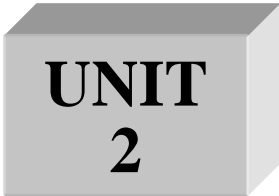



# Public Health Materials for Education



### Introduction

Health communication is essential element of disability rehabilitation and disability preventive education where public health materials can help for proper understanding in-depth. So it is required to develop appropriate public health materials which could be used during mass level disability related awareness and motivation.

 Time needed to finish this unit	Approximately 3 weeks
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<b>Lessons of this unit</b> Lesson 1: Develop effective public health materials Lesson 2: Health communication Lesson 3: Barriers to effective health communication
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DRAFT


## Lesson-1: Develop Effective Public Health Materials



### Learning Objectives

After completion of this lesson learners will be able to

- conceptualize the development and application of public health materials.

	<b>Keywords</b>	Public health materials
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### Subject-matter

#### 2.1.1. Designing a Poster for Health Education

##### Define Poster

A poster is a “public” piece of paper conveying information through text (words) and/or graphic images (symbols or pictures). It’s usually designed to be displayed vertically on a wall or window and is large enough to be seen and read from a relatively short distance. Its main target audience is the person walking by. A poster must convey its message with immediacy and purpose, because people on the street are often in a hurry.

A *poster* is any piece of printed paper designed to be attached to a wall or vertical surface. Typically *posters* include both textual and graphic elements, although a *poster* may be either wholly graphical or wholly text. *Posters* are designed to be both eye-catching and informative. *Posters* may be used for many purposes.

##### Ten basic Rules for a Good Poster

Rule 1: Define the Purpose

Rule 2: Sell Your Work in Ten Seconds

Rule 3: The Title Is Important

Rule 4: Poster Acceptance Means Nothing

Rule 5: Many of the Rules for Writing a Good Paper Apply to Posters, Too

Rule 6: Good Posters Have Unique Features Not Pertinent to Papers

Rule 7: Layout and Format Are Critical

Rule 8: Content Is Important, but Keep It Concise

Rule 9: Posters Should Have Your Personality

## Rule 10: The Impact of a Poster Happens both During and After the Poster Session

### Characteristics of Good Poster

- ❖ **Readable:** Use clear language, good grammar in all poster text,
- ❖ **Legible:** All poster text should be readable from 5 feet away,
- ❖ **Well-organized:** Group items logically, visually for maximum impact,
- ❖ **Succinct:** You have 10 seconds to grab your audience's attention,
- ❖ **Remember:** The purpose of your poster is to attract the attendee's attention to your work.

### Guidelines for Poster Design

#### Making Posters

Standard poster dimensions are 48 inches by 36 inches, either landscape or portrait layout. Typically an academic poster is designed for dimensions of 36" x 48". Once you've designed your poster, you may submit it to ITS for printing. It typically takes two to three days to print posters.

#### General considerations

The information below contains suggestions for organizing your poster content and designing an effective poster. ITS recommends using MS Power Point to design your poster as a single PowerPoint slide setup with the dimensions you want your poster printed in (ex. 36" high by 48" wide).

The purpose of a poster is to convey information. The most important goal in poster design is to present information in a way that is accessible and understandable.

Posters are different from books or articles in the way they convey information. People view a poster from both far away, and close up. Your design, title and subheadings, which will be noticed from a distance, need to be eye-catching. Your detailed text needs to keep the audience reading when they move close. Poster space is very limited. Make sure that every element counts—nothing should be extraneous. Text should be as concise as possible.

Know your audience. Will they be other scholars in your field, or people with no expertise in that area? Write to your audience. Think carefully about the language you use and the assumptions you make about the viewers' knowledge. Don't use technical jargon unless you're sure it will be familiar to your audience. An indication of how familiar you are with your subject is evidenced by how well you can convey it. Don't use three words when one will do; don't use a three-syllable word when a one-syllable word will work as well. Keep in mind also that your poster will be competing with others for attention.

## Poster Design Steps

There are two elements in a poster: text and graphics. Text includes titles, subheadings, captions, labels and “body text”—the narrative. Graphics can include maps, charts, diagrams, illustrations or photographs.

**STEP 1:** Think about what size you’d like your poster to be, and actually look at a piece of paper at that size. You may need to modify the size after you work out your content. Also think about whether you want it in landscape or portrait format.

