MiXed Messages

Cross-cultural management in Aboriginal community controlled health services

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with

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Chapter Five:
MIDDLE EAR DISEASE, COMMUNICATION AND MANAGEMENT

Workplace communication in Aboriginal health organisations is also influenced by the widespread functional listening problems that have their origin in the endemic conductive hearing loss that affects Aboriginal children as a result of middle ear disease. Estimates suggest that Aboriginal children in Australia experience, on average, 2.6 years of conductive hearing loss while growing up. The equivalent figure for non-Aboriginal children is three months (OATSIH 2001).

Not surprisingly, many Aboriginal adults have functional listening problems caused by this incidence of persistent middle ear disease in childhood. Long-term conductive hearing loss also contributes to the development of auditory processing problems (Hogan & Moore 2003). Auditory processing problems make it difficult for people to listen in noisy environments, and to understand and remember spoken information. One study found that 38 percent of Aboriginal secondary students had auditory processing problems (Yonovitz & Yonovitz 2000). This compares with the 7.5 percent of non-Aboriginal children who have auditory processing difficulties. A history of middle ear disease may result in some sensori neural hearing loss among Aboriginal adults (Lay 1990) and mean that some people have a greater vulnerability to noise induced hearing loss (Job et al 1999).

While there has been some focus on the impact of Aboriginal children's hearing loss on their education, little attention has been paid to the ways in which functional listening problems among Aboriginal adults may contribute to the multiple areas of Aboriginal disadvantage. The only research carried out in this area has been with a group of Aboriginal apprentices (Howard 2005). This study found that functional listening problems were associated with performance and social difficulties in the workplace.

Among Aboriginal staff interviewed for this project, about half showed evidence of functional listening problems. These were identified through a survey that asked people a series of questions about listening in different situations; when there was background noise or competing speakers, or when it was not possible to see the people's faces when they spoke.

While the survey identified the people who had functional listening difficulties it could not identify the origin of these. They can result from current conductive hearing loss, auditory processing problems, some degree of sensori neural hearing loss, noise induced hearing loss, or some combination of these. However, it is commonly agreed that the greater prevalence of functional listening problems among Aboriginal people has its origins in the endemic middle ear disease experienced by Aboriginal children.

Some indicators of functional listening problems are:

- asking for things to be repeated;
- misunderstanding what is said;
- relying on non verbal communication;
- being very quiet and shy;
- having difficulty understanding when there is background noise;
- needing to see the face of the person speaking and;
- avoiding communicating with unfamiliar people, especially unfamiliar non Aboriginal people.

Many Aboriginal staff interviewed in this project knew they had some level of hearing loss, often as a result of formal hearing tests. None used hearing aids, although these had been recommended in many cases, because the cost of these, or the difficulties associated with the referral process to obtain a hearing aid, as well as the cost, made this an impractical option. The people they worked with were seldom aware that they had problems hearing. However, functional listening problems had significant effects on their communications and performance at work.

The staff with functional listening problems often had strong preferences for particular styles of communication and preferred to communicate with particular people. They preferred face-to-face communication, low background noise, and

to work with people they knew well. They found it difficult to understand people who used a lot of jargon and often avoided communication with people who judged them as a result of their difficulties in understanding what was being said.

There were also certain types of communication, for example by telephone, that were particularly difficult. Aboriginal Health Workers with functional listening problems mentioned they often find it difficult to understand messages over the phone, especially when a telephone call is from a doctor.

> *"The doctors that ring up are hardest, the words they use, and way they talk. They ring and want to talk to* (GP at health centre) *and tell you whole story (about why they are calling). They talk too fast and tell you too much."* (Remote Aboriginal Health Worker with functional listening problems)

People who telephone remote communities often find that messages do not 'get through', or they are inaccurate when passed on. Functional listening problems and the use of unfamiliar language contribute to this situation. Aboriginal people with functional listening problems who make mistakes taking telephone messages are often criticised for this (Howard 2005), so it is not surprising that they avoid this task if they can.

For those with functional listening problems, communication with unfamiliar non-Aboriginal staff is often difficult. This means that a high turnover of non-Aboriginal staff will have more impact on Aboriginal staff with functional listening problems than it will on other staff. It is commonly accepted that work effectiveness improves once non-Aboriginal workers develop a relationship with the people in a community. While it is generally thought that this is related to cultural factors, this study suggests that the widespread functional listening problems in Aboriginal communities are also a factor.

