

Perspective

Nursing in a multicultural world: Cultural competence and sensitivity as ethical imperatives

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ABSTRACT

Healthcare today is marked by growing cultural diversity, which profoundly shapes the way nurses deliver care. This perspective article argues that cultural competence and cultural sensitivity are not optional skills but essential dimensions of effective nursing practice. Positioned through a reflective and theoretical lens, this article examines how nurses' awareness, knowledge, and skills intersect with sensitivity to patients' cultural values and beliefs to promote trust, equity, and improved health outcomes. It discusses persistent barriers including language differences, implicit biases, and systemic inequities that hinder culturally responsive care. Drawing from current discourse and professional experience, the article emphasizes the critical role of nurses as advocates who bridge cultural gaps within healthcare systems. The perspective advanced here is that integrating cultural awareness into both nursing education and clinical practice is central to reducing health disparities and enhancing the patient experience. Ultimately, cultural competence and sensitivity should be reframed not as optional attributes but as core nursing responsibilities vital for advancing equity in a diversifying world.

Keywords: caring, perspective, cultural competence, cultural diversity, cultural sensitivity, nursing

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BRIEF INTRODUCTION

Global migration has reshaped healthcare systems, with more than 280 million people worldwide now living outside their country of origin (WHO, 2023). Hospitals and clinics are increasingly multicultural spaces where patients' beliefs, practices, and expectations may differ significantly from dominant health models. While diversity enriches care environments, misalignment between cultural perspectives and healthcare delivery can generate mistrust, poor adherence, and enduring health disparities (Togioka & Young, 2024).

Nurses, as the largest group of health professionals and the closest point of contact with patients, are uniquely positioned to respond. International frameworks such as the ICN Code of Ethics and guidelines on culturally competent care stress that respect for cultural identity is integral to safe, equitable, and effective nursing practice (International Council of Nurses, 2021; Berhanu et al., 2024). Yet the question persists: how can cultural competence and sensitivity be fully embedded into practice, education, and policy?

ARGUMENT/INSIGHT

Cultural Competence and Cultural Sensitivity: A Complementary Pair

Cultural competence is broadly defined as the ability of healthcare providers to interact effectively with individuals from diverse cultural backgrounds (Deering, 2022). It encompasses not only knowledge of cultural traditions but also the skills and attitudes necessary to integrate these understandings into patient care. More recent perspectives, however, critique narrow definitions that assume cultural competence is achieved merely by acquiring knowledge about "other" cultures. Instead, cultural competence should be understood as an ongoing, reflective process shaped by lived experience, education, and institutional support (Majda et al., 2021).

This evolution in definition points to a gap: while many studies affirm the importance of cultural competence (Deering, 2022), fewer critically examine how competence is taught, evaluated, and sustained in real practice. For instance, some argue that competence remains too individual-centered, placing responsibility solely on nurses rather than recognizing the systemic changes needed in institutions (Cerdeña et al., 2020). This highlights the need to move from viewing cultural competence as static "knowledge acquisition" toward a model that emphasizes continuous reflection, skill development, and organizational accountability.

Cultural competence has significant implications for patient experience. Research suggests that culturally aligned care fosters trust and improves adherence to treatment plans, whereas misalignment may result in mistrust, lower satisfaction, and poorer outcomes (Vela et al., 2022). Importantly, implicit biases which are often unrecognized by healthcare professionals can reinforce inequities in care (Song & Willy, 2024). Thus, competence is not simply about knowledge of customs but about cultivating awareness of one's own assumptions and addressing structural barriers.

Predictors of cultural competency, such as prior exposure to diverse communities, formal diversity training, and cross-cultural clinical experiences, have been identified (Johnston et al., 2023). Nursing curricula in the Philippines and beyond should integrate these predictors into training, recognizing that many graduates will work in multicultural settings globally. Yet, as studies also emphasize, the attitudes and confidence of nurses, more than rote knowledge, remain the strongest drivers of culturally competent practice.

Closely linked to competence is cultural sensitivity, which emphasizes respect, empathy, and inclusivity in care (Oikarainen et al., 2019). While competence focuses on knowledge and skills, sensitivity highlights the attitude with which care is delivered. A nurse may understand a patient's cultural background, but without sensitivity, care risks becoming tokenistic or mechanical.

Barriers such as language differences, stereotyping, and lack of cultural awareness remain significant obstacles to culturally sensitive care (Vandecasteele et al., 2024). Importantly, sensitivity requires moving beyond mere "tolerance" to a genuine appreciation of diversity in practice (Deering, 2022). This distinction suggests a practical challenge as many nursing programs teach cultural awareness but stop short of fostering the affective skills, namely: empathy, humility, and advocacy, that constitute true sensitivity.

Thus, while literature often treats competence and sensitivity interchangeably, a critical synthesis shows they must be seen as complementary but distinct: competence provides the foundation of knowledge and skills, whereas sensitivity ensures that such knowledge is applied with respect and humility.

Nurses as Advocates and Change Agents

Nurses, as the largest group of healthcare providers, are at the forefront of delivering culturally responsive care. Studies highlight that formal education and training are important, but equally necessary are institutional supports such as continuous professional development, mentorship, and policies that encourage inclusivity (Johnston et al., 2023). Without these, cultural competence risks being reduced to an individual's burden.