**STEP 2:** Outline your content. Think through the types of text, title, subheadings, captions, etc. An effective poster presentation includes:

- ❖ Problem statement- what are you investigating?
- ❖ Problem context/literature review (optional depending on space available);
- ❖ Methodology- how did you go about doing your research;
- ❖ Discussion of data;
- ❖ Conclusion;
- ❖ Directions for further research.

Generally, you will not have room to devote more than one or two paragraphs to each of the above. You may also want to include acknowledgements and perhaps information on sources. A slightly different way to organize your information would be to follow the problem statement with the conclusion.

**STEP 3:** Draft the text you will use-500 and 1500 words, depending on the poster size you plan to use.

**STEP 4:** Decide on appropriate accompanying graphics.

**STEP 5:** If you have time, ask others to review your draft and ideas for graphics asking for feedback about any places that the information being conveyed isn’t clear.

**STEP 6:** Design your poster. If you are using PowerPoint, be sure to adjust the page setup to reflect the dimensions of the poster you want to print. Think of the “slide” that will become your poster as groups of text and related graphics that are presented in an ordered form.

**STEP 7:** Proofread on the screen carefully. Print a draft copy on 8.5 x 11 (letter) paper. Proofread again carefully. Submit the final copy for large format printing.



Fig: Disability Awareness Poster

### Considering Issues for a Poster Design

- ❖ Think hierarchically and reflect that hierarchy in your design. The most obvious way to do this is by varying size. Categorize your text- title, secondary headings, tertiary headings, captions, body text, graph labels, source, and acknowledgements, assign each category a level of importance and assign each category a style consisting of text size, colour, style, etc. Stay consistent. For example, the headings “problem statement” and “methodology” would probably both be secondary headings. Make them look the same. Make the differences in importance obvious;
- ❖ When you read a page in a book (in English), you begin at the upper left, and move your eyes from left to right and from up to down. A poster may work somewhat differently. It presents a lot of information to view at once. Use devices—arrows, numbers, letters— to help the reader know where to start your story and what order to read it in. For an English-reading audience, it’s good to stay fairly close to the left/right, up/down reading pattern;
- ❖ Use the titles as a way to state the conclusion. For example, instead of saying “A Study of Automobile Emissions Generated at Drive up Windows” say: “5% of Air Pollution Derives from Cars Idling at Drive up Windows” or “Drivers Spend an Average of 7.2 Minutes Idling at Drive up Windows”—phrase in such a way as to get the reader’s attention;
- ❖ Proximity indicates that items are related or should be viewed together;
- ❖ Where possible, express points as bullets rather than paragraphed text;
- ❖ Don’t use more than a couple of fonts;

- ❖ Vary them according to size, boldness, angle (italics or not) to differentiate meaning; avoid ornate fonts;
- ❖ Italics are standard for use as captions;
- ❖ Keep narrative text at about 18 points or larger;
- ❖ Make your title not less than 1" in height—bigger if possible;
- ❖ Title and subheadings should be readable from 5 feet away;
- ❖ Make the space between your lines of text about 133% of the text size. For example, if your text is 18 points high, your leading should be about 1.33 x 18 or 24 points;
- ❖ Lines of text in a text block should usually contain about 7-8 words on average;
- ❖ Changing text size or block width can help you make adjustments;
- ❖ Keep your capitalization consistent;
- ❖ Place blocks of text on white or a very pale background. Make sure contrast between background and text is strong and visible from a distance;
- ❖ If you choose to use a colour for a font or poster area make sure that you use it consistently to convey the same meaning each time it is invoked;
- ❖ Every graphic should have a caption;
- ❖ Graphs and charts should have a title, with fully labelled x and y axes. Unless there is a wide variation in the sizes of graphs, make their component parts consistent in size and colouring. If you're using a 14 point x axis label in one graph, do the same in all. If your type is blue in one graph, make it blue in all graphs.

### **Design Don'ts in Poster**

- ❖ Don't use all capital letters in a heading;
- ❖ Don't feel compelled to cram too much into the space available—leave some white space;
- ❖ Don't center any portion of text except possibly the title. In general, left-justify text. Captions may be an exception depending on how they're positioned next to the graphic;
- ❖ Don't use multicolour gradients;
- ❖ Don't use boxes with rounded corners;
- ❖ Don't add meaningless graphics—every graphic should have a purpose;
- ❖ Don't justify blocks of text on both sides.