Aboriginal staff with functional listening problems described that communications problems were less with people who were familiar. If someone is known, 'face watching' and lip reading are easier, and it is easier to understand the motivations and thinking of the speaker, which helps to fill in any gaps created by his/her listening problems. Importantly, an established relationship also means that there is less likelihood that they will be judged negatively and shamed as a result of communication difficulties.

Comments following the departure of a well-established nurse/manager highlight this.

> *"He knows us and we can talk to him. He is easy to talk to. If we ask him things he doesn't think we're stupid. It will be hard with someone new. You don't know them so you feel shy in case feel shame."* (Remote Aboriginal Health Worker with hearing loss)

The importance of a non-judgemental attitude, as mentioned earlier, is especially critical with people with functional listening problems.

TRAINING

Aboriginal Health Workers with functional listening problems sometimes experience considerable difficulties during training. One Aboriginal Health Worker was interviewed on the afternoon of a full day training program. She looked exhausted and confirmed this, saying that listening intently all day was really hard. The training presentations were mostly from 'talking heads'; that is, non-Aboriginal professionals who just talked. They often used professional jargon and made minimal use of visual cues to help explain the things they were talking about. An experienced urban health worker with functional listening problems described the challenges of her role as a cultural broker, because of this situation.

> *"I've found it absolutely frustrating and you go and pick up a medical dictionary and start looking it up, there are even more complicated words to try and break down and they're not making sense to you. Then how do you then put that all into context and break it down and deliver that message. I've found it absolutely confusing."* (Aboriginal Health Worker with functional listening problems)

Another remote area Aboriginal Health Worker with functional listening problems described her anger at an incident where she was disciplined for reading a newspaper during a long training session.

> *"That incident was a disaster. He* (the trainer) *was just standing there just with blank expression going blah, blah blah blah. I was yawning and struggling to stay awake."* (Aboriginal Health Worker with functional listening problems)

She spoke about another speaker whose presentation did engage her.

> *"We all clicked on when she talked. She's got that way of talking. She is lively* (animated face and uses a lot of body language) *and she showed us all these things* (real life examples of foodstuffs). *It makes it interesting. Learning should be fun like that. You got to keep it interesting. Otherwise I don't pay attention, I tune off."* (Aboriginal Health Worker with functional listening problems)

It is common for people with functional listening problems to 'tune out' when they reach a point of verbal overload. People 'tune out' more often when speakers create high listening demands by talking a lot with few visual cues.

> *"Some people can be boring. I'm really bad when X talks to me, I switch off. She gives a really long thing about something and then she will change the topic - she is pedantic. I'm not angry, just frustrated* (with her communication style). *I get like that with some staff around here and then I think, for God's sake, when I sort of realise what I've done I think, don't ask me questions, I haven't heard a word you've said. I've got a cousin like that too and I feel like just knocking her out sometimes. But yes, honestly, that's the truth I can't stand people that rave on."* (Aboriginal manager with functional listening problems)

Conversely this manager found it easier to communicate with people who got to the point quickly and say what they want clearly.

> *"I tend to listen when they get straight to the point and if I ask a question and if they can answer me straight to the point I'm happy, I can concentrate and I can walk away."* (Aboriginal manager with functional listening problems)

Background noise is another factor that can make communication harder for those with functional listening problems.

> *"My problem* (in meetings) *is if there is too much noise. If there is too much noise I feel like saying 'shut up, I am listening'. It is really frustrating."* (Aboriginal Health Worker with functional listening problems)

These are important factors to consider in communicating with and providing effective training for the 50 percent of Aboriginal Health Workers and Aboriginal managers with functional listening problems. Non-Aboriginal staff, can reduce performance problems, frustration levels and communication breakdown if they adopt communication strategies that are most effective for Aboriginal staff with functional listening problems. These include using visual cues in training, limiting background noise, getting to the point quickly and using amplification during training.

LISTENING AND PERFORMANCE

The lack of awareness among others of the influence that functional listening problems can have on the comprehension of verbal communication is, of itself, an important contributor to communication difficulties. The way someone reacts to an Aboriginal person's communication difficulties can contribute to the breakdown of cross-cultural communication.

> *"Sometimes with X* (non-Aboriginal manager) *I don't understand his terminology but I don't bother asking him because I think some of the time I don't like his attitude. Sometimes I feel as if, and I don't know if he means it, but I feel as if he thinks that he's smarter than me so I don't bother. Other people who I feel on the same level it's easier to ask. Like with Y* (non-Aboriginal manager) *where we talk at that same level and if I don't understand him I'm comfortable with saying - What do you mean?"* (Aboriginal manager with functional listening problems)

Making negative judgments about the capacity or motivation of someone with functional listening problems compounds communication problems because the person with functional listening problems may become reluctant to seek clarification.

