INPLASY

Intercultural Barriers in Nursing Care for Indigenous Older Adults: A Scoping Review

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ADMINISTRATIVE INFORMATION

Support - No support.

Review stage at the time of initial registration - Data analysis.

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 3 November 2026 and was last updated on 3 November 2026.

INTRODUCTION

Review question / Objective What are the linguistic and cultural barriers, as well as the intercultural experiences and perceptions, described in the literature regarding the care of indigenous older adults in various healthcare settings?

Background Indigenous older adults experience health care needs shaped by aging, cultural diversity, linguistic differences, traditional knowledge, and social and organizational conditions. Nursing professionals play an essential role in providing comprehensive and culturally appropriate care; however, communication difficulties, limited recognition of Indigenous health beliefs, differences between traditional and biomedical approaches, and institutional barriers may affect the quality, accessibility, and continuity of health services.

Intercultural nursing care requires more than linguistic adaptation. It involves recognizing the cultural values, practices, experiences, and preferences of Indigenous older adults, as well as promoting respectful relationships between health professionals, patients, families, and communities. Cultural competence, cultural safety, effective communication, and community participation are relevant elements for addressing inequalities and improving the responsiveness of health services.

Although research has explored different aspects of nursing and health care for Indigenous populations, the available evidence concerning the specific barriers encountered when caring for Indigenous older adults is dispersed across different countries, health care settings, and methodological approaches. This diversity makes it necessary to systematically map the existing knowledge, identify recurring barriers and intercultural strategies, and recognize areas that require further investigation.

Therefore, this scoping review aims to identify, organize, and synthesize scientific evidence and gray literature on linguistic, communicative,

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cultural, relational, professional, and organizational barriers, as well as intercultural experiences and strategies related to nursing care for Indigenous older adults in different health care contexts. The review follows the methodological guidance of the Joanna Briggs Institute (JBI) and the PRISMA extension for Scoping Reviews (PRISMA-ScR).

Rationale This scoping review does not focus on a specific disease or medical condition. Instead, it examines intercultural barriers encountered in nursing care for Indigenous older adults across different health care settings.
Indigenous older adults may experience linguistic and communication difficulties, differences between traditional and biomedical understandings of health, limited recognition of cultural practices, and organizational barriers that affect access to and continuity of care. These challenges may be compounded by age-related health needs and structural inequalities.
Understanding these barriers is essential for promoting culturally appropriate, respectful, equitable, and person-centered nursing care. Mapping the available evidence may help identify intercultural strategies, professional training needs, and knowledge gaps relevant to health services caring for Indigenous older adults.

METHODS

Strategy of data synthesis The search strategies were developed according to the Population, Concept, and Context (PCC) framework recommended by the Joanna Briggs Institute (JBI) for scoping reviews. Search terms related to nursing professionals, Indigenous peoples, and older adults were combined using Boolean operators (AND, OR), truncation, and quotation marks, according to the characteristics of each search platform.

The literature search was conducted in four electronic bibliographic databases: PubMed, Web of Science Core Collection, SciELO, and MedicLatina. The following search strings were transcribed from the original search histories.

1. PubMed (NCBI)

Search string:

(nurs*[tiab]) AND (indigenous[tiab] OR aborigen[tiab] OR "First Nation"[tiab] OR "First Nations"[tiab] OR Maori[tiab] OR Māori[tiab] OR Sami[tiab] OR Sámi[tiab] OR "Native American"[tiab] OR "Native Americans"[tiab]) AND (elder*[tiab] OR Elder[tiab] OR "older adult"[tiab] OR "older adult"[tiab] OR "older people"[tiab])

Publication period: January 1, 2011, to September 29, 2026.

Search field: Title and abstract [tiab].

Records retrieved: 71.

2. Web of Science Core Collection (Clarivate)

Search string:

TS=(nurs* AND (indigenous OR aboriginal OR "First Nation" OR "First Nations" OR Maori OR Māori OR Sami OR Sámi OR "Native American" OR "Native Americans") AND (elder* OR elderly OR "older adult" OR "older adults" OR "older people"))

Publication period: January 1, 2011, to September 29, 2026.

Search field: Topic (TS).

Records retrieved: 109.

3. SciELO

Search string:

(nursing OR nurse OR nurses) AND (indigenous OR aboriginal OR "First Nations") AND (elder OR elders OR elderly OR "older adult" OR "older adults")

Search field: General search.

Records retrieved: 17.

