

Diversity Dialogues Forum – 16th February, 2018

Topic: Young people from CaLD backgrounds and interpreting in health care environments – what's going on?

Overview:

February's forum was held in partnership with MYAN WA (Multicultural Youth Advocacy Network) and huge thanks to Tamkin for all her preparation and to Lianda for the use of the lovely venue in Oxford St and for facilitating the event. Also, many thanks to the panel members for their time and commitment to improving the experience of young people in health care – whether accessing for themselves or supporting family members. It was also useful to have several language interpreters in the room; thanks to them for providing another perspective to the mix.

A driver of the forum was ongoing concern about young people and children being used to interpret for family members. Concerns include but are not limited to:

- Young people/children do not usually have the language to interpret medical terminology
- It is generally culturally inappropriate for a young person to be exposed to intimate details of a parent's physiology/condition
- In public health there is the overarching WA Health Language Services Policy which is mandatory (<http://www.health.wa.gov.au/circularsnew/pdfs/13359.pdf>) but not always adhered to
- The role of the parent is often diminished in these situations with the child/young person gaining authority, this has the potential to lead to further cultural fragmentation in the home and tension between parent and child
- Young people/children may not know to ask questions to clarify words/terminologies, they may also be shy about doing so
- Potential for misinformation/misunderstanding to occur

A key panel member was a young man who has experienced being asked to interpret; he expressed his shame and embarrassment (as well as his mother's) at having to name some of her body parts and to use language that he does not yet understand fully, particularly medical terminology

A total of forty-seven people attended the forum; many had to leave after the panel session but those who were able to remain took part in lively round table discussions re how to improve:

- the take-up of interpreter services by health professionals, including GPs
- healthcare providers' cultural competency
- healthcare providers' knowledge and skills re working with and using interpreters
- the confidence of young people

Summary of recommendations/solutions:

Education:

- Of young people re their rights in healthcare
- Of practitioners/staff re working with interpreters and transcultural good practice
- Of young people re what platforms to go to for information
- Of interpreters in specialist terminologies

Advocacy:

- To encourage GPs to offer/book interpreters

Development:

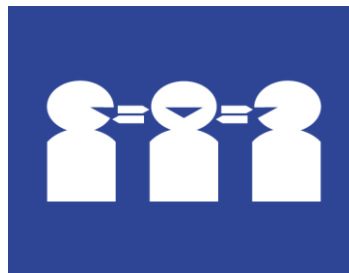
- Of a translating app
- Of translated material and other means of providing education on line

Empowerment:

- Of young people to have a voice
- Promote the Patient Opinion website
- Make information available directly to young people, we should not assume adults are passing it on
- Take information to where young people are
- Increase research in the area to ascertain what would assist young people

Equity:

- Translated information being provided to young people re how to access interpreters
- Video clips with spoken information in Languages Other Than English (LOTE)
- Use clear English without jargon
- Ensure the "Interpreter" logo is clearly displayed in all areas of service provision



Accessibility:

- Use posters re the right to request an interpreter
Use pictures and symbols to address low English literacy levels
- Engage youth to run campaigns/educate
- Develop a 'cheat sheet' for GPs e.g. include basic questions like "Have you explained that it's OK to ask for an interpreter?" this supports normalising behaviour

Accountability:

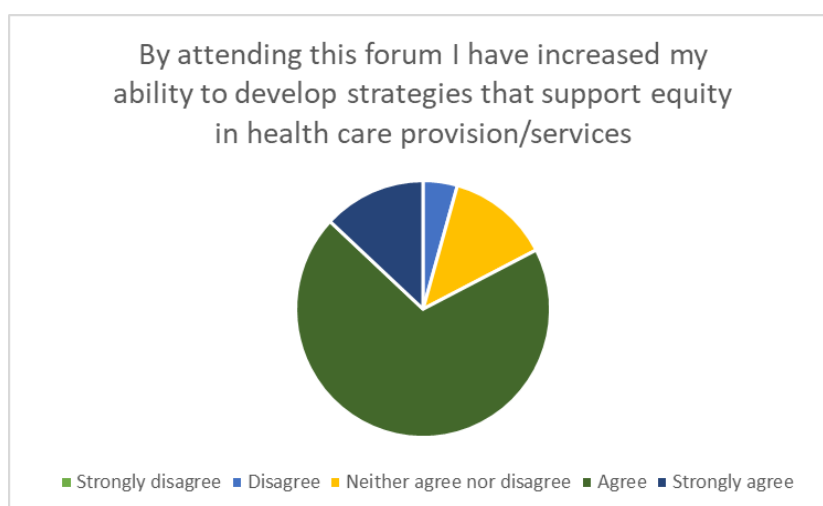
Encourage young people to utilise complaint systems/provide feedback and/or encourage their caseworkers and others to assist them to provide feedback

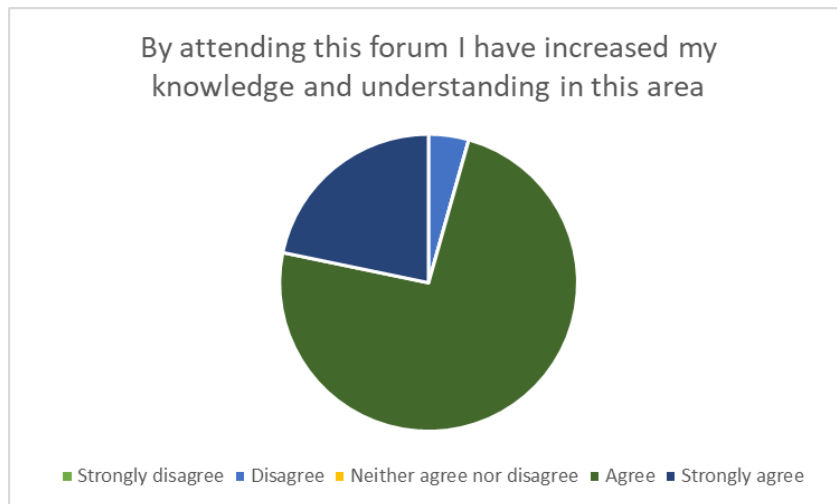
Challenges:

- The 'top down' culture in health
- Time it takes for GPs to utilise interpreter services is a deterrent to them doing so – include a Medicare billing item "using interpreter" so GPs are not out of pocket
- Maintaining patient/client confidentiality within communities

Feedback

Feedback from the forum was positive with the overall data showing that people had benefitted from attending.:





Written comments re the forum included:

- Young person on the panel sharing their experiences because it showed the real-life effects of interpreters/service providers
- ALL of it, especially the lived experience speaker
- The forum and the table solution process, and learning about the systemic problems in this area
- Generation of ideas to create momentum towards change

To conclude I would once again like to thank the panel members and MYAN WA for their support and commitment. I would also like to thank all who attended and added their voice. Feel free to share the information and these recommendations. Keep watching our website (www.hconc.org.au) and Facebook page for more information about upcoming events and workshops.

Louise Ford

Manager - Cultural Diversity Program