## 2.1.2. Designing a Public Health Flip Chart

### Define Flip Chart

This is a chart that consists of a series of large pieces of paper which are attached at the top and which are used to present information to an audience by turning over one piece of paper at a time.

A *flipchart* is a stand with large sheets of paper which is used when presenting... | *Meaning*, pronunciation, translations and examples.

### Different Types of Flip Chart

- ❖ **Stand-alone flip chart:** resembles a big isosceles triangle box that usually sits on a table. Imagine a book that you would open at 270° angle and then lay on a table. The paper is flipped from one side of the top of the triangle box to the other;
- ❖ **Metallic tripod (or easel) stand:** usually has 3 or 4 metallic legs that are linked together at one extremity. A support board is attached to two of these legs to support the large paper pad. This is the most common type of flip chart stand;
- ❖ **Metallic mount on wheels:** usually has a flat base to support the paper pad and is mounted on one or two legs that then have a set of wheels. The advantage of these more recent forms of stands is that it is easier to transport the flip chart from one location to another.

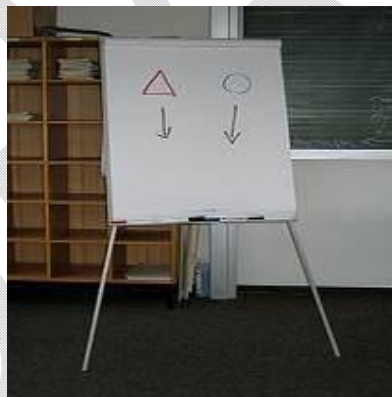


Fig: Flip Chart on Stand

### Effective Use of Flip Charts

- ❖ Refer to key flip charts as often as possible
- ❖ Use large Post-it Notes
- ❖ Write large
- ❖ Use a title
- ❖ Write with dark markers
- ❖ Alternate colours
- ❖ Take down what you are no longer using

- ❖ Use bullet points
- ❖ Include blank space
- ❖ Use flip charts to collect information
- ❖ Ask your co-facilitator to scribe for you

### 2.1.3. Designing a Public Health leaflet or Flyer

#### Definition of Leaflet /Flyer

This is a printed sheet of paper, sometimes folded, containing information or advertising and usually distributed free.

A **flyer** is a form of paper advertisement intended for wide distribution and typically posted or distributed in a public place, handed out to individuals or sent through the mail. In the 2010s, flyers range from inexpensively photocopied leaflets to expensive, glossy, full-colour circulars.

#### Characteristics of Leaflet:

- Leaflet production is affected by the physical characteristics of paper, such as shape, texture, quality, size, weight, Legibility and color. Quality also affects durability. The major factors involved in selection of paper weights and leaflet sizes are:
  - Message length.
  - Artwork required.
  - Delivery system to be used.
  - Press capabilities.
  - Purpose of the leaflet.

#### Features of a good leaflet

- Maps - location (how to get there). what's inside.
- Directions (how to get there)
- Opening times and prices
- Sub Headings - '2006 events' 'free admission'
- Big bold writing to draw you in
- Photo's
- Persuasive writing
- Dates for exciting events
- Symbols for toilets, disabled parking, café
- Shops inside - café, gift shop
- Bullet points
- Often folded
- Address, website and phone number
- Bright and colourful
- Describe what is there and why people should come

You can learn  
Spectacular  
Dazzling  
No ordinary zoo  
Magnificent  
exhilarating  
Breathtaking


the greatest show on earth  
entertaining  
such cute animals to see  
new  
gorgeous, amazing and  
world famous  
fascinating





Fig: Disability Awareness Flyer

 <b>Learner's Activity</b>	Make a disability awareness poster
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 <b>Summary</b>	<p>Different types of public health materials are developed for different purpose with specific goal which would be predetermined, and application could be much easier for viewers understanding.</p>
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## Study Skills

### Short Questions

- What are the guidelines for making a public health poster?
- How we can make public health flip chart?
- What should be considered for making public health leaflet or flyer?

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## Lesson-2: Health Communication



### Learning Objectives

After completion of this lesson learners will be able to

- understand health communications and its application.

	<b>Keywords</b>	Health Communication
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### Subject-matter

#### 2.2.1: Basics of Health Communication

The term was generated when members of an ICA (International Communication Association), and interest group adopted the term. Interdisciplinary marriage between health and communication was certainly a common-law relationship long before the term "health communication" was introduced. The research of health communication surrounds the development of effective messages about health, the dissemination of health-related information through broadcast, print, and electronic media, and the role of inter personal relationships in health communities. At the core of all of the communication is the idea of health and the emphasis of health. The goal of health communication research is to identify and provide better and more effective communication strategies that will improve the overall health of society.