The SciELO search history showed successive searches using the same expression, with variations in publication-year filters. The application of a continuous date filter exactly equivalent to those used in PubMed and Web of Science could not be confirmed.

4. MedicLatina (University of Guanajuato Library Search Interface)

Search string:

(nurs* OR enfermer* OR enfermagem) AND (indigenous OR indígena* OR aborigen OR "First Nations" OR "pueblos indígenas" OR "povos indígenas") AND (elder* OR Elder OR "older adult*" OR "adulto* mayor*" OR anciano* OR idoso*)

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Publication period: January 2011 to September 2026.

Records retrieved: 3.

This strategy incorporated terms in English, Spanish, and Portuguese to broaden the retrieval of potentially relevant publications.

5. Gray Literature: Brazilian Digital Library of Theses and Dissertations (BDTD)

A supplementary search was conducted in the Brazilian Digital Library of Theses and Dissertations (BDTD), maintained by the Brazilian Institute of Information in Science and Technology (IBICT). Four Portuguese-language search queries were used:

Query 1: "idoso indígena" enfermagem — 10 records.

Query 2: "idosos indígenas" cuidado — 10 records.

Query 3: "enfermagem" "saúde indígena" "idoso" — 6 records.

Query 4: "enfermeiro" "intercultural" "indígena" — 16 records.

These four searches yielded 42 record appearances. After comparing titles and authors, 18 repeated appearances were identified, resulting in 24 unique documents for title and abstract screening. Documents that did not meet the established eligibility criteria were excluded at this stage.

6. Supplementary Institutional Search

An additional targeted institutional search identified an Australian research report concerning health workers' experiences of providing care to Aboriginal patients. No exact search string was documented for this procedure; therefore, the search was considered supplementary and non-exhaustive.

Study Selection and Data Synthesis

Eligibility criteria were defined according to the PCC framework. Bibliographic records were managed using Rayyan to support duplicate identification and title and abstract screening. The initial search and screening were performed by one researcher. Potentially eligible publications underwent full-text assessment, while three researchers participated in reviewing the selected publications and interpreting the findings.

Information was extracted using a structured matrix containing authorship, publication year, country, document type, objective, methodological design, participants, Indigenous population, health care setting, main findings, and methodological limitations.

A descriptive and thematic synthesis was conducted. The findings were organized into four categories: (1) linguistic and communication barriers; (2) cultural and relational barriers; (3) professional and organizational barriers; and (4) intercultural strategies and facilitators of nursing care.

A complementary critical appraisal was undertaken using Joanna Briggs Institute appraisal tools and the Mixed Methods Appraisal Tool (MMAT), as appropriate to the methodological design of each publication. The findings were synthesized narratively, identifying similarities, differences, contextual characteristics, and gaps in the available evidence. No quantitative meta-analysis was conducted.

All search strategies correspond to searches previously performed. The present INPLASY registration is retrospective and does not represent a prospectively planned review.

Eligibility criteria Eligibility criteria were established according to the Population, Concept, and Context (PCC) framework recommended by the Joanna Briggs Institute (JBI) for scoping reviews.

Population (Types of Participants)

The review included publications addressing nursing professionals involved in the care of Indigenous older adults. Studies focusing on the experiences, perceptions, practices, and intercultural competencies of nursing professionals were considered eligible. Research involving interdisciplinary health care teams was also considered when its findings were relevant to nursing care for Indigenous older adults.

Indigenous older adults were the population receiving care, including members of Indigenous peoples, First Nations, Aboriginal communities, and other Indigenous groups described in the eligible publications.

Concept

The central concept was intercultural barriers in nursing care for Indigenous older adults. Eligible publications addressed one or more of the following dimensions: linguistic and

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communication barriers; cultural and relational barriers; professional and organizational barriers; experiences and perceptions of health care professionals; cultural competence and cultural safety; and intercultural strategies or facilitators that support culturally appropriate nursing care.
Publications examining traditional health beliefs, community knowledge, communication practices, health care relationships, institutional conditions, and culturally responsive care strategies were considered when they were relevant to the review objective.
Context
The review considered different health care settings, including hospitals, primary health care services, community-based care, home care, residential care, and long-term care facilities. No geographical restriction was applied, provided that the publications addressed Indigenous older adults and met the other eligibility criteria.
Types of Evidence Sources
Eligible sources included qualitative, quantitative, and mixed-methods studies, relevant literature reviews, postgraduate theses and dissertations, and institutional research reports. Peer-reviewed scientific literature and relevant gray literature were considered.
Publications in Spanish, English, and Portuguese, published between January 1, 2011, and September 29, 2026, were eligible.
Exclusion Criteria
Publications were excluded when they did not correspond to the defined PCC framework, did not address intercultural issues relevant to nursing care for Indigenous older adults, fell outside the established publication period, or were written in languages other than Spanish, English, or Portuguese.
Documents without relevant research content were also excluded. Potentially eligible publications for which the full text could not be obtained were excluded from the final synthesis.
These eligibility criteria were applied to the bibliographic databases and supplementary gray literature sources, including the Brazilian Digital Library of Theses and Dissertations (BDTD) and the targeted institutional search.

