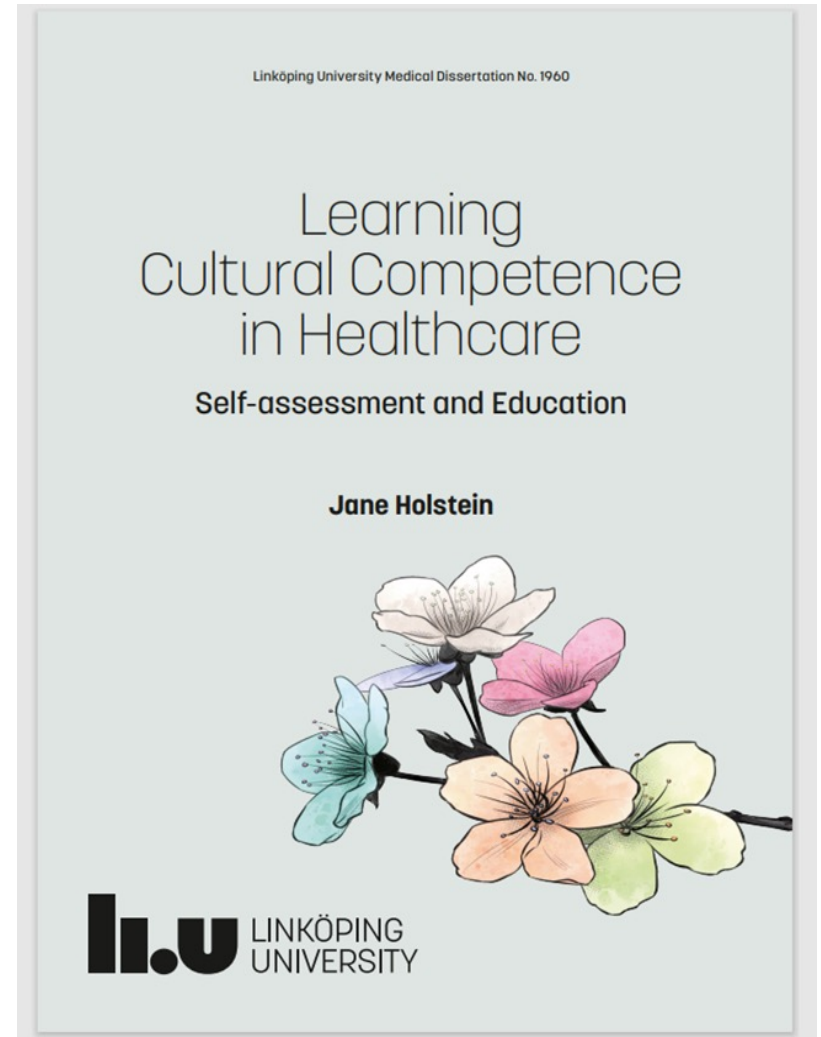
Pettersson S., Holstein J., Jirwe M., Jaarsma T, & Klompstra L. (2022) Cultural competence in healthcare professionals, specialised in diabetes, working in primary healthcare—A descriptive study. *Health and social care in the community*. 2022; 30: e717–e726 <https://doi.org/10.1111/hsc.13442>

Study 2

Holstein, J., Lindh Falk, A., Sandqvist, J., Jaarsma T., & Björk, M. Co-Designing Interprofessional Education to Enhance Cultural Competence in Swedish Healthcare [Submitted manuscript]

The PhD-thesis

<https://doi.org/10.3384/9789180759557>



Introduction

- In a multicultural Sweden, healthcare has difficulty meeting patients' cultural needs.
- Swedish healthcare legislation emphasises on patient autonomy, participation, and access to high-quality care.
- Migrant patients experience discrimination, language and cultural barriers, and insufficient cultural competence among healthcare staff.
- Cultural competence can improve communication and increase patient satisfaction. There is a need to understand the level of cultural competence among healthcare staff and to develop an education in this area within Swedish healthcare.

Objectives

Study 1

to evaluate the perceived level of cultural competence among healthcare professionals

Study 2

to develop an educational programme to enhance cultural competence in healthcare.



Cultural Competence Assessment Instrument – Swedish version (CCAI-S)

- **Awareness and openness** (6 items).
- **Interaction skills** (3 items).
- **Organisational support** (4 items).

Six-point Likert scale, ranging from “Strongly agree” to “Strongly disagree.”