**Health communication** is the study and practice of communicating promotional health information, such as in public health campaigns, health education, and between doctor and patient. The purpose of disseminating health information is to influence personal health choices by improving health literacy. Because effective health communication must be tailored for the audience and the situation, research into health communication seeks to refine communication strategies to inform people about ways to enhance health or to avoid specific health risks. Academically, health communication is a discipline within communication studies.

#### Health communication may variously seek to-

- increase audience knowledge and awareness of a health issue;
- influence behaviors and attitudes towards a health issue;
- demonstrate healthy practices;

- demonstrate the benefits of behavior changes to public health outcomes;
- advocate a position on a health issue or policy;
- increase demand or support for health services;
- argue against misconceptions about health.

### **2.2.2. Strategies and Methods of Health Communication**

Tailoring a health message is one strategy for persuasive health communication. For messages of health communication to reach selected audiences accurately and quickly, health communication professionals must assemble a collection of superior and audience appropriate information that target population segments. Understanding the audience for the information is critical for effective delivery. Communication is an enigma that is detrimental to the healthcare World and to the resulting health of a patient. Communication is an activity that involves oral speech, voice, tone, nonverbal body language, listening and more. It is a process for a mutual understanding to come at hand during interpersonal connections. A patient's communication with their healthcare team and vice versa, affects the outcome of their health. Strong, clear, and positive relationships with physicians can chronically improve and increase the condition of a certain patient. Through two approaches, the biomedical model and the biopsychosocial model; this can be successfully achieved. Evidence has shown that communication and its traditions have altered throughout the years. With the use of many new discoveries and the changes within our technology market, communication has severely improved and become instantaneous.

Communicators need to continually synthesize knowledge from a range of other scholarly disciplines including marketing, psychology, and behavioural sciences. Once this information has been collected, professionals can choose from a variety of methods and strategies of communication that they believe would best convey their message. These methods include campaigns, entertainment advocacy, media advocacy, new technologies, and interpersonal communication.

#### ***Campaigns***

Health Communication campaigns are arguably the most utilized and effective method for spreading public health messages, especially in endorsing disease prevention (e.g. cancer, HIV/AIDS) and in general health promotion and wellness (e.g. family planning, reproductive health). The Institute of Medicine argues that health communication campaigns tend to organize their message for a diverse audience in one of three ways:

- By catering to the common denominator within the audience;

- By creating one central message and then later making systematic alterations in order to better reach a certain audience segment, while retaining the same central message;
- By creating distinctly different messages for different audience segments.

Both the Centers for Disease Control and Prevention and scholars of health communication emphasize the importance of strategic planning throughout a campaign. This includes a variety of steps to ensure a well-developed message is being communicated:

- Reviewing background information to define what the problem is and who is affected by the problem;
- Setting communication objectives and proposing a plan to meet the wanted outcome;
- Analyze the target audience by determining interests, attitudes, behaviors, benefits, and barriers;
- Select channels and materials for communication in relation to what will most effectively reach audiences;
- Develop and pre-test message concepts to determine understanding, acceptance, and reaction to the message;
- Implement communication with selected audience and monitor exposures and reactions to the message;
- Assess the outcome and evaluate the effectiveness and impact of the campaign, noting if changes need to be made.

## **Historical campaigns**

### ***American smallpox epidemic***

In 1721, health communication was used to mitigate the smallpox epidemic in Boston. Cotton Mather, a political leader, used pamphlets and speeches to promote inoculation of smallpox. Alcohol abuse has been a problem within society for about as long as alcohol has been around. In the 19th century, the Women's Christian Temperance Union led a movement against alcohol abuse. They utilized mass communication to communicate the desired message. Newspapers and magazines allowed for the promotion of the anti-alcohol movement.

### ***Cardiovascular disease***

Three-community study and the five-city project were experimental campaigns to inform middle-aged men about the causes of cardiovascular disease. Health messages were communicated via television,

radio, newspaper, cookbooks, booklets, and bus cards. The three "communities" comprised three experimental communication strategies: a media-only campaign, a media campaign supplemented with face-to-face communication, and a no-intervention control group. The experiment revealed that after one year, the most informed at-risk men were those in the second experimental group: they consumed the media campaign and were attended by a health care provider.

