

## Communication gap puts Indigenous health at risk

July 3 2017, by David Ellis

The need for health professionals to have a stronger focus on communication with Indigenous people has been highlighted by the University of Adelaide's Head of Linguistics, who says some lives are being put at risk because of a lack of patient-doctor understanding.

In a paper published today in the *Medical Journal of Australia* – coinciding with the NAIDOC Week theme of Our Languages Matter – Dr Robert Amery has raised concerns not just about <u>language</u> but also a lack of cultural awareness that impacts on good communication with Indigenous patients.

Dr Amery, who heads Linguistics within the University of Adelaide's School of Humanities and is a Kaurna language expert, says poor communication can lead to "mistrust and disengagement with the health sector" among Indigenous patients, leading to a lack of compliance with treatment, and ultimately poor health outcomes.

He says there's a 16-year gap in life expectancy for Indigenous people living in the Northern Territory compared with non-Indigenous Australians. Of these Indigenous people in the NT, 70% live in remote areas, and 60–65% speak an Indigenous language at home.

"While many speakers of Indigenous languages living in remote areas can engage with outsiders and converse in English about everyday matters, they often have a poor grasp of English when it comes to health communications and other specialised areas," Dr Amery says.



Miscommunication can be subtle, and previous studies have shown that while both parties think they have understood each other, they can in fact come away with very different understandings.

"Miscommunication isn't just about language. Some of these difficulties also arise from the interface of communication and culture, which are often derived from differences in worldview," he says.

"For traditionally oriented Aboriginal people living in remote areas, understanding of disease causation is fundamentally different. Serious diseases, even accidents, are often attributed to sorcery. Germ theory and the immune system are foreign concepts.

"Silence plays an important role in Indigenous cultures. Indigenous people often respond to questions after a prolonged pause, a concept foreign to those doctors who see silence as impolite in their own cultures. They compensate by filling the silence and disrupting Indigenous patients' thoughts. There is a simple solution: pause and allow the patient to think."

He also suggests healthcare professionals avoid the use of "intangible" conceptual English words and vague sentences, instead focusing on factual communication; that they demonstrate how a medical procedure works; and use simple diagrams to explain medical issues.

"These examples may seem plain and obvious, but astoundingly, despite the many hours dedicated to <u>communication</u> in medical education, such concepts are not taught," Dr Amery says.

"An investment of time in the consult will have immense payoffs over the long term."

More information: Robert Amery. Recognising the communication



gap in Indigenous health care, *The Medical Journal of Australia* (2017). DOI: 10.5694/mja17.00042

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