

Effective Cultural Competence Training Programs for Public Health Workers: A Delphi Study

Duckhee Chae, PhD, RN¹ & Jin-A Lee, MSN, RN²

¹College of Nursing, Chonnam National University, ²Christian College of Nursing, Gwangju, South Korea

INTRODUCTION

- Increased racial and ethnic diversity in the population brings challenges for Korean public health workers (PHWs) to provide culturally competent services.
- Only a handful of PHWs who provide services to migrants received relevant education.
- Educational interventions are known to have positive effects not only on improvements of cultural competence of health care workers, but also on the health outcomes of patients.
- E-learning can be an appropriate way to educate the PHWs who are working in the community without being limited by time and space.
- However, current evidence is insufficient to draw generalizable conclusions about effective education interventions, due to heterogeneity of the interventions in the content, scope, duration, implementation, and outcomes evaluation.

PURPOSE

The aim of this study was to identify the core training contents of cultural competence and effective e-learning strategies from a Korean perspective.

METHODS

> Study design

A Delphi study of two online surveys was conducted to gain agreement on the core training contents of cultural competence and effective e-learning strategies among experts. The study was conducted in two phases: preparation and Delphi rounds.

> Participants

We intended to include participants with different professional backgrounds, such as nursing, education, social welfare, public administration, and anthropology.

The inclusion criteria for this study were an expert who:

- Wrote at least two cultural competency-related papers within the last 10 years
- Wrote a book on cultural competency within the last 10 years
- Had experience of implementation of cultural competency training programs

We contacted 23 experts by telephone and 16 of them responded to the call and participated in the study.