The functional listening problems faced by the Aboriginal Health Worker quoted above are consistent with those identified during other research (Howard 2005). People with functional listening problems are those most likely to miss some verbal information, and to find it difficult to participate in discussions in one or more of the following situations.

- Where there is background noise.
- Where the speaker is unfamiliar.
- Where the topic is unfamiliar and, or uninteresting.
- Where there is no visual or real life context to aid understanding.
- Where verbal overload prompts 'tuning out'.

Training or coaching can help managers understand the nature of functional listening problems. Managers who had been coached on functional listening problems as part of this project saw, and managed communication problems differently. One manager said that his knowledge of functional listening problems had improved his understanding of communication difficulties and encouraged him to be a more proactive communicator when he believed that people had functional listening problems.

> *"It is good to be aware of X's functional listening problems. I take more care to work through issues one-to-one to make sure he is on board. I try to always give a written briefing that is going to be tabled later so he can read it before it is discussed. When you forget about it and take issues to him that he has not understood that reminds you – I have not worked that through with him. If you are in a meeting and you do not get the support you expected* (from him), *you think hang on I have not worked this through with him. Before* (I knew about functional listening problems) *I would get frustrated and think - why has he not come on board with this?"* (Non-Aboriginal manager)

An understanding of the effects of functional listening problems prompted this manager to use more effective communication strategies and inhibited the type of judgmental attitudes that can undermine the self-confidence of Aboriginal staff.

Further, there was evidence that Aboriginal staff who themselves understand their functional listening problems can become more confident and effective.

"I think I have got a little bit more confidence since our last conversation (when we talked about functional listening problems). *I am more comfortable about asking people 'what do you mean?' and I don't jump in with decisions now. I used to jump in and make a decision without understanding everything because I worried that people thought I was taking too long asking about stuff. Now I just keep asking things until I understand everything before I decide something. I do a lot of talking to myself too and say, Jesus girl, you've got to start speaking up. We have had visitors coming here and I have been part of the conversation where I will speak and talk. I mean I never used to do that because I was shy but also because I thought I would be saying the wrong thing, you know."* (Aboriginal manager with functional listening problems)

"It is good to understand why school was so hard for me and why I get so frustrated sometimes. I feel stronger about keeping asking (for clarification) *and not being shamed about asking. It makes me want to make sure the same does not happen with my kids and all those kids we see at the health centre with bad ears."* (Aboriginal Health Worker with functional listening problems)

"You know I always thought that I was dumb and that non-Aboriginal people just did not like me. Knowing about this stuff helps me know I am not dumb like I thought. I can do things if it is explained the right way but non-Aboriginal people mostly can't do that - it is them who are dumb." (Aboriginal Health Worker with functional listening problems)

This suggests an understanding of the issues around functional listening problems can help build the capacity of Aboriginal staff and Aboriginal health organisations.

What those with functional listening problems do in the face of communication difficulties is important. One successful Aboriginal manager with functional listening problems, who works outside the health sector, commented that she

had a reputation for asking 'lots of dumb questions'. They were seen as 'dumb' by others because they were about information that had already been discussed, or were at a level of detail the others felt was unnecessary. However, these 'dumb' questions were in fact important for this Aboriginal manager. She needed to ask them to clarify what had been said and to build the knowledge frameworks that underpinned her work success. Her 'dumb' questions were critical for her success, and if she had allowed the reactions of others to constrain her questioning, she would have been less effective in her work. However, it is common for people with functional listening problems to remain silent when unclear about the content of a discussion, to avoid the hurtful judgements that they are well aware of because of their astute reading of body language.

CULTURE, WORLDVIEW AND LISTENING

Interviews indicate that familiarity can provide a framework of knowledge that helps those with functional listening problems to understand what others say. It is easier to understand what a familiar person from the same cultural background, who is talking about a known topic, is saying. It is harder to accurately interpret what an unfamiliar person from another culture, speaking about an unfamiliar topic, is saying. While this is true for everyone, familiarity is more critical when hearing loss or auditory processing problems restrict a person's perception of what is said. One implication of this is that a high turnover of non-Indigenous staff will have a more significant effect on Aboriginal staff with functional listening problems than it will on other staff.