Holstein J., Liedberg GM., Öhman A., & Kjellberg A. (2019) Validity and utility of the Swedish version of the Cultural Competence Assessment Instrument. *British Journal of Occupational Therapy*, 2019 ;82(7) :422–432 <https://doi.org/10.1177/0308022619825813>

Holstein, J., Liedberg, G. M., Suarez-Balcazar, Y., & Kjellberg, A. (2020). Clinical Relevance and Psychometric Properties of the Swedish Version of the Cultural Competence Assessment Instrument. *Occupational Therapy International*, volume 2020, Article ID 2453239, 10 pages <https://doi.org/10.1155/2020/2453239>

Methods

Study 1

A web-based questionnaire based on CCAI-S was used to measure cultural competence in 279 healthcare professionals working in primary healthcare diabetes teams .

Data was analysed with descriptive statistics, univariate analyses, and linear regression.

Study 2

A co-design methodology (Boyd, 2010) was used to develop a cultural competence education with 22 professionals and patients in pain rehabilitation, and researchers.

Data were collected and analysed in parallel.

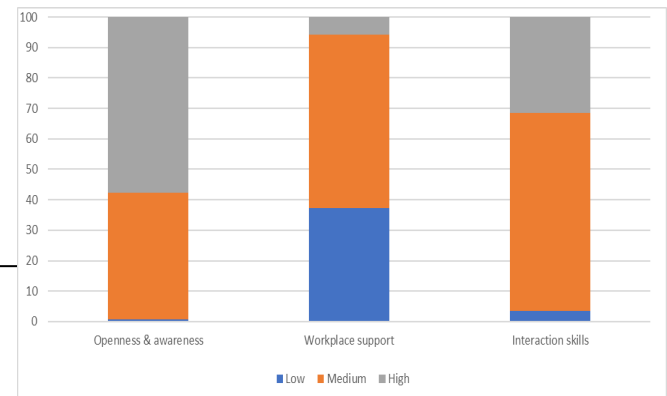
Results study 1

The perceived cultural competence among healthcare professionals

- 58% perceived themselves to be open and aware
- 36% reported good interaction skills
- 6% perceived organisational support.

Two factors related to cultural competence

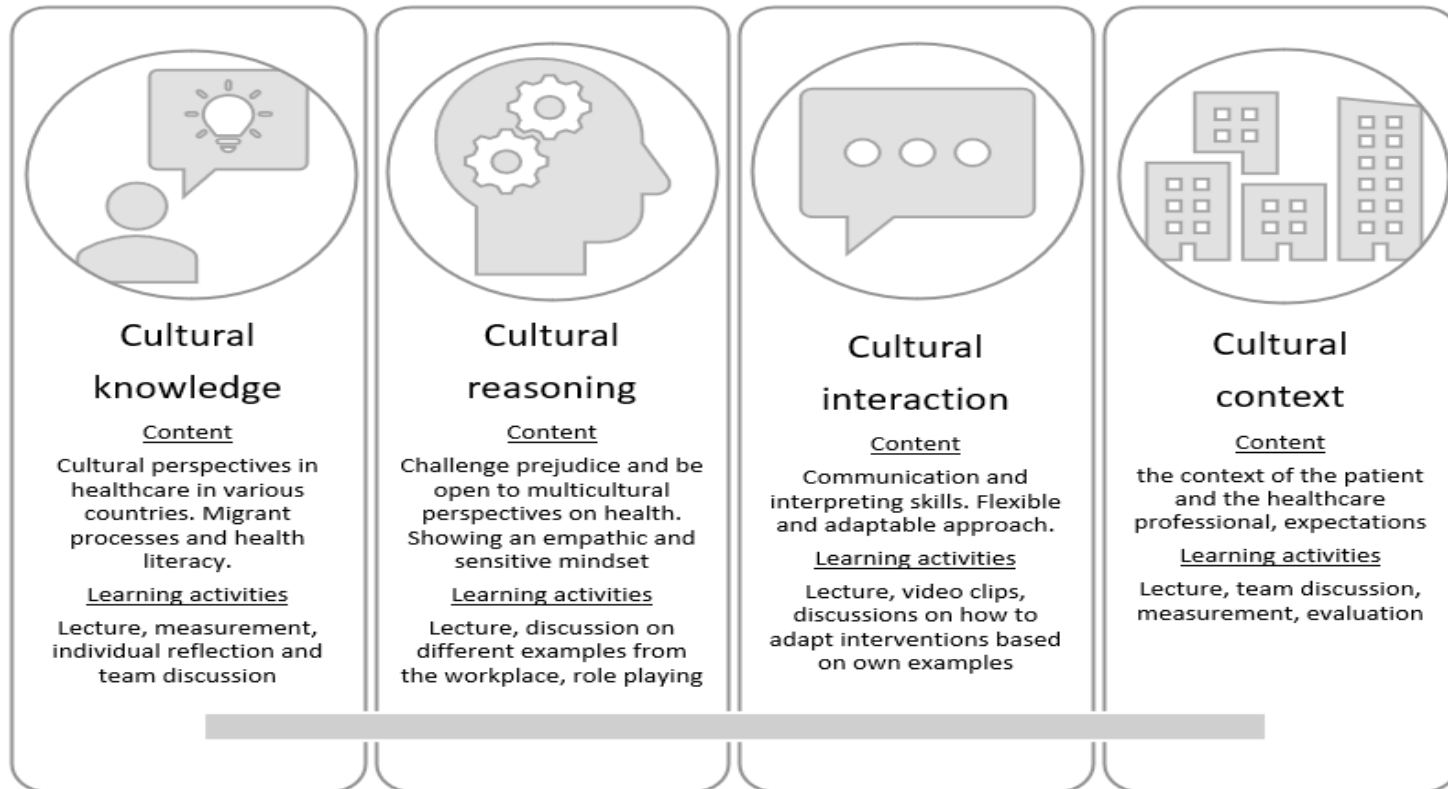
- the high percentage of migrant patients at the healthcare center
- If the healthcare professionals had previously developed cultural competence through practical experience, education, and/or self-directed learning.