Source of evidence screening and selection

The identification and selection of evidence sources were conducted according to the Joanna Briggs Institute (JBI) methodological guidance for scoping reviews and the eligibility criteria established through the Population, Concept, and Context (PCC) framework.
Records retrieved from PubMed, Web of Science Core Collection, SciELO, and MedicLatina were imported into Rayyan to support reference management, duplicate identification, and title and abstract screening.
The initial search and selection process were conducted by one researcher. First, duplicate bibliographic records were identified and removed. The titles and abstracts of unique records were then screened against the predefined eligibility criteria. When the available information was insufficient to determine eligibility, the publication underwent further assessment.
Potentially relevant publications were assessed in full text to verify their correspondence with the PCC framework and the inclusion and exclusion criteria. Publications that did not meet the eligibility criteria were excluded. Potentially eligible documents whose full texts could not be retrieved were also excluded from the final synthesis.
Gray literature identified through the Brazilian Digital Library of Theses and Dissertations (BDTD) and the supplementary institutional search was assessed using the same eligibility criteria. Duplicate records and potential overlaps between theses, scientific articles, and reports originating from the same research were examined to avoid duplication of evidence.

Three researchers participated in reviewing the selected publications. They assessed thematic relevance, methodological characteristics, and the correspondence of the findings with the review objectives.
Observations and differences in interpretation were discussed among the researchers and checked against the original publications. The available methodological documentation does not specify a formal voting procedure, an independent dual-screening process, or a predefined third-reviewer adjudication mechanism; therefore, none of these procedures is claimed.
The identification, screening, eligibility assessment, and inclusion of evidence sources were documented using a PRISMA-ScR flow diagram, including the reasons for exclusion at the full-text assessment stage.
Author, journal, and institutional information were not blinded during the selection process. The review was completed before registration; therefore, this description reports the procedures actually undertaken rather than prospectively planned methods.

Data management Bibliographic records retrieved from PubMed, Web of Science Core Collection, SciELO, and MedicLatina were imported into Rayyan to support reference management, duplicate identification, and title and abstract screening.

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Duplicate records were identified and removed before screening. The remaining records were evaluated according to the predefined eligibility criteria established through the Population, Concept, and Context (PCC) framework.
Gray literature retrieved from the Brazilian Digital Library of Theses and Dissertations (BDTD) and the supplementary institutional search was managed separately during the initial identification process. Records were examined to identify repeated documents and potential overlaps between theses, scientific articles, and institutional reports.
Information from the selected publications was organized using a structured data extraction matrix. The matrix included authorship, publication year, country, type of publication, study objectives, methodological design, participant characteristics, Indigenous population, health care setting, main findings, and methodological limitations.
Extracted information was organized using digital tools and reviewed by the research team to support accuracy, consistency, and correspondence with the original sources.
The extracted data were subsequently organized into four thematic categories: linguistic and communication barriers; cultural and relational barriers; professional and organizational barriers; and intercultural strategies and facilitators of nursing care.
The data management procedures supported the traceability of the selection process and the descriptive and thematic synthesis of the included evidence.

Reporting results / Analysis of the evidence The findings of this scoping review were presented through descriptive tables, a PRISMA-ScR flow diagram, and a narrative thematic synthesis, following the methodological guidance of the Joanna Briggs Institute (JBI).
The study selection process was summarized in a PRISMA-ScR flow diagram showing the identification, screening, eligibility assessment, and final inclusion of evidence sources.
The characteristics of the ten included publications were presented in structured tables describing authorship, publication year, country, type of document, research objectives, methodological design, participants, Indigenous populations, and health care settings.
Evidence was analyzed descriptively and organized into four thematic categories: (1) linguistic and communication barriers; (2) cultural and relational barriers; (3) professional and organizational barriers; and (4) intercultural strategies and facilitators of nursing care.
The narrative synthesis examined similarities, differences, and contextual characteristics across the included publications, considering the perspectives of nursing professionals, Indigenous communities, and interdisciplinary health care teams where relevant.
A complementary critical appraisal was presented in tables describing the methodological strengths and limitations of the included sources, using JBI appraisal tools and the Mixed Methods Appraisal Tool (MMAT), as appropriate. Reporting transparency was examined for the included scoping review.
The analysis also identified gaps in the available evidence, particularly the absence of eligible studies conducted in Mexico.
No statistical pooling or meta-analysis was performed because the purpose of the review was to map and describe the available evidence rather than estimate intervention effects.