However, functional listening problems are also an obstacle to learning about culturally different people and concepts. Those with listening difficulties tend to cope with cross-cultural difficulties by avoiding or minimising their involvement in such situations. They often felt, and there is evidence that others also saw them this way too, that they were less successful when dealing with cross-cultural communications.

Lowell et al (2004) highlighted the importance of shared 'world views' in successful cross-cultural communication, in a project, which examined communication with Aboriginal patients and non-Aboriginal health workers. A shared 'world view' is arrived at through a series of cross-cultural negotiations.

However, Aboriginal people with functional listening difficulties suggest they are less likely to successfully participate in the negotiations needed to arrive at a shared 'world view'.

This conclusion is supported by research carried out in schools where Aboriginal students with listening difficulties were found to participate less in the classroom dialogue (asking or answering questions and making contributions in class) than other Aboriginal students (Howard 2004a). In another study (Howard 1990), in a remote Aboriginal school, non-Aboriginal teachers were asked to nominate the students that they found most difficult to relate to. When hearing tests were carried out it became apparent that most of the children in this category had some degree of hearing loss. One non-Aboriginal teacher commented that the Aboriginal students with hearing loss in her class seemed 'more Aboriginal' than the other Aboriginal students.

It would seem, therefore, that hearing loss can be an obstacle to the acquisition of the shared 'world view' needed to operate successfully in a cross-cultural classroom. Partington and Galloway (2006) found that explicitly teaching what was culturally unfamiliar in what was being learnt at school to Aboriginal children with conductive hearing loss helped them to succeed at school.

This analysis suggests that functional listening problems affect not only people's ability to hear what is said, but also to understand what is heard. Functional listening problems can influence the extent to which, in the past, someone has avoided or been unsuccessful during the cross-cultural interactions that are critical in developing shared world views. Where functional listening problems may have hindered the development of shared 'world views', it is important to consider what background information that may be needed to understand the aspects of western 'world views' that are relevant to the issues being discussed. This has important implications for building capacity of Aboriginal staff with functional listening problems. Capacity building may need to build up understanding of the frameworks of knowledge and concepts around the topics being worked on, much more than is generally anticipated. This type of capacity building needs to be individualized, flexible, without unrealistic time limits and carried out by people who are trusted.

VISUAL LITERACY

Visual literacy is the capacity to receive and express information through visual means. This includes gestures, facial expressions and body language. Visual literacy skills are an important component of Aboriginal communication so Aboriginal people generally have better visual literacy skills than non-Aboriginal people.

> *"Aboriginal English makes considerable use of non-verbal signs… (they) are an integral part of the communication process … they are systematised and integrated in a way that makes them an essential part of the vocabulary of the language."* (Queensland Government 1993:37)

Chapter 4 highlighted the importance of face-to-face communication in Aboriginal health services. The visual cues that play a part in face-to-face communication assist all Aboriginal staff, but are critical for successful communication outcomes with people with functional listening problems.

> *"I tend to watch* (people). *It helps me to form an opinion and an idea of how they feel about certain things … and what to say next to make them feel how you think they want to feel sort of thing. And I know when I've said something wrong. Their reaction tells me. I know if they're uncomfortable. I'm uncomfortable because of it even (if) they won't say it."* (Aboriginal manager with functional listening problems)

One Aboriginal Health Worker with functional listening problems said that she preferred to use sign language to ask for clarification from other Aboriginal staff, instead of asking a question that might mean being shamed in front of any non-Aboriginal people who are present. A number of people commented that visual cues greatly helped communication outcomes. One non Aboriginal manager described he always used a white board in meetings to help explain things. One doctor said he always had a pen and paper on hand to draw pictures to illustrate what he was trying to explain to Aboriginal Health Workers and clients.

Most Aboriginal managers and Aboriginal Health Workers with functional listening problems had a strong preference for face-to-face, one-to-one communication. This allowed them to make maximum use of visual cues and seek verbal clarification without the danger of being publicly shamed.

The issue of functional listening problems has major implications for communication between health practitioners and the high proportion of Aboriginal clients with functional listening problems. This is not an issue addressed in this book, but the findings regarding the impact of functional listening problems among Aboriginal staff suggest it is an important issue to explore.

DIFFERENT WAYS OF GETTING THINGS DONE

Aboriginal staff with functional listening problems described strategies that helped to cope such as spending more time on preparation. This more extensive preparation helped them to build a basic framework of understanding about the work they were involved in. This helped them to 'hear' better through their background knowledge filling in the auditory gaps created by listening problems.

