

## Resources and Strategies to Support Occupational Therapy Students from Culturally and Linguistically Diverse (CALD) Backgrounds on Placement

Some students from CALD backgrounds that demonstrate competency at academic requirements may experience challenges when they attend their first placement in an Australian health setting. The issues could be language related, for example a lack of familiarity with Australian colloquialism, or medical terminology & abbreviations. Cultural differences may also influence interaction with patients, staff, and practice educators. For example, a student might perceive it disrespectful to articulate their clinical reasoning, reflections, or self-evaluations, unless these reflect your views. (See 'Resources' for clarification on specific challenges CALD students may encounter)

In addition CALD students may experience the range of anxieties all other students at times experience when going on placement. Disregarding students' backgrounds, best practice guidelines for good supervision and communication will go a long way in addressing any placement issues. (See 'Resources' for guidelines on good supervision strategies for professional practice educators)

<u>The following suggestions are only a starting point.</u> We welcome your suggestions, or strategies and resources that you have found helpful. Thank you!

## **Strategies**

- If you observe students with language issues that are impacting on their ability to meet
  placement objectives, contact their placement coordinator ASAP, so students can be referred to
  relevant university and other support resources
- It is important to remember that language skills can affect clinical reasoning ability. Articulating
  clinical reasoning verbally could be challenging initially: <u>Include learning activities that require</u>
  written responses.
- Avoid talking for too long or using too many words. Speak slower and more clearly. Emphasis key
  words or concepts by pausing, or stressing the word.
  <a href="http://resources.jjay.cuny.edu/erc/tutoring/pdfs/Guidebook.pdf">http://resources.jjay.cuny.edu/erc/tutoring/pdfs/Guidebook.pdf</a>
- <u>Use a template</u> with multiple prompts/ questions or a framework to assist with formulating solutions, responses and professional reasoning. Some examples:
   http://www.jcu.edu.au/wiledpack/modules/fsl/JCU 090342.html# Reflective framework

- Ask students what OT practice model they are most familiar with. Using the basic concepts of this model as prompts can be used as a frame work to help narrate a patient's story after an initial assessment
- <u>Prior</u> to any intervention, alert students to some questions/ issues you will be discussing afterwards. (Students take in a lot of information during a placement: Providing a 'cognitive lens' will help focus their attention).
- Encourage students to <u>take notes</u> (brief key points) during the session to assist with the discussion afterwards. <u>Allow time</u> for students to think before articulating their thoughts. (Most students have difficulties responding quickly on the spot). Where possible, allow students to discuss in pairs first.
- Encourage students to engage with patients in safe, non-threatening ways without practice
  educator present, e.g. going to the ward to remind patients that they are attending a group,
  walking with a patient to a group, having a chat to patients outside of formal assessment/
  treatment sessions, etc. (L. Eyres, Student Coordinator, Alfred Health)
- Encourage students to role play in the workplace with other students or AHA, or other nonsupervising service providers
- There are many useful apps available that help with translations, medical abbreviations etc. For
  example, Cambridge Dictionaries Online is available for smartphones and is designed for CALD
  students (see 'Resources'). Allow students to <u>use tablet technology/ smart phones</u> on placement
  for certain activities.
- Consider also the use of IPADS to monitor students doing an intervention (with a direct feed to
  practice educator in another location), so students do not feel as intensely scrutinised/ assessed
  (this has been implemented at Caulfield Hospital, Melbourne Lisa Eyres, Alfred Health)
- Encourage students to ask "Could you repeat that, please?" "Would you help me, please?" "Could you rephrase that, please?"
- Avoid asking students: "Do you understand?" They, like most human beings, will almost always say "yes" to avoid negative attention (<a href="http://www.misd.net/bilingual/TIPS.pdf">http://www.misd.net/bilingual/TIPS.pdf</a>)
- Avoid embarrassing the student further by <u>phrasing feedback in a constructive way</u>, i.e. avoid using the word 'but', instead use 'and'...i.e. and we can perhaps build on your professional reasoning further by trying out... (see some of the strategies listed above)
- Give <u>clear examples and demonstrations</u> of what you expect before asking a student to perform.

