

Culturally safe communication skills – tips for non-Indigenous health professionals

Ask the patient if they would like a support person in consultations, such as a family member or carer.

It is important to ensure that a carer or support person can be included in all discussions for each stage of the cancer journey with the patient, including the intent of treatment and expected outcomes.

Carers or support people often act as surrogate decision makers or partner in these decisions so it is critical that they have information first hand, if agreed by the patient.

Introduce yourself and build rapport and trust with patients.

Building rapport and trust with patients is important. Before talking about cancer, take the time to tell the patient a little bit about yourself so that they can make a connection with you as an individual. Ask patients about what is important to them such as their home and family.

Allow extra time for consultations.

Do not rush consultations.
Allow extra time for patients to absorb information.

“ We make sure that there is an extra 10 minutes or 20 minutes... to make sure that we are actually not rushing things and we are addressing everyone’s concerns. ”

Medical oncologist

Check if an interpreter is required.

English may not be the patient’s first language.

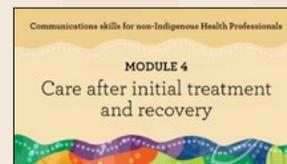
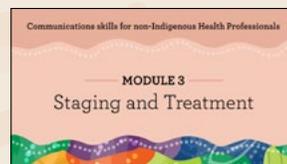
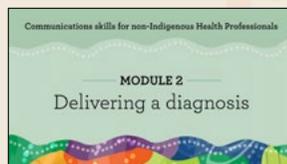
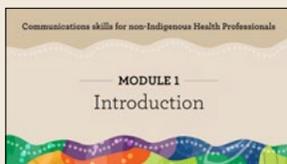
Ask the patient if they would like an Aboriginal and/or Torres Strait Islander Health Worker, Liaison Officer or an expert in providing culturally appropriate care to participate in consultations.

Where possible, ensure that an Aboriginal and/or Torres Strait Islander Health Worker and/or Liaison Officer or a person with expertise in providing culturally appropriate care is available if required to support patients and help them to understand information.

Use plain language and provide clear explanations.

Use plain language to explain in detail what is happening and why, speak slowly and clearly. Avoid technical words and jargon.

Watch the videos [here](#).



Australian Government
Cancer Australia

Use visual aids, including pictures and drawings and the internet.

Support conversations with visual communications resources to assist with patient understanding. This could include images of the affected body part, a radiation machine or chemotherapy suite, or the hospital where the patient will be treated.

“ I try to make sure that everything that I've said is supported visually as well, particularly with different treatments. ”

Medical oncologist

Recognise the importance of Women's Business and Men's Business.

Where possible, invite a support person of the same gender to attend consultations, if the clinician and patient are of different genders.

“ If it's a gynaecological problem, for example, or something to do with the lower bowel, I have to be very aware of Women's Business and Men's Business. ”

Cancer care nurse

Focus on patient-centred decision making in treatment planning.

Give patients culturally appropriate information to enable them to make an informed decision. Allow time for patients to consult other family members who may also be part of the decision-making process and agree a follow up process.

Engage with patients' local Aboriginal Medical Service or primary health care service.

Invite the general practitioner or other health practitioners from the primary site to multi-disciplinary meetings (consider telehealth).

Establish transition plans with the primary health site to ensure ongoing care and support after initial treatment and recovery.

Provide culturally appropriate information to help patients understand why treatment and follow-up care and support is important.

Cultural factors and understandings may impact on what you are communicating including the need for follow-up care. For example, people may think if you are giving them medicine, it means they will get better, or that they only need to be treated when they feel very unwell.

“ It is important to reiterate with the Aboriginal and Torres Strait Islander patient the importance of follow-ups, why we do the follow-ups and how it is important for their general health and well-being. ”

Aboriginal liaison officer

Understand Aboriginal and Torres Strait Islander perceptions and views on health and illness as well as cultural beliefs related to death and dying.

Aboriginal and Torres Strait Islander people can have varying and complex beliefs around death and dying as well as the management of pain.

“ Many Aboriginal and Torres Strait Islander people want to go back home to country before they get to the dying process, so we have to be able to provide exceptional care in the patient's home. ”

Cancer care nurse

“ Often we expect people to respond really quickly when we give them information, but it's really important that we give people time to process information. Sometimes they might need to talk with their friend or support person, or the interpreter might need to re-explain things and not put pressure on people to answer straight away. ”

Cancer care nurse coordinator