Challenges reported by nurses include intrapersonal conflicts, differing cultural expressions of illness and pain, and organizational constraints (Shahzad et al., 2021). These findings suggest that competence and sensitivity cannot be achieved in isolation but require collective action for nurses working with institutions, communities, and patients' families.

Evidence also points to promising interventions. For example, culturally tailored programs that leverage technology, family engagement, and community resources improve adherence and outcomes (Joo & Liu, 2021). Yet, gaps remain in scaling these interventions and embedding them systematically within healthcare organizations.

Addressing Barriers and Structural Challenges

This article underscores that cultural competence and sensitivity are foundations of nursing care. These are not static achievements but evolving processes that demand continuous reflection, institutional commitment, and policy

support. The literature reveals ongoing tensions: while competence is often framed as knowledge-based, sensitivity emphasizes relational skills and empathy. Meaningful and equitable care requires both dimensions working in tandem.

This issue is particularly evident in today's healthcare landscape in the Philippines, where indigenous groups such as the Sama-Bajau often encounter prejudice and institutional racism during hospitalization. Their distinct cultural backgrounds necessitate specialized approaches to care. However, nurses are frequently challenged by language barriers and limited understanding of how personal history and cultural beliefs shape health-seeking behaviors (Wylie & McConkey, 2018). This gap results in inadequate care delivery and perpetuates inequities.

Toward A Paradigm of Equity in Care: An Ethical Imperative Insight

Addressing these challenges requires a paradigm shift toward health equity in the face of cultural differences. Such a shift will create fairer opportunities for both healthcare professionals and patients, regardless of cultural background or beliefs. By acknowledging the historical and systemic power structures embedded in healthcare, cultural competence and sensitivity can be reframed as progressive, ongoing learning processes essential in a rapidly diversifying world. The call to action is urgent: as populations grow more multicultural, health systems must prioritize culturally responsive care.

A strong theoretical foundation for this effort is provided by Madeleine Leininger's Transcultural Nursing Theory, which emphasizes that care is the essence of nursing and a distinct, unifying, and central focus of the profession. Leininger argued that effective nursing care must be culturally congruent that is aligned with patients' cultural values, beliefs, and lifeways rather than imposed through dominant cultural practices (Leininger & McFarland, 2006). The theory proposes three modes of nursing action: cultural care preservation/maintenance, cultural care accommodation/negotiation, and cultural care repatterning/restructuring. These strategies enable nurses to deliver care that is both respectful and effective across cultural contexts. By embedding cultural competence in Leininger's framework, nursing practice moves beyond mere awareness of differences, integrating cultural understanding into the care process itself. This positions culturally responsive care not as an "add-on," but as a professional responsibility essential for reducing disparities and achieving holistic, patient-centered outcomes.

Looking ahead, the nursing profession must transition from simply describing why cultural competence and sensitivity matters to implementing actionable strategies for how it can be operationalized (Figure 1). This requires a multifaceted approach. First, reflective practice should be integrated into training, with nursing education providing structured opportunities for students to examine personal biases, reflect on cross-cultural encounters, and engage with diverse communities (Johnston et al., 2023). Second, healthcare institutions must move beyond one-time workshops and instead institutionalize continuous education through regular in-service programs on cultural competence and sensitivity (Majda et al., 2021). Third, systemic barriers must be addressed by strengthening organizational supports such as interpreter services, culturally inclusive patient materials, and equitable resource allocation (Oikarainen et al., 2019). Fourth, nurse advocacy

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should be fostered, empowering practitioners to champion the needs of patients facing cultural marginalization and to recognize cultural competence as both an ethical responsibility and a matter of social justice (Vandecasteele et al., 2024). Finally, measurable indicators must be developed, with healthcare systems establishing evaluation frameworks that assess cultural competence at both individual and institutional levels to ensure accountability and sustained progress (Majda et al., 2021).

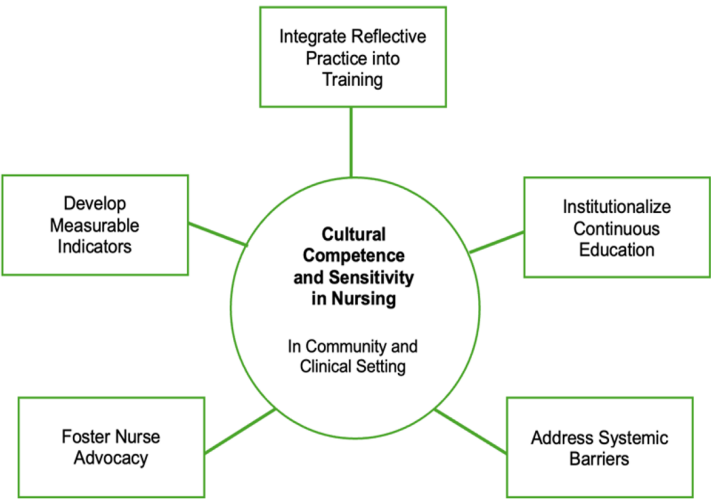


Figure 1. Approaches for cultural competence and sensitivity in nursing

CONCLUSION

In an era of global migration and increasing cultural diversity, cultural competence and sensitivity must be recognized not as optional skills but as core professional and ethical imperatives in nursing. Achieving these requires not only individual commitment but also systemic changes in education, training, and policy. By integrating competence and sensitivity into everyday practice, nurses can build trust, reduce disparities, and deliver care that is truly patient-centered and equitable.

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Competing Interest

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