One manager explained that, if she was going to attend a meeting, she would read all she could about the topic beforehand, and talk to people about what was discussed afterwards. The preparation gave her background information on the issues that would be discussed and some knowledge of the language that would be used. She would also think about her views and what she wanted to say, even to the point of scripting it in her mind. Without this type of preparation she would be worried that she would not understand what was happening at the meeting, and about the possibility that she might be shamed.

One manager described how he made sure an Aboriginal Health Worker with functional listening problems had 'the big picture'.

> *"It is important to give her the background so that she knows the big picture. And I know I have to be very clear in what I say, not give any room for mixed messages. She likes to think it through herself. I ask her what she is thinking, rather than tell her what I want her to do. She likes to feel she is making the decision hers through understanding the reason for it. All that takes more time explaining and discussing, but if I don't do it that way there are likely to be arguments and misunderstanding that take lots more time to sort* out." (Aboriginal manager)

By providing background information, the manager was helping the Aboriginal Health Worker to develop her knowledge framework. When anticipating what may happen, people often think first about what they want to happen. When they decide on a plan themselves they may be upset if others, who have not been consulted or have not agreed to the plan, frustrate it. By finding out what the Aboriginal Health Worker is thinking about an issue, instead of issuing instructions, the manager avoids the potential for conflict if her 'thought plans' are frustrated. The manager works with the Aboriginal Health Worker to help her make her 'own' decisions, rather than simply directing her. While this could be seen as a good management process for most staff, it can be essential for staff with functional listening problems. Otherwise, staff with functional listening problems may too often become frustrated and upset with managers who they see as excessively directive.

This manager also described another strategy he used with this and another Aboriginal Health Worker, who was also found to have functional listening problems. The tendency to construct anticipated scenarios as a coping strategy often results in high levels of anxiety, and in suspicion about the intent of others. The manager had discovered that their first response to an email was either to call him or to 'stew' over what they saw as a personal attack. He decided to phone them when he sent out an email on a general issue, to assure them it was not directed personally, at them.

Managers and colleagues sometimes provided effective support to Aboriginal staff with functional listening problems, although often they did not realize why someone needed particular types of support. One manager said she would make friends with some of the people she worked with, so she could enlist them as mentors or 'listening buddies'. If she did not understand something that was discussed she would turn to them for an explanation, at the meeting or afterwards. They became her extra pair of ears. Most of her 'listening buddies' are other Aboriginal people. In mainstream organisations where there are few Aboriginal workers, those workers with listening problems may enlist non-Aboriginal people, with whom they share a mutual respect and who they feel 'safe' with when disclosing their communication difficulties, to help them in a similar way.

Aboriginal people with functional listening problems have usually experienced

recurrent failure in 'talk focused' schooling and workplaces. They often need to be sure they are not going to face more of the same experiences before they are comfortable about accepting help. This highlights the importance of relationship-building and the need to identify people's strengths, when people are dealing with functional listening problems.

CONTROLLING WORK

While staff with functional listening problems may prefer non-directive management styles, some Aboriginal managers with functional listening problems may be more likely to use a directive management style. This is consistent with findings that non-Aboriginal people with auditory processing problems may seek high levels of social control, as one way of coping (Howard 2004).

One Aboriginal manager with functional listening problems said that she coped best in the workplace when she was 'the boss'. Being the boss allowed her to manage listening demands and the listening environment. She could tell people to stop talking 'on the side' in meetings, so she could hear the person talking to the group. She was also able to manage her communication with people to choose situations and circumstances that allowed her to listen better, or ask people to communicate more through email. Some managers with functional listening problems had a preference for administrative work, because it was structured and routine and mostly involves face-to-face and one-to-one communication or communication by email. For these people, large meetings and networking with unfamiliar people can force them into uncomfortable roles that they would rather avoid, or only engage in reluctantly with a 'listening buddy' present.

The highly directive management style evident in some Aboriginal organisations and among some Aboriginal managers may in some cases be a coping strategy for managers with functional listening problems.

ANXIETY AND SUSPICION

Functional listening problems can make people very anxious, and especially so if conversational partners lack non-verbal communication skills. It is hard for those who are unfamiliar with the effects of functional listening problems to understand how a simple conversation may lead to anxiety, and an accompanying reticence

that may be seen by others as an inexplicable and frustrating shyness.

The interviewed Aboriginal managers and Aboriginal Health Workers with functional listening problems experienced high levels of discomfort and anxiety when faced with cross-cultural communication challenges in the workplace. Their level of anxiety was lower when communicating with Aboriginal people who were familiar with their communication needs, or who themselves had the same needs.

