

Increased interpreter use linked to decrease in patient self-discharges

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A new study published today in the Medical Journal of Australia has found that an increase in using Aboriginal interpreters in a hospital was associated with a decrease in patients leaving treatment early.

The Communicate Study, at Royal Darwin Hospital (RDH), is aimed at improving communication to provide positive health outcomes for Aboriginal patients who do not have English as their first language.

The study began in 2015 and now includes the employment of an interpreter coordinator, working with interpreter training for doctors and encouraging clinicians to use interpreters.

Initial results of the study have shown a significant increase in interpreter bookings and a decrease in self-discharges at RDH.

Menzies School of Health (Menzies) Professor Anna Ralph who is the lead investigator of the study, says that although 60 per cent of Aboriginal and Torres Strait Islander people in the Northern Territory primarily speak an Aboriginal language, interpreters are used infrequently during medical consultations.

“Using interpreters more in a clinical setting could improve health outcomes,” Prof Ralph said.

“The study showed that health systems changes implemented in partnership between Menzies, RDH and the Aboriginal Interpreter Service resulted in increased uptake of Aboriginal interpreters.”

During the study period, there was also a fall in rates of people taking their own leave from hospital (self-discharge) which directly correlated with the increase in interpreter uptake.

“The link between the increase in interpreter use and the decrease in self-discharges has long been speculated about. When people understand more about the need to stay in hospital, and feel better supported in the hospital, which can be achieved using better communication and language interpreters, they are less likely to self-discharge.

“Self-discharge is a bad outcome since it prematurely terminates care, can lead to homelessness for people who had been flown in from remote settings, and is associated with increased health care costs due to resulting re-admission and worse health outcomes due to delayed or interrupted treatment,” Prof Ralph said.

The next stage of the Communicate Study will involve rolling out and evaluating podcast-delivered cultural education for healthcare providers to ensure healthcare providers are better equipped to deliver culturally safe care and exploring ways to increase interpreter availability at RDH.

The research letter, *Improving communication with Aboriginal hospital inpatients: a quasi-experimental interventional study*, is available [here](#).

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Media contact:

Paul Dale, Communications manager

Phone: 0439 108 754 or (08) 8946 8658 | Email: communications@menzies.edu.au

Menzies School of Health Research

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