

Guide on providing best AIDE in Healthcare for the deaf

# Creating accessibility, inclusivity, diversity, and equity for deaf individuals in the Australian health system is crucial to ensure that everyone receives equal and effective healthcare, regardless of their background and language use preferences.

Providing an inclusive healthcare system for deaf Australians involves considering their unique needs across the entire lifespan. This document is a comprehensive guideline covering various aspects of healthcare, from birth to end-of-life care.

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# Prenatal and Neonatal Care

## Accessible Antenatal Classes

* + Provide antenatal classes that are inclusive and accessible for deaf parents- to-be. This may involve having sign language interpreters or providing written materials in advance. Consult with the deaf parents-to-be first if they would like to be in the group with other deaf parents-to-be. Ask what other specific supports they would like to access as part of the services.

## Early Hearing Screening

* + Ensure the widespread availability of early hearing screening programs for the prompt identification of deafness in newborns. Approach this initiative with the social framework that supports the deaf community, engaging in consultations with deaf parents whose hearing babies who have undergone hearing screening programs, as well as seeking input from deaf professionals. Gather perspectives on the existing procedures and identify areas for improvement to ensure that the screening processes and delivery are culturally appropriate and administered with care.
  + Engage in consultations with parents of deaf children to understand their experiences and gather insights into their preferences for improved

procedures, delivery, and guidance within the programs. Conduct follow-ups with these parents one year after the diagnosis to obtain feedback and assess the ongoing support and services provided.

* + Provide wholistic approach to parents with deaf babies that includes Auslan as a main avenue to promote best communication opportunities for deaf babies to develop naturally (in both signed and spoken languages) to prevent language deprivation in deaf children/adults.
  + Having deaf or deaf-awareness trained staff on standby to support those parents with newly identified deaf babies and show positive modelling on handling deaf babies. Provide information and services to ensure deaf babies and their parents are not left in the dark on what to do next. Encourage them to seek deaf adults for advice and interactions on what to expect and gain appropriate support from the society.

# Paediatric Care

## Family-Centered Care

* + Encourage family-centred care by involving both deaf parents and their non- deaf (hearing) children in healthcare discussions, as well as non-deaf (hearing) parents with their deaf children. Provide communication support, such as



Deaf interpreters, Auslan (or other preferred sign language) interpreters, or support workers where needed. It is important to note that the deaf parents could be deafblind or have extra disabilities that requires extra support to make medical care successful for the primary patient. It is also imperative never to use hearing children to facilitate the communication between deaf patient and medical staff.

* + Ensure the follow-ups are provided appropriately as requested, by either email, text/SMS, or via VRS, and not by phone call alone.

## Communication Assistance for Paediatric Appointments

* + Ask who are the leading parties of such appointments and focus on those people, not their support workers, hearing children, or others. It shows respect for the person who may be deaf and allow them to maintain the control of the appointment.
  + Offer sign language interpreters or other communication support for paediatric appointments to ensure effective communication between healthcare providers, parents, and children.
  + Provide ample space for such appointments as there would be more people in the space than is standard. Ensure the deaf people themselves are in full control of how the space will be used and where the supporting staff will be located to suit their communicative needs.
  + Offer to email or post the information discussed in the appointments to deaf people in accessible formats as requested. It is challenging to focus and remember essential details.

## Accessible Paediatric Materials

* + Develop health education materials for parents in accessible formats, including Auslan versions with subtitles or transcripts. Provide opportunities to deaf patients or hearing parents of deaf children to have those materials delivered differently to suit their needs (in another languages).
  + Be conscious about the language use in the materials and consult with deaf community on the appropriate explanations and terminology.

# Education and Development

## Therapy for children

* + Ensure that therapy services (it may be speech and language, occupational, or other) are accessible and culturally competent for deaf children, with providers who understand the importance of bilingualism (both sign language and written/spoken language) and provide the best supports that fit the child.



* + Consult with deaf professionals about how to work with deaf children to ensure the framework is set up right from the start. Consider learning Auslan to help with communicating and explore the possibility of employing Deaf Language Specialists or other deaf professionals who are experienced in therapy services.
  + Consider referring to deaf professionals or services for the deaf children where they would be able to gain benefits much more directly.
  + Understand that speech is not the only way to work with deaf children, using Auslan or a preferred sign language is considered appropriate when developing language skills.
  + Check for local deaf groups to see if there is a space for deaf children to socialise and interact with deaf adults for skills on engagement, emotions, and socialisation.
  + Ask the deaf children themselves directly what they are needing help with, along what their parents are asking for.