When people communicate with people who come from the same cultural background they share a powerful framework of knowledge that helps them fill in any gaps that result from functional listening problems. However, doctors and nurses from another culture who use unfamiliar terminology to describe alien concepts with few accompanying visual cues are much harder for those with functional listening problems to understand. Telephone conversations with unknown people and without visual cues are even harder to understand.

When people regularly miss what is said, it is also easy for people to suspect that others may be purposely withholding information. Some Aboriginal managers with functional listening problems commented that they often felt that other managers and staff might be keeping information from them or not involving them in key decision-making processes. One described her embarrassment after emailing a strongly worded complaint about a decision made without her involvement, only to be told that she was present at the meeting where the decision had been made. She then realized that it was discussed and decided on during a part of the meeting she had 'tuned out' from.

One manager discussed her fears about getting it wrong and becoming paranoid.

> *"You know what I'm really afraid of is sitting back and forming the wrong opinion or the wrong picture and getting paranoid about a situation. I tend to blow it out worse than what it is. I've done it a couple of times and I think, shit! But it is also that lack of - not knowing what is going on or not being told everything makes me like that. I can see things going on and conversations and not knowing what it is all about which is what makes me suspicious. It makes me really anxious and worried. I have a lot of sleepless nights."*
> (Aboriginal manager with functional listening problems)

Other staff can sometimes use this anxiety and suspicion for their own purposes

in organisational political games. It was noted that others sometimes manipulated the anxieties of staff with functional listening problems for their own purposes.

> *"Sometimes I don't get told and X loves it that she is involved in something and I'm not and she makes a point of coming back and saying 'You really should have been involved' and all this bullshit. But it only makes me feel worse because I know that I should have been involved and I wasn't. That's the thing I hate and I get paranoid about it and then I start thinking silly things."* (Aboriginal Health Worker with functional listening problems)

It is clear that functional listening problems increase levels of occupational stress and can foster anxiety and suspicion that can impact on social and emotional well being. Middle ear disease has been found to be associated with poorer social and emotional outcomes for Aboriginal children (Zubrick, Lawrence, Silburn, Blair, Milroy & Wilkes 2004). It would seem that functional listening problems that arise as a result of childhood middle ear disease also contribute to poorer social and emotional outcomes among Aboriginal adults.

WORKPLACE CONFLICT

As was found with Aboriginal apprentices (Howard 2005), those with functional listening problems were more often involved in workplace conflict. One Aboriginal Health Worker described how the negative attitude of a new nurse caused difficulties between them that escalated into a major conflict. The conflict shattered her confidence and taught her to mistrust non-Aboriginal staff.

> *"I get a bit nervous of new staff - one new nurse was growling and bossing me, then it was worse. He thinks we're all dumb and hopeless - makes us feel really put down. He said in front of everyone 'you know you're paid to do that'. He shamed me. I worked six months on ignoring him.* (Sometimes) t*he way he talked to me I thought he was going to hit me and I said to him one time 'If you hit me I will hit you back'. I've been through domestic violence when younger. He complained about me and then I got told off. After that I did not trust Kardya* (non-Aboriginal people) *I still don't talk much to Kardya. It makes you feel funny. You think you are going to do things wrong."* (Aboriginal Health Worker with functional listening problems)

In this situation it would seem that difficulties in communication related to functional listening problems was compounded by a new nurse who had a confronting social style that 'triggered' feelings about past domestic violence for the Aboriginal Health Worker. This illustrates that adverse outcomes from functional listening problems result from a combination of factors, not just listening problems alone (Howard 2005).

In another situation, referred to in Chapter 3, between an Aboriginal manager and a non-Aboriginal staff member, functional listening problems appeared to compound difficulties with different communication styles. The non-Aboriginal staff member outlined her concerns in a calm manner. She placed a high value on professional conduct, which in her mind meant that she should not show any emotion when dealing with her concerns. Her manager had functional listening problems and focused strongly on the non-verbal content of communications. She often paid more attention to how things were said than to what was said. Her response to her staff member's calmly expressed complaints was *'she is lying; she says she is upset about this but she does not show it'.* The lack of congruence between what was being said and how it was expressed made the message suspect. The manager's descriptions of her dealings with others often referred to the way people showed their feelings, by how they looked. A mediated discussion was arranged. Before this took place, coaching encouraged the non-Aboriginal staff member to show her feelings about what was happening. When she did