

Impact story: Exploring
and improving processes for
collecting authentic patient
experience information from
speakers of Aboriginal languages

## What was this research about?

We wanted to find ways to improve the communication between health care staff and Aboriginal patients and their families, in order to deliver a better patient experience.





First Nations language experts were engaged in a critical review of 2 survey tools; the adapted Australian Hospital Patient Experience Question Set (AHPEQS) and the Return to Country (RtC) Project survey tool.

## What did we find out?

In the review of the survey tools, extensive challenges were experienced in the collection of authentic patient information among speakers of the four First Nations languages (FNL). These challenges are outlined below:



Terms relating to frequency, such as 'always' sometimes', 'never', might not have an equivalent term in FNL.

Conceptual terms
like 'too much'
consistently caused
confusion with
health concern
questions
potentially
translated into
positive behaviours.

A <u>limited range</u> of responses does not allow participants to share more detailed accounts of their experience, missing what is important to patients and details needed to inform change.

When survey methods are inconsistent with First Nations communication protocols and needs, the information collected has no value.

Surveys are very hard ... people will answer just to make you happy ... That's what you get from a survey - an untrue story.

Läwurrpa Maypilama, Yol**ŋ**u language expert

[it] makes the interpreter seem incompetent and damages their professional reputation ... when the problem is actually the survey.

Dikul Baker, Yolnu language expert







Language experts shared ideas for better ways to capture authentic patient experience information as outlined below:

Engaging local cultural and language experts working with health staff and researchers through all stages of planning, development,

implementation and

evaluation is key.

It is important determine the participants' preferred language and engage an appropriate interpreter (if needed) **before** commencing the information and consent process.

A <u>conversational</u> approach in seeking information was strongly advocated to allow for more detailed and authentic information to be captured.

**Participants** responded well if the purpose was clearly explained and if sharing their experience would lead to some kind of action or outcome.

To maintain the integrity of the process, patient experience data collection must be accompanied by effective strategies to act on identified concerns.

Work together - find out the way together ... because if you want to know about a patient's experience and what's important to them then you need to know the population. Yolnu language experts

We don't want to be always asked questions just so that they can tick a box, yes or no. We need to be heard and have our reality understood. For people to listen deeply: puruanyani yirri yirrili - listening carefully to understand.

Warlpiri language expert

## Why is this important?

When the voices of First Nations Australians are prioritised, health care system improvements can be **activated** to address negative patient experiences that are otherwise unheard.

Quality, authentic patient experience data gained through culturally and linguistically relevant approaches reduces the risk of wasted resources and disengagement with the health care system.

## What next?

The findings from this study are currently informing a study that is piloting and evaluating a **conversational approach** for gathering patient experience information with First Nations language speakers. We look forward to learning the results of the new study and using the findings to improve the health outcomes for Aboriginal people.

Exploring and improving processes for seekers of Aboriginal languages to influence the safety and quality of their health care (EQuaLS) Project was a collaboration between Charles Darwin University and Flinders University, as funded by MRFF number(s) 2019/MRF9100014, 2019/MRF9100008. This is a summary of the project publication: Anne Lowell, Yomei Jones, Robyn Aitken, Dikul R Baker, Judith Lovell, Samantha Togni, Dianne Go<u>nd</u>arra, Beth Sometimes, Margaret Smith, Julie Anderson, Rachael Sharp, Maria Karidakis, Sarita Quinlivan, Mandy Truong, Paul Lawton. Why surveys are 'very hard': exploring challenges and insights for collection of authentic patient experience information with speakers of Australian First Nations languages. Rural and Remote Health 2024; : 8380. https://doi.org/10.22605/RRH8380

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