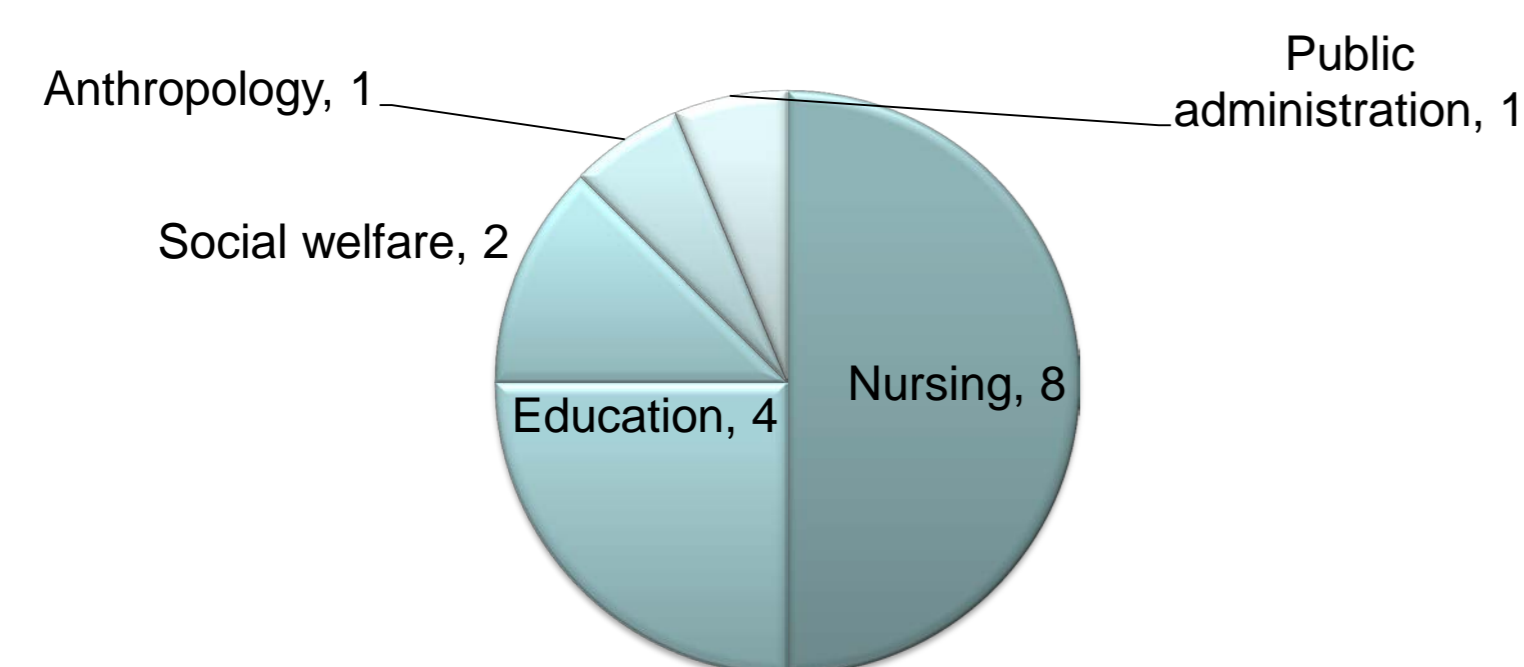


Fig. 1 Number of experts

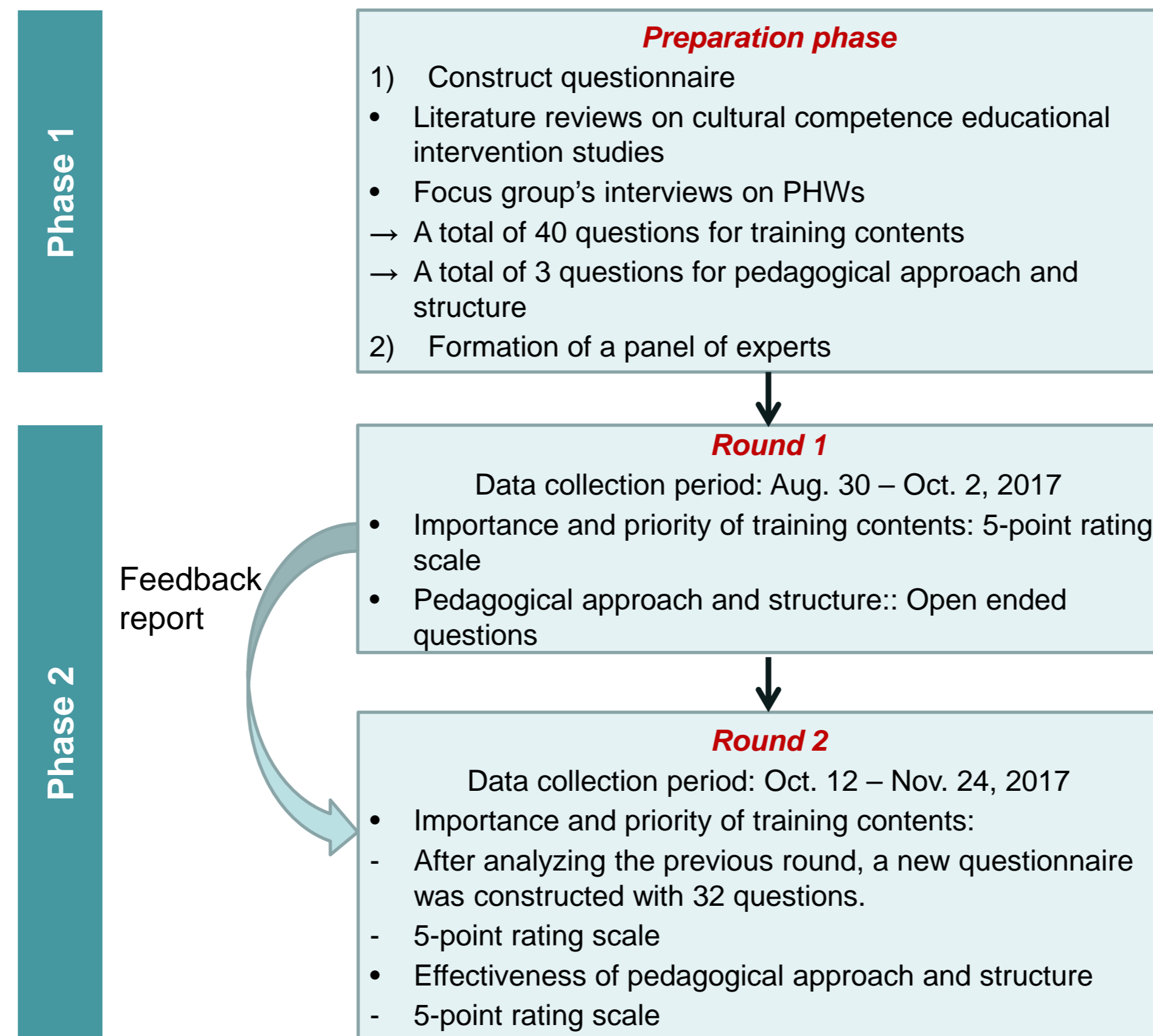


Fig. 2 Data collection process

> Ethical considerations

Approval from the author's Institutional Review Board was obtained (approval No. 1040198-107725-HR-053-02).

> Analyses

We analyzed responses to scaled items using mean, median, standard deviation, and inter-quartile range. Consensus was considered to be reached when the median was 4.0 or greater and the agreement was 75% or greater.

RESULTS

- All experts consented to participate responded to two-round surveys without drop-out.
- The final level of the mean and SD for all items that reached consensus are shown in Table 1 and Fig. 3.