Results study 2

Education

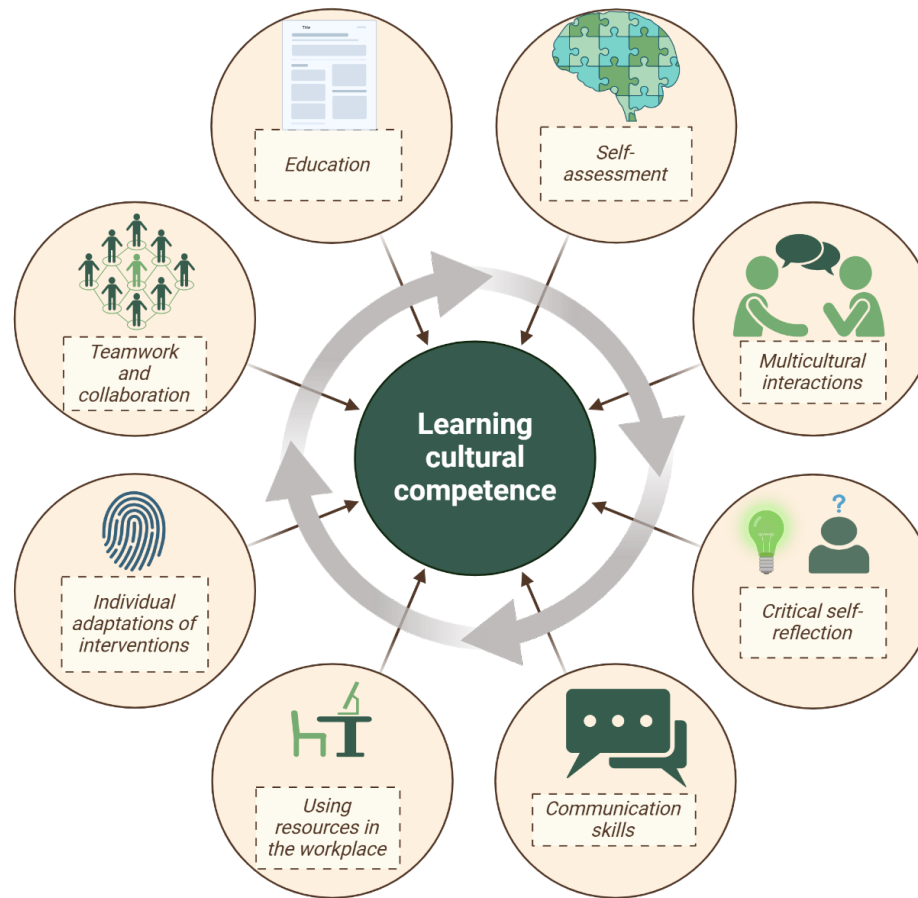
“Practicing cultural competence in healthcare”



Conclusion

- The evaluation of CCAI-S showed limited organisational support and a need for further education among staff.
- The co-designed education has the potential to strengthen cultural competence. The CCAI-S and the education can serve as interventions to support learning within healthcare organisations.
- Promoting cultural competence in Swedish healthcare can contribute to a more inclusive and effective system by fostering empathy, critical self-reflection, and improved communication between patients and staff.

The cultural competence learning process



(Holstein, 2025)

Thank you for listening! –jane.holstein@liu.se