### **2.2.3. Communication channels**

#### **Entertainment media**

Using the entertainment industry as a platform for advocating health information and education is a communication strategy that has become increasingly popular. The most utilized strategy is for health communication professionals to create partnerships with storyline creators so that public health information can be incorporated into within the plot of a television show. The Centers for Disease Control and Prevention has formed a strong partnership with Hollywood, Health, and Society, at the University of Southern California Norman Lear Center to continue to produce new storylines on television and in film studios that will help to promote public health information. Some of the resources provided with this partnership include comprehensive "tip sheets" to provide writers with easy to access and trustworthy information on health issues, and meetings and panels to discuss new information and resources. Some of the most notable examples of this method of communication in recent years have been with the films *Contagion* and *I Am Legend* in understanding the spread of disease, *NBC's* series *Parenthood* in Asperger's Syndrome, and with the *CW's* series *90210* and spreading cancer awareness.

#### **Direct marketing**

Media advocacy use strategic mass media tools combined with widespread organization in order to advocate for healthy public policies or lifestyles. This can include the use of text messaging and email to spread messages from person to person, and using social networking venues to promote health information to a wide ranging audience. As technologies expand, the platforms for health communication through media advocacy will undoubtedly expand as well.


#### **Interpersonal communication**


Health communication relies on strong interpersonal communications in order to influence health decisions and behaviours. The most important of these relationships are the connection and interaction between an individual and their health care provider (e.g., physician, therapist, and

pharmacist) and an individual's social support system (family, friends, community). These connections can positively influence the individual's decision to make healthy choices. Patients are more prone to listen when they feel invested emotionally into the situation.

#### 2.2.4. Applications of Health Communications.

- Health communication has become essential in promoting the general public health in myriad situations.
- One of health communication's most important applications has been throughout major Environmental events (e.g. hurricanes, flooding, tornados) and addressing the affected audience's questions and needs quickly and efficiently, keeping the protection of public health and the forefront of their message.
- Health communication professionals are constantly working to improve this type of risk communication in order to be prepared in the case of an emergency.
- Another increasingly important application of health communication has been in reaching students in the college community.
- The National College Health Assessment has measured that 92.5% of college students reported being in "good, very good, or excellent health", however college students seem to battle serious problems with stress, depression, substance abuse, and a general lack of nutrition in comparison to other age groups and audiences.
- Professionals in health communication are actively striving for new ways to reach this at-risk audience in order to raise standards of public health in the college setting and to promote a healthier life style amongst students.

	<b>Learner's Activity</b>	Prepare a health communication strategy
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	<b>Summary</b>
Communication process is the fundamental of understanding any issues. If it's not possible to communicate properly then it's not possible to get height outcome of health communication.	



## Study Skills

### Short Questions

- What is health communication?
- What are the applications of health communication?

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## Lesson-3: Barrier of Effective Health Communication



### Learning Objectives:

After completion of this lesson learners will be able to

- understand the communication process.
- acquire knowledge about health communication barriers.



### Keywords

Communication barrier



### Subject-matter

#### 2.3.1. The Communication Process

The goal of communication is to convey information—and the understanding of that information—from one person or group to another person or group. This communication process is divided into three basic components: A *sender* transmits a message through a *channel* to the *receiver*. (Figure shows a more elaborate model.) The sender first develops an idea, which is composed into a message and then transmitted to the other party, who interprets the message and receives meaning. Information theorists have added somewhat more complicated language. Developing a message is known as *encoding*. Interpreting the message is referred to as *decoding*.

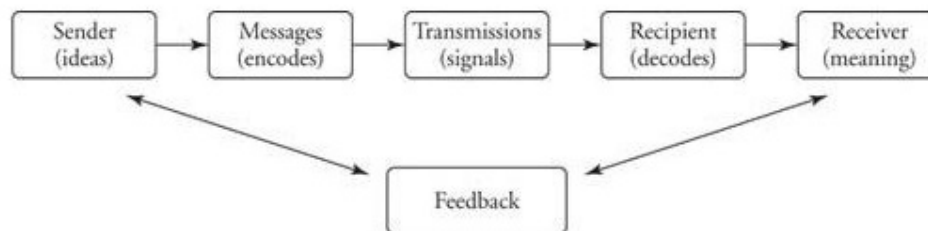


Fig: Communication Model

#### 2.3.2. Three typical barriers to effective communication include the following:

*Defensiveness or premature assumptions:*

**Problem:** A defensive listener will be less able to "hear" what the speaker is saying. In some cases, instead of listening, a person is thinking about why an interaction is occurring or perhaps preparing a response to a message that he or she hasn't heard. By making assumptions about the speaker and the reasons that a conversation is taking place, the listener keeps him/herself from paying attention to the real message.