- After any instructions or outline of your expectations, <u>verify</u> with students that they have understood your expectations. I.e. ask students to explain what they are going to do in their own words.
- As with all students, <u>updating the learning contract</u> after a feedback session (to formulate learning objective that will address the issues that are of priority or concern) will assist in verifying that students have understood the feedback.
- Avoid using idioms or slang with students new to Australia. For example, instead of saying 'go over' the paper, say review the paper, or instead of 'hopping' into bed, say transfer into bed http://resources.jjay.cuny.edu/erc/tutoring/pdfs/Guidebook.pdf
- <u>Use diagrams, charts and flow charts</u> to help explain a structure, process or a set of related ideas. <u>Underline and make notes</u> in textbook/ report/ article sections that relate to your explanation.
- It might be helpful to <u>keep a record of newly acquired Australian words/jargon</u> commonly used in your context (i.e. weatherboard house). Ask the student to help you update the list with words they encounter as 'foreign' or unfamiliar in your particular setting.
- Introduce a <u>communication structure</u> to the student to keep the conversation flowing, e.g.:
  - Answer ("I would recommend a rail")
  - Add (additional information; "another solution could be a ramp")
  - Ask ("were there any other solutions I could have considered"?)
- Use <u>small case studies and role play</u>. E.g. a client looks in distress when asked about ... . How would you respond to this? The following website provides scenarios: http://doctorsspeakup.com/home
- When asking questions related to clinical reasoning, <u>avoid asking 'Why' questions</u> first (these can sometimes feel more interrogatory, like students need to defend their decisions). Use 'How' questions first. For example, ask "How could you have conducted the interview differently; How could you improve your interviewing skills?" versus "Why did you choose to ask that question; why did the interview not flow?" (<a href="http://www.qotfc.edu.au/resource/documents/suggestion\_sheet\_4\_1.pdf">http://www.qotfc.edu.au/resource/documents/suggestion\_sheet\_4\_1.pdf</a>) For a list of questions to ask: <a href="http://fieldworkeducatortips.blogspot.com.au/2011/02/who-what-when-why-and-howcoaching.html">http://fieldworkeducatortips.blogspot.com.au/2011/02/who-what-when-why-and-howcoaching.html</a>
- Role model reflections-on-practice on your clinical practice, your supervision practice, and your challenges (e.g. with time management) and clarify your reasoning for doing so. Integrate this as standard practice, i.e. at the start of each feedback session. This sets the tone and makes it clear to the student that this is acceptable and expected practice.

- When students come across as abrupt, don't assume it is their intentions to be rude. Respond with a question that models a polite request, such as: Were you asking if I could ...? Consider making the student aware of more polite forms if he/she repeatedly uses impolite language. Use phrases such as: I know you don't mean to be impolite, but when you say ... it can sound rude in this context. It might be better if you said ... instead. <a href="http://resources.jjay.cuny.edu/erc/tutoring/pdfs/Guidebook.pdf">http://resources.jjay.cuny.edu/erc/tutoring/pdfs/Guidebook.pdf</a>
- Have a balanced, written agenda for weekly feedback sessions (give to the student beforehand
  and ask for their contribution) that is not just performance orientated but considers the overall
  placement experience and has a student-centred approach, I.e. What was stressful for the
  student that week, what they think they did well, what areas they would like to work on, what
  are their priorities, etc. (Caitlin Franken, Donvale Rehabilitation)
- Monitor the student for signs of fatigue and the amount of work students take home.

## **Resources**

http://fieldworkeducatortips.blogspot.com.au/ http://www.clinedaus.org.au http://www.qotfc.edu.au	Lots of tips for professional practice education on a range of topics!
http://fieldworkeducatortips.blogspot.com.au/2011/02/who-what-when-why-and-howcoaching.html	Tips from practice educators on questions that facilitate students' communication and clinical reasoning
http://www.heacademy.ac.uk/resources/detail/internationalisation/ISL_Professional_Placements	Highlights the challenges CALD student encounter on placement
http://www.economicsnetwork.ac.uk/showcase/chuah in ternational	Highlights the cultural differences underpinning certain behaviours
http://resources.jjay.cuny.edu/erc/tutoring/pdfs/Guidebook.pdf	A guide to tutoring non-native English speaking students
http://doctorsspeakup.com/home	Website on intentional communication skills (with activities to complete), as well as guidelines on how to broach challenging areas such as mental and sexual health
Cambridge Dictionaries Online http://dictionary.cambridge.org/	Free online dictionaries designed for non- native English speaking students. Terms are defined with a limited number of words

	and examples of how the words are used in sentences are provided.
Taylor, R. (2008).The intentional relationship: Occupational therapy and use of self. Philadelphia, PA: F.A. Davis Company  Ivey, A., & Ivey, M. (2007). Intentional Interviewing and counselling: Facilitating client development in a multicultural society (6 <sup>th</sup> ed.). Belmont, Ca: Thompson Brooks Cole	Textbooks that include a range of practical and intentional communication strategies in health settings
http://www.jcu.edu.au/wiledpack/modules/fsl/JCU_09034 2.html#_Reflective_framework  http://cw.routledge.com/textbooks/9780415537902/data/learning/8_Reflection%20in%20Practice.pdf	Useful prompts/ frame works to assist with reflection on practice, and the placement overall (i.e. before weekly feedback sessions)
http://www.nclrc.org/essentials/speaking/stratspeak.htm	Strategies for developing communication skills
http://www.mindhealthconnect.org.au/about-us Resources for students who are on a mental health placement, or experience personal anxiety, stress, etc.	Resources for students who are on a mental health placement, or experience personal anxiety, stress, etc.
http://www.intstudentsup.org/	Website developed by staff at QUT: 'Cultural connections for learning'. It focuses specifically on international students & placements, but much of the information is broadly applicable to students from CALD backgrounds. The site also features video clips made with students on a range of issues, including helping students settle into the workplace, understanding workplace culture and communicating with patients