

Title

Good communication practice within Allied Health and other settings:
Enabling rangatiratanga and more equitable access to services by helping everyone to understand, participate, have their say.



"I want to say thank you for helping me to understand what's going on, like what's happening... I reckon I wouldn't be here now if I didn't understand all that... I know that I can know stuff now so that's mean!"

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(Communication Assistants in other jurisdictions are known as Intermediaries)

Abstract

The stakes can be high if communication breaks down in the talk-based interactions integral to health and wairua. This is especially true for people with speech-language and communication needs who can struggle to:

- Understand discussions on complex topics such as consent.
- Provide detailed, relevant and coherent responses during assessment.
- Listen to and synthesise information in order to make informed decisions.
- Remember and follow instructions about medications.
- Access and benefit from talk-based therapeutic or rehabilitative programs.
- Organise themselves e.g., plan transport, dates and times of appointments.
- Advocate for themselves.

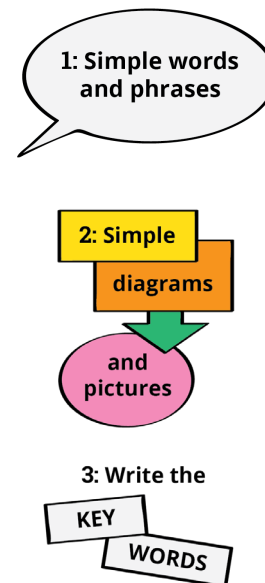
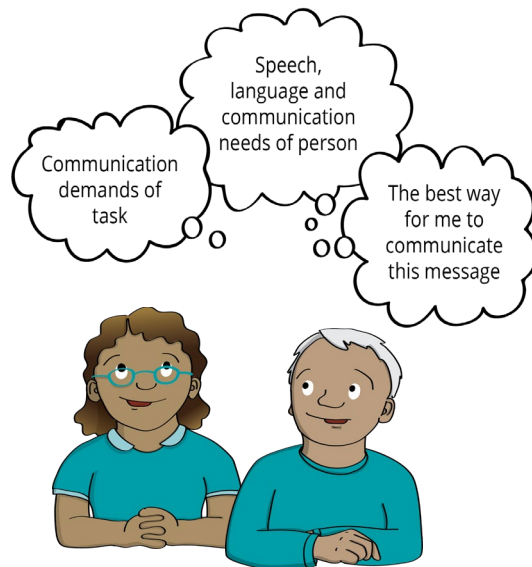


Furthermore, many people with speech, language and communication needs are unlikely to draw attention to communication breakdowns. Difficulties with comprehension or expression might not be evident to the professionals they need to interact with, so communication issues often go undetected and unmediated. This means that organisations and practitioners who rely on talk-based interactions privilege people with strong communication skills whilst putting people with speech, language and communication needs, who are already marginalized, at risk for further inequities.

Talking Trouble speech-language therapists and communication assistants have worked alongside organisations and practitioners in health and other settings to assist them to recognize unmet need, reduce the communication demands within their processes and interactions and enable people to have their say in decisions that are important to them - enabling rangatiratanga to combat inequity.

Outcomes / Key findings

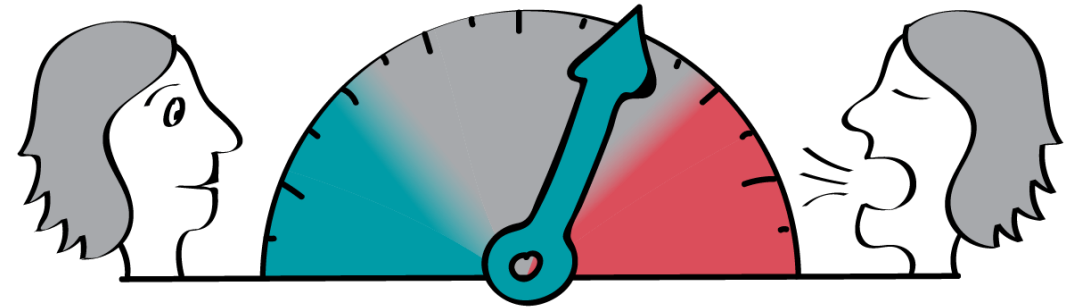
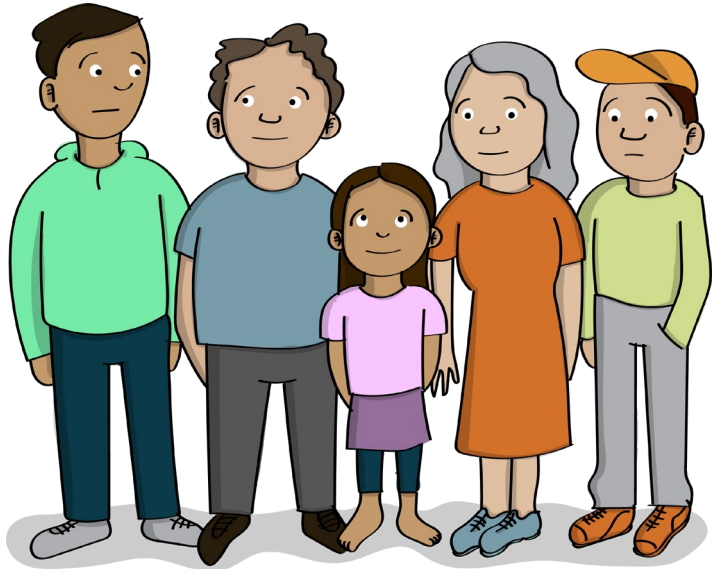
- Some organisations and individual professionals do consider the language and communication demands involved in their work, use effective strategies and useful resources, and have been enthusiastic about professional development to address these issues.
- Simple compensatory communication strategies can make a massive difference.
- Good communication skills are protective and enable rangatiratanga.
- However, speech, language and communication needs continue to go undetected and underserved in many contexts.
- Many organisations and practitioners are unaware of the communication demands within their processes and interactions and/or cannot mediate them effectively.
- The intervention logic underpinning talk-based therapeutic and rehabilitative programmes can be significantly disrupted because people with speech, language and communication needs struggle to cope with the language demand.



Addressing Health Inequities

Default settings within our health services (and other contexts) privilege people with good communication skills. Our work alongside whānau and professionals shows the significant value speech-language therapists and communication assistants bring to these contexts when they:

1. Enable people with speech-language and communication needs to understand, participate in and advocate for themselves in interactions that are important to them.
2. Build capacity within the wider workforce about how to reduce communication demands within processes and interactions and mediate communication breakdown.



BLAHOMETER

Implementation / Translation to Practice

1. Build organisational capacity to recognise speech, language and communication needs, bearing in mind they can:
 - a) exist prior to the health condition being managed by the team (i.e., be developmental).
 - b) be difficult to spot.
 - c) be dismissed by some team members as 'low educational level', but still have significant impact on a person's uptake of / ability to engage in treatment.
2. Develop organisational capacity to mediate speech, language and communication needs e.g., compensatory communication strategies.
3. Provide a broader range of speech-language therapy service-delivery options through publicly-funded organisations to mitigate social, economic, geographic and ethnic inequities. Building communication skills is protective and has positive impacts on school/work, relationships and managing emotions.
4. Enhance supports, scholarships and incentives to make it easier for Māori students to study speech-language therapy and support those already in the workforce.
5. Enhance supports, scholarships and incentives to make it easier for students from Pacific Island and other marginalised ethnic backgrounds to study speech-language therapy and support those already in the workforce.

