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A scoping review protocol of the language and cultural issues when screening, assessing and caring for people with dementia or mild cognitive impairment for ethnic minority groups

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ADMINISTRATIVE INFORMATION

Support - National Institute for Health.

Review Stage at time of this submission - Formal screening of search results against eligibility criteria.

Conflicts of interest - None declared.

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Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 5 March 2025 and was last updated on 5 March 2025.

INTRODUCTION

Review question / Objective The overall aim of this scoping review is to explore the impact of language and culture when screening, assessing and caring for people with dementia or mild cognitive impairment from ethnic minority groups. We seek to address the following research question: What is the nature, range and extent of the literature regarding the impact of culture and language when screening, assessing or caring for people with dementia/MCI?

Background Approximately 50 million people have dementia across the globe, with this increasing by 10 million per year (World Health Organisation, 2020). The prevalence of dementia and mild cognitive impairment is likely to be much higher, with cultural beliefs and perceptions regarding dementia and its aetiology impacting diagnosis, and subsequently, care and treatment (Rovner et al., 2013). For example, dementia is stigmatised in some minority communities, which can prevent the individual and their carers from seeking dementia

or MCI screening, assessment and support (Siette et al., 2023).

Rationale Timely diagnosis of dementia and mild cognitive impairment (MCI), and provision of appropriate health and social care, are crucial to ensuring people can safely remain as independent as possible. Current approaches to dementia and MCI screening, assessment and care in the UK may not be culturally appropriate across diverse populations. For instance, dementia and MCI instruments are culturally influenced, which will affect interpretation. There is a need to understand the range, nature, and extent of literature on language and cultural issues when screening, assessing and caring for people with dementia from different ethnic groups. The scoping review will examine the use of dementia/MCI screening and assessment tools with individuals who speak different languages, and the wider cultural issues faced in care provision and co-ordination.

METHODS

Strategy of data synthesis We ran searches on EBSCO (CINAHL, Social Sciences- full text), Ovid (Medline, PsycINFO), ProQUEST (Applied Social Sciences Index and Abstracts), and Web of Science databases. Sources were selected through discussion within the research team and in liaison with a University of Manchester library information specialist. The search strategy used is as follows (adapted accordingly for the different databases): (native tongue or mother tongue or dialect or diverse linguistic communities or language or culture or custom or heritage or tradition or cultural factor or culture minorities or cultural group or minority health or cultural-specific tools or immigrant group or ancestry or religion or ethnicity or nationality or nationalities or race or ethnic minorities or ethnic aspect or racial aspect or ethnic difference or race difference or racial minority or ethnic group or minority population or ethnically diverse communities or ethnic specific services or diverse ethnic minority communities or cultural adaptation* or cultural sensitivity or cultural identity or culturally linguistically diverse background* or minority ethnic communit* or ethnoracially diverse population* or culture-oriented assessment* or culturally tailor* or culturally diverse group* or indigenous health consideration* or culturally or linguistically informed healthcare or cultural competence) AND (dementia or cognitive decline or alzheimer's or mild cognitive impairment or MCI) AND (caring or care or care planning or support or supporting or screening or screen or test or testing or detection or identification or assess or assessment or evaluation or diagnosis or diagnose or diagnosing) [restricted to English Language, peer reviewed articles and 2014 to present date. Searched by Title/Abstract] Google will also be used to search for relevant grey literature in the public domain. For data analysis, we will follow Arksey & O'Malley's (2005) approach in that data will be charted, collated and summarised.

Eligibility criteria Inclusion

- A focus on individuals from an ethnic minority group who may require dementia/MCI screening, assessment or care (including young onset dementia)
- All ages, genders, ethnicities and settings.
- English language and papers exploring sign language.
- International studies (i.e., any country).
- Papers published from 2014.

Exclusion:

- People with acquired brain injury or cognitive impairment from birth.
- Any articles not published in English.

- Not about dementia/MCI.
- Does not focus specifically on language, ethnicity or cultural issues.
- Not about screening, assessment, or care.
- Screening, assessment and care coordination for anything OTHER than dementia/MCI
- Articles regarding epidemiology e.g., prevalence.
- Any articles regarding genetic/protein/biomarker testing/clinical research.
- Articles pertaining to accessing healthcare insurance.
- Articles focussing only on psychometric properties of tools and translating these
- Reviews.
- Case reports.
- Lists of conference proceedings, research letters, retractions.
- Papers published before 2014.
- A focus on informal carers or staff caring for individuals with dementia/MCI.

Source of evidence screening and selection A team of eight researchers will review the articles obtained from searches. Two reviewers will independently screen the titles/abstracts of all articles resulting from the database searches following de-duplication. Any disagreements will be resolved through discussion between the two reviewers. Any which cannot be resolved will be taken to a weekly research team meeting and resolved through discussion and clarification of the eligibility criteria. Articles meeting the inclusion criteria will be stored in a Microsoft Excel spreadsheet for full text screening. Two reviewers will independently read the full texts of articles for full text screening. Any disagreements regarding inclusion that cannot be resolved through discussion will be brought to the weekly research team meeting and a consensus reached.

Data management Screening and data extraction will be undertaken in Microsoft Excel.

Language restriction English language studies will be included.

Country(ies) involved England.

Keywords Dementia; mild cognitive impairment; language; culture; ethnicity; screening; assessment; care.

Contributions of each author

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