**Solution:** The listener should not presuppose that he or she knows the reason for or the basis of the communication, nor should the listener feel defensive without knowing what is being said. Being open and non-judgmental will allow the listener to truly hear what is being said.

#### *Judgments based on cultural differences or interpersonal relationships:*

**Problem:** This problem goes hand in hand with that of making assumptions. In this case, the problem involves presupposing things about another person based on cultural differences and personal associations. This can result in not hearing a message or misinterpreting the message.

**Solution:** It's important for the speaker and listener to be open with each other to dispel assumptions and biases. For this to happen, it may be useful to address biases straight on in an open dialogue. By revealing and discussing biases and assumptions, it is possible to minimize their negative impact and thereby communicate more fully and effectively.

#### *Mixed messages*

**Problem:** A conversation that conveys contradictory messages or conflates the intended message with extraneous issues can cause confusion, concern, or resentment.

**Solution:** Before speaking, people should think carefully about the points to be made. Written talking points can be useful in this regard. If there are multiple messages to convey (perhaps some positive and some negative messages), it may be better to present them on separate occasions or in different environments. Conveying only one message at a time can help avoid confusion and misunderstanding. [ds1]If at all possible, this kind of formatting works best in definition list style. We may want to talk about it. [KWM2]Sure. I'd like to see what it is. I think this is hard to read as it is...

### **2.3.3. Most Common Barriers to Effective Communication**

- ❖ **Physical Barriers:** This has to do with poor or outdated equipment used during communications, background noise, poor lighting, temperatures that are too hot or too cold.

- ❖ **Attitudes:** Emotions like anger or sadness can taint objectivity. Also being extremely nervous, having a personal agenda or “needing to be right no matter what” can make communications less than effective. This is also known as “Emotional Noise”.
- ❖ **Language:** This can seem like an easy one, but even people speaking the same language can have difficulty understanding each other if they are from different generations or from different regions of the same country. Slang, professional jargon and regional colloquialisms can even hurt communicators with the best intentions.
- ❖ **Physiological Barriers:** Ill health, poor eyesight or hearing difficulties, pain.
- ❖ **Problems with Structure Design:** Companies or institutions can have organization structures that are not clear, which can make communications difficult. Also to blame for faulty communications are bad information systems, and lack of supervision or training of the people involved.
- ❖ **Cultural Noise:** People sometimes make stereotypical assumptions about others based on their cultural background.
- ❖ **Lack of Common Experience:** It is a great idea to use examples or stories to explain a point that is being discussed. However, if the speaker and the audience cannot relate to these examples because they do not have the same knowledge or have not shared the same experiences then this tool will be ineffective.
- ❖ **Ambiguity and Abstractions Overuse:** Leaving things half-said, using too many generalizations, proverbs or sayings, can all lead to communications that are not clear and that can lend themselves to misinterpretations.
- ❖ **Information Overload:** It takes time to process a lot of information and too many details can overwhelm and distract the audience from the important topics. Keep it Simple, Sweetie.
- ❖ **Assumptions and Jumping to Conclusions:** This can make someone reach a decision about something before listening to all the facts.

#### **2.3.4. Overcoming Communication Barriers**

*Language, hearing, and visual barriers are common in the United States*

Consider the statistics

- Approximately 9 out of 100 people have limited English proficiency.
- More than 3 out of 100 peoples have a hearing disability. That means they are deaf or have severe trouble hearing.

- More than 2 out of 100 people have a visual disability. That means they are blind, or have severe trouble seeing, even with glasses.

Set the stage for good communication

Shared decision making helps patients take charge of their care. In order to give fully informed consent, patients need information they can understand. Their companions (family members or friends who accompany them) do too.

### **Check off the strategies you will try**

- Assess and record your patients' communication needs. Choose decision aids that match the needs of your patients.
- Find or train qualified medical interpreters.
- Tell patients (and companions)—verbally and in writing—that you provide interpreters and decision aids that enhance communication.
- Train staff to better serve patients who have communication barriers.

