Perceptives on Cross-Lingual Communication in Psychiatry NaimWaheed

Abstract

WHO has established that mental illness is globally on the rise. In the Middle East in particular, the population may be at an even higher risk, not least due to the predominance of contemporary issues of a contentious nature and international scale. With psychiatrists still in shortage, medical education and training has a foremost role to play in attending to this problem. It is significant that medical education in the region is largely conducted in English, especially in the context of psychiatry where patient assessment is almost entirely qualitative and dependent on patient-doctor communication. In this study, we will assess the interplay between language and communication as reflected in the patient-doctor interaction, in a population of medical students who are in the singular position of learning psychiatry in English, but communicating with patients in their native tongue, namely Arabic. We will address the characteristics of medical students' adaptation of psychiatric vernacular into Arabic, the extent to which it is influenced by preconceived notions of mental illness, and the level to which they are attuned to a prominent background issue: the enduring stigma faced by patients with psychiatric illness. We hope to provide a preliminary appraisal of the current situation, upon which further work can be built. We formulated an electronic survey based on a review of literature and consultation with practicing psychiatrists in Saudi Arabia. Participants are senior medical students and interns at Alfaisal University, Riyadh, Saudi Arabia; participation is voluntary and anonymous. People with speech, hearing, or mental impairment require special communication assistance, especially for medical purposes. Automatic solutions for speech recognition and voice synthesis from text are poor fits for communication within the medical domain because they're hooked in to error-prone statistical models. Systems dependent on manual text input are insufficient. Recently introduced systems for automatic signing recognition are hooked in to statistical models also as on image and gesture quality. Such systems remain in early development and are based on minimal hand gestures unsuitable for medical purposes. Furthermore, solutions that believe the web can't be used after disasters that need humanitarian aid. We propose a highspeed, intuitive, Internet-free, voice-free, and text-free tool fitted to emergency medical communication. Our solution may be a pictogram-based application that gives easy communication for people who have speech or hearing disorder or psychological state issues that impair communication, also as foreigners who do not speak the local language. It provides support and clarification in communication by using intuitive icons and interactive symbols that are easy to use on a mobile device. Such pictogram-based communication are often quite effective and ultimately make people's lives happier, easier, and safer. The need for communication aids by people with auditory disabilities or hearing disorder is well established. An Australian government report identifies three categories of existing technologies that aid such individuals via phones or the Internet: listening devices, text-based technology, and webbased video conferencing technology. Voice-based aids, like listening devices, are limited to voice amplification and clarification, reducing the amount of potential users taking advantage of them. Noblin et al. determined that elderly people were reluctant to use telepsychiatry services thanks to their hearing impairments. Text-based technologies include TTS, voice recognition, and telephone typewriter (TTY) devices. Special devices are required for older TTY technology. TTS and voice recognition technologies have improved within the past few decades, and a few communication aids supported these technologies are currently available. For example, the Virtual Voice app for Android smartphones uses TTS and speech recognition to enable users with hearing impairments to communicate with others by phone without requiring sign language or lip reading. Users with hearing impairments type the text they want to speak, and therefore the app uses the smartphone's TTS capability to talk . In the other direction, the app uses the phone's voice recognition capability to translate a caller's voice into text for the user. The app provides large, readable text and supports any language that a smartphone is configured. In addition, some companies also offer a person's voice-to-text translation service. The Hamilton CapTel App for Smartphones (Relay) uses human intermediaries at a call centre to translate a voice caller's words into text captions for users with hearing impairments. The captions are displayed on the user's phone. These text-based communication aids depend upon a user with adequate cognitive abilities and on a person's intermediary. Web-based video conferencing is usually employed by people with auditory disabilities, especially by those that use signing . A video relay service (VRS) enables users with hearing disorder American signing (ASL) with use а person's communications assistant (CA) via video (Commission). The CA then relays information between the user with hearing impairments and a voice telephone user. Auslan Services provides a human VRS over Skype. Purple Communications offers the P3 mobile app and PC software, which supports

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VRS for iPhones and Android smartphones (Commission). Sorenson Communications offers an identical app and repair called ntouch (Communications). There are other such services offered by other vendors. Some governments also offer similar services, like the National Relay Service (NRS) in Australia (Service). However, the NRS is usually available via TTY devices. To explore pictogram-based communication between patients and physicians, we developed a conceptual prototype and conducted usability and accessibility tests to refine its design. Our prototype may be a smart watch application (also usable with smartphones and tablets) that aids nonnative language speakers or people with speech, hearing, or cognitive impairments to speak relevant medical information to physicians. It provides simple, clear communication by using intuitive icons and interactive symbols. They are easy to find on the smart watch, which is easy to access and difficult to misplace. Such an application would have clear benefits for many users. For example, an individual with cognitive disabilities or impairments could very quickly and simply use simple icons to convey basic information about injuries, emotions, pain level, or basic needs to medical personnel. Similarly, medical personnel could use this application to help someone who is injured or paralyzed. Quick, simple.