Presentation of the results The results of this scoping review were organized and presented using a PRISMA-ScR flow diagram, descriptive evidence tables, thematic synthesis tables, and a narrative summary, following the methodological guidance of the Joanna Briggs Institute (JBI).
The PRISMA-ScR flow diagram was used to illustrate the identification of records from bibliographic databases and supplementary sources, removal of duplicates, title and abstract screening, full-text assessment, exclusions, and final inclusion of evidence sources.
A descriptive evidence table was developed to summarize the characteristics of the included publications, including authorship, year, country, type of document, research objectives, methodological design, participants, Indigenous populations, and health care settings.
Additional tables were organized to present findings across four thematic categories: linguistic and communication barriers; cultural and relational barriers; professional and organizational barriers; and intercultural strategies and facilitators of nursing care.
A complementary critical appraisal table was used to summarize the methodological strengths, limitations, and reporting characteristics of the included sources, taking into account their study designs and the corresponding appraisal instruments.
The narrative presentation integrated similarities and differences among publications, considered the cultural and geographical contexts of the evidence, and highlighted gaps requiring further research, particularly in relation to nursing care for Indigenous older adults in Mexico.
As this registration is retrospective, the description reflects the presentation formats used in the completed review rather than a prospectively

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established presentation plan. No quantitative meta-analysis or statistical forest plot was undertaken.

Language restriction Yes. Language restrictions were applied. Publications written in English, Spanish, and Portuguese were eligible for inclusion. Publications in other languages were excluded. These language criteria were applied to scientific literature.

Country(ies) involved México.

Other relevant information This is a retrospective registration of a completed scoping review that has not yet been published. The literature search and evidence selection were conducted before submission of this registration.
The review followed the methodological guidance of the Joanna Briggs Institute (JBI) and used the PRISMA extension for Scoping Reviews (PRISMA-ScR) to guide transparent reporting.
The review incorporated both peer-reviewed scientific publications and gray literature, including postgraduate theses and institutional research reports. The inclusion of gray literature was intended to broaden the mapping of available evidence on intercultural barriers in nursing care for Indigenous older adults.
Critical appraisal was conducted as a complementary procedure to describe the methodological strengths and limitations of the included sources. It was not used to assign pooled evidence scores or to conduct a meta-analysis.
This review has not been registered prospectively. The information submitted reflects the methods and procedures actually undertaken, without presenting completed activities as future research plans.

Keywords Indigenous Peoples; Nursing Care; Aged; Cultural Competency.

Dissemination plans The findings of this scoping review are intended to be disseminated through the submission of a scientific manuscript to a peer-reviewed nursing journal.
The review aims to contribute to the understanding of linguistic, communicative, cultural, relational, professional, and organizational barriers affecting nursing care for Indigenous older adults.
The results may also be shared through academic presentations, nursing research forums, and scientific conferences, with particular emphasis on intercultural nursing care, cultural safety, and health equity.
The findings are expected to inform future nursing research, professional education, and the development of culturally appropriate care strategies. Particular attention will be given to highlighting the need for research conducted in collaboration with Indigenous communities in Mexico.
Dissemination activities will seek to make the evidence accessible to nursing professionals, researchers, educators, and health care stakeholders interested in improving culturally responsive care for Indigenous older adults.

Contributions of each author
Author 1 - Karina Jazmín Marrujo-Pérez - Made a major contribution to the formulation and justification of the research problem, development of the research question, definition of the study objectives, and methodological design of the scoping review. She contributed substantially to the literature search, evidence selection, data organization, extraction, and analysis. She participated in the interpretation
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Author 2 - Luis Bernardo López-Sosa - Intermediate contribution to the formulation of the research problem and study design. High contribution to information processing and analysis, interpretation and discussion of findings, development of conclusions, preparation of the manuscript for publication, and other research-related activities.
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