### *Choose decision aids that enhance communication*

There are many decision aids that can transcend barriers to communication. Here are just a few.

#### ***Language barriers***

- Materials that are culturally appropriate, translated, or written in plain language.
- Visuals like pictures and graphs.

#### ***Hearing barriers***

- Print materials.
- Text telephones (TTYs).
- Videos with captions.
- Written instructions.

#### ***Visual barriers***

- Audio recordings.
- Large-print materials and screen magnifiers.
- Screen reader software (a software application that is a form of assistive technology, which can re-present information in text-to-speech, sound icons, or a Braille output device).

## ***Qualified medical interpreters can help with language or hearing barriers***

Qualified medical interpreters can be certified freelance interpreters; employees from language agencies; trained bilingual clinicians and staff; or community-based medical interpreters from local colleges, faith-based organizations, social services programs, migrant health clinics, and more.

The use of unqualified interpreters—such as a family member, minor child, friend, or unqualified staff member—is not advisable. That choice is more likely to result in misunderstandings and medical errors.

### **Language barriers**

**A qualified medical interpreter who helps people with limited English proficiency is trained in:**

- Ethical standards;
- Cultural issues;
- Health care words and concepts;
- How to interpret between languages;
- How to translate instructions;
- Relevant languages for your patients;
- Correct positioning in the room.

### **Hearing barriers**

There are several types of qualified medical interpreters that help people who are deaf or hard of hearing.

- **Sign language interpreter.** This person uses American Sign Language or Signed English.
- **Oral interpreter.** This person articulates silently and clearly, and uses gestures.
- **Cued-speech interpreter.** This person does everything an oral interpreter does, but also uses a hand code to stand for each speech sound.

## ***Checklist for working with qualified medical interpreters onsite***

### **Before the visit**

- Gather any needed decision aids. Make sure they match the communication needs of your patient (and their companions).
- Tell the interpreter what the visit will be about. Make sure the interpreter understands the information, especially if the patient's life may be at risk.

### **During the visit, make sure**

- Everyone in the room can see each other;
- Your patient knows the interpreter's name and what the interpreter will do;
- Your patient knows that the interpreter is a confidential source who will not share any of the information;
- Your patient is making the health care decisions. Some patients defer to their interpreter to make choices for them;
- Your patient understands the main points. Use teach-back to make sure you presented information in a way your patient understands. Have your patient explain to you, in his or her own words, what you said. Ask the interpreter to tell you exactly what your patient said so you can check for comprehension.

### ***Working with offsite qualified medical interpreters***

When working with offsite interpreters, make sure you and your staff know how to use any needed equipment, such as dual handsets or speaker phones in the exam rooms.

### ***Over-the-phone interpreters***

Trained telephonic interpreters provide offsite multilingual interpretation to the patient and health care provider by telephone. This service is also called a language line.

### ***Videoconferencing***

The interpreter can see, hear, and assess the body language of the patient and the health care provider via a video remote interpreting service.

Avoid working with untrained (or unqualified) medical interpreters

Using unqualified medical interpreters should be avoided to protect patients and providers. Still, at times, your patient may want their bilingual family member to interpret for them—and, of course, you want to honor their request.

Letting your patient's use an interpreter of their choice does not, however, mean a qualified medical interpreter cannot be present to make sure no mistakes are made. Using untrained staff to interpret has been shown to lead to clinically significant medical errors.

### ***There are challenges with using unqualified interpreters-***

- They may be unfamiliar with technical or scientific language;

- They may inadvertently commit interpretive errors;
- They may editorialize your patient's responses;
- When a family member interprets, the person may impose their view of your patient's health and this may also pose a problem with patient privacy;
- When a minor child interprets, the child is in a very vulnerable position and the practice is at risk for liability if something goes wrong. Also, your patient may be less likely to discuss more personal health topics when a minor child interprets.

**If you work with an untrained interpreter, make sure information is being exchanged accurately.**

**Try these tips-**

- Never use minor children to interpret;
- Remind the interpreter to interpret everything accurately and completely;
- Ask the interpreter to avoid paraphrasing or answering for your patient;
- Interact frequently with your patient and use teach-back.

 <b>Learner's Activity</b>	Communication Barrier
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 <b>Summary</b> Without solving the communication barriers, it's not possible to communicate properly.
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## Study Skills

### Short Questions

- What is health communication?
- What are the communication process?
- What are the barriers of health communication?
- How to overcome the health communications barrier?

### References

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