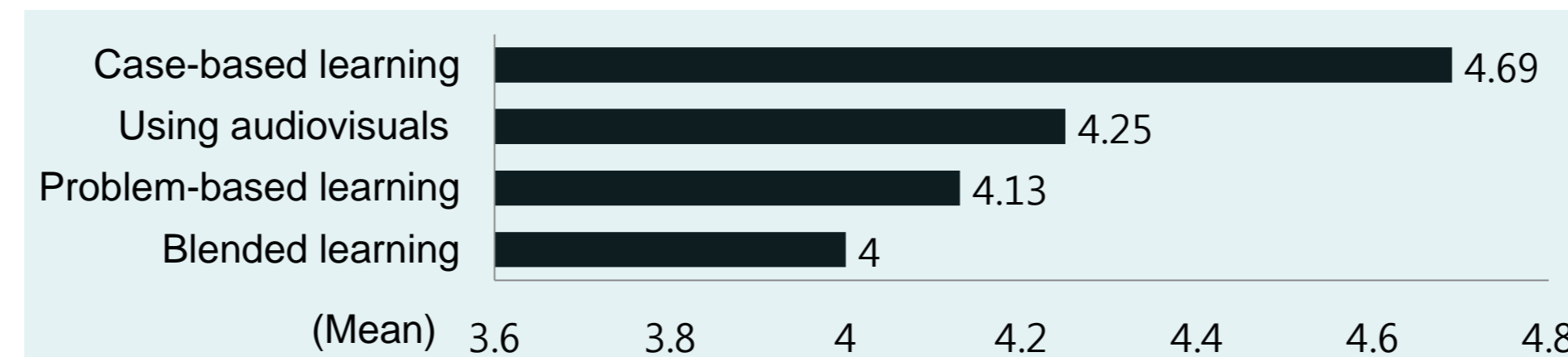


Fig. 3 Teaching and learning methods which reached consensus

- The expert panel rated that the most effective teaching method was case-based learning, with seven to eight sessions of training and less than 30 minutes of training per session. Experts agreed that all PHWs in contact with migrants should be trained. Depending on their duties, it is necessary to distinguish them as subjects for basic or advanced courses.

Table 1 Training contents which reached consensus

Categories	Importance	Priority
Awareness		
Need for cultural competence of PHWs	4.88 (0.34)	4.88 (0.34)
Self-awareness	4.76 (0.49)	4.67 (0.62)
Migrants and health equity	4.63 (0.50)	4.56 (0.63)
Characteristics of multicultural families in Korea	4.63 (0.62)	4.19 (0.75)
Influence of culture on individuals' thinking and behavior	4.50 (0.63)	4.31 (0.79)
Current situation and challenges of health services for migrants	4.44 (0.73)	4.31 (0.79)
Understanding globalization, migration, and Korea's multicultural phenomenon	4.31 (0.79)	3.94 (1.00)
Understanding culture, ethnicity, diversity and cultural competence concepts	4.14 (0.72)	3.82 (0.54)
Knowledge		
Health characteristics according to race and ethnicity	4.88 (0.50)	4.88 (0.50)
Understanding health and ill beliefs and health behavior	4.63 (0.62)	4.56 (0.63)
Difference in pain response	4.63 (0.62)	4.50 (0.73)
Differences in verbal and nonverbal communication	4.56 (0.63)	4.38 (0.72)
Migrants and health literacy	4.44 (0.63)	4.19 (0.66)
Differences in lifestyle	4.31 (0.60)	4.31 (0.60)
Religious practice and culture	4.19 (0.75)	4.50 (0.73)
Understanding of traditional medical practice	4.06 (0.68)	3.94 (0.77)
Health policy of multicultural society	4.00 (0.52)	4.06 (0.44)
Cultural sensitivity		
Acceptance of migrants' health beliefs and behaviors	4.69 (0.60)	4.63 (0.62)
Respect for the cultural beliefs of migrants	4.63 (0.62)	4.50 (0.63)
Promoting sensitivity to cultural diversity	4.38 (0.50)	4.38 (0.50)
Respect for self-determination of migrants to health	4.38 (0.72)	4.25 (0.68)
Cultural skills		
Establishing a trusting relationship with migrants	4.81 (0.40)	4.63 (0.50)
Cultural assessment skills	4.69 (0.48)	4.69 (0.60)
Effective verbal and non-verbal communication skills	4.63 (0.50)	4.63 (0.62)
Strategies to improve health behaviors and treatment adherence of migrants	4.63 (0.50)	4.63 (0.50)
How to plan health care with migrants	4.63 (0.62)	4.31 (0.87)
Use of negotiation and problem-solving skills	4.50 (0.52)	4.25 (0.58)
Prioritize health programs for community migrants	4.38 (0.50)	4.13 (0.72)
How to use an interpreter for effective communication	4.31 (0.60)	4.13 (0.72)
Community cooperation for migrant health	4.13 (0.34)	3.94 (0.44)
Simple greeting and useful multilingual expression	4.06 (0.68)	3.94 (0.68)

CONCLUSIONS

This study presented important and prioritized training contents and effective e-learning strategies needed to develop the cultural competence of Korean PHWs. This study demonstrated that the Delphi survey using e-mail to be an efficient methodology for seeking expert opinions to develop an intervention.