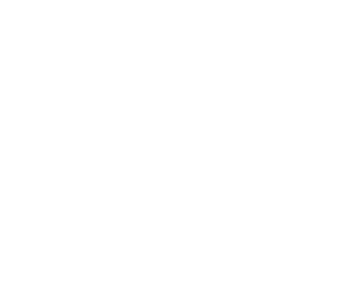
# Adult Healthcare

## Accessible General Healthcare

* + Extend accessibility measures to general healthcare services, including routine check-ups and preventive care for all deaf patients regardless of age, location, and status. Ensure they are informed about the inclusive officers inside the healthcare services and provide opt-in opportunities to engage those officers for the deaf patients.
  + Ensure that deaf patients retain their privacy, control and management of their own health care and support as requested. There will be instances where their hearing family members would like to take over, check with deaf patients first before informing anyone else.
  + Make notes in the system for those deaf patients on their own communicative preferences and ensure those are provided in timely manner that does not stress the patients themselves.

## Mental Health Services

* + Develop mental health services that are culturally competent and sensitive to the unique challenges faced by deaf individuals from an early age onwards. Liaise with various deaf organisations and service providers (both large and small) on how to maintain consistent support systems despite age, location, and level of need.
  + Provide access to mental health professionals familiar with sign language; it may be in Auslan or other sign languages of the deaf individuals themselves.



Ensure the sign language interpreters, deaf interpreters, or communication support workers are who the deaf individuals requested; as there would be either language or cultural barriers that may impact on them in receiving appropriate care and support.

* + Provide deaf- and Auslan- aware training to the staff on how to engage with deaf individuals regularly and communicate appropriately.

## Reproductive Health

* + Offer accessible reproductive health services, including family planning, sexual health education, and fertility treatments, with appropriate communication support.
  + Provide deaf- and Auslan- aware training to volunteers and staff on how to engage with deaf individuals regularly and communicate culturally appropriately.

# Aging and Elderly Care

## Long-term Care Facilities

* + Ensure that long-term care facilities are equipped to provide communication support for elderly deaf individuals, including sign language interpreters and visual aids.
  + Ensure those deaf individuals are not being isolated, ignored or excluded from everyday interactions and activities. Promote regular visitations from deaf friends, families, and community to those deaf individuals and arrange more outings that suits their needs.
  + Provide deaf- and Auslan- aware training to volunteers and staff on how to engage with deaf individuals regularly and communicate appropriately.

## End-of-Life Care

* + Train healthcare professionals to communicate effectively with deaf patients and their families about end-of-life care decisions, ensuring comprehension and dignity.
  + Provide deaf support workers, Auslan and Deaf interpreters as requested by either the deaf patients themselves or their families.
  + Provide appropriate equipment, resources, and materials that meet the deaf patient’s needs. Consult with them and their families, as well the service providers who are deaf-aware.



# Family Support

## Support Services

* + Check, arrange, and provide support services for families of deaf individuals, including referrals, counselling, peer support groups, and educational resources.

# Ongoing Improvement

## Community Engagement

* + Actively engage with the deaf community, both local and state, to seek feedback, address concerns, and collaboratively improve healthcare services.
  + Establish a feedback mechanism for deaf patients to share their experiences and suggest improvements in healthcare services.
  + Use this feedback to continuously enhance the principles of AIDE in healthcare services for the deaf community in Australia.

## Research and Data Collection

* + Conduct regular research on the health needs and disparities of the deaf community, using data to inform policy changes and improve healthcare practices.

## Professional Development

* + Ensure that healthcare professionals receive ongoing training on working with diverse populations, including the deaf community, to stay informed about best practices and evolving needs.
  + Train frontline staff, including receptionists and nurses, on effective communication with deaf individuals, including basic sign language greetings and common phrases. Ensure they are aware of the barriers that deaf patients face every day in any service, building, or treatment and find ways to address those.
  + Ensure compliance with relevant anti-discrimination and accessibility laws, such as the Disability Discrimination Act 1992 in Australia, to protect the rights of individuals with disabilities, including those who are deaf.



By implementing these guidelines, healthcare providers can contribute to a more inclusive, accessible, and equitable health system for deaf individuals in Australia. Ongoing collaboration with the deaf community and regular assessments of services will help identify areas for improvement and ensure continuous progress. Those are the basics for AIDE in Healthcare for Australian Deaf community, and a start to the best healthcare system for all Australians of all age.

