

Towards Culturally Competent Healthcare Translation: exploring educational opportunities

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Background:

Healthcare translation is often ignored when budgeting or delivering services, which worsen health inequalities¹. Physical activity is an important independent risk factor in population health². Availability of evidence based, culturally competent physical activity promotion can significantly impact ethnic minority population health³ but remains an elusive goal.

Methods:

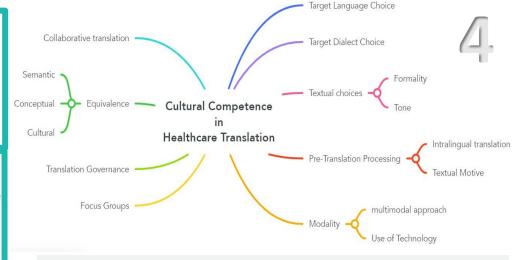
We collaborated between clinicians and linguists to better understand the challenges and opportunities to improve translation.

We designed a novel translation protocol aimed at healthcare providers focussing on collaborative translation and focus group testing. We tested our translation⁴ against standard translation (which is usually a lay translator working alone). In order to better understand the outcome, we designed a Likert-scale based scoring system that could allow the team to better understand the feedback. We compiled a curriculum for translation focused education for the MDT team.

| Moving Medicine Active Workbook Translation comparison- Clinician scoring: | | | | |
|--|-------------------------|------------------|------------------------------------|-----------------------------------|
| Section No. | Topic assessed | Maximum Score | Avg. Score for Solo Translation | Avg. Score for MDT Translation |
| 1 | Assessor Competence | 19 | 17.33 | 17.33 |
| 2.1 | Source Text Page 1 of 7 | 41 | 31.67 | 36.67 |
| 2.2 | Source Text Page 2 of 7 | 41 | 30.33 | 34.33 |
| 2.3 | Source Text Page 3 of 7 | 41 | 26.67 | 31.67 |
| 2.4 | Source Text Page 4 of 7 | 41 | 34.67 | 36.33 |
| 2.5 | Source Text Page 5 of 7 | 41 | 27.67 | 35.67 |
| 2.6 | Source Text Page 6 of 7 | 41 | 26.67 | 34.33 |
| 2.7 | Source Text Page 7 of 7 | 41 | 35.00 | 37.33 |
| 3 | Document Overall | 46 | 29.00 | 32.33 |

259.01

295.99



Schematic of Translation Framework



LOGISITICS
- Quantity
- Timescales

Results/Discussion:

We collaboratively explored and summarised the components of culturally competent healthcare translation. (see 4)

Based on the issues identified in 4, we designed an MDT based, Focus Group heavy, translation protocol that is practical for healthcare service providers. (see 5) We tested our method against standard translation practice (Solo lay translator) and were able to demonstrate

improved quality and acceptability(see 3)
There is a need for translation training among medical staff and the results of our study can be used to inform these needs.

Our aim is to develop translation workshops which include a combination of education and practical application to live healthcare translations. We welcome feedback and suggestions on this front.

For suggestions/queries email: faisal.shaikh@ouh.nhs.uk

References:

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- 2.Warburton DER, Bredin SSD. Health benefits of physical activity: a systematic review of current systematic reviews. *Curr Opin Cardiol*. 2017;32(5):541-556. 3. Valero-Garcés C. Health, Communication and Multicultural Communities: Topics on Intercultural Communication for Healthcare Professionals. Published online 2014.
- 4. Alfer A, Zwischenberger C. Translaboration: exploring collaboration in translation and translation in collaboration [Special issue]. *Target International Journal on Translation Studies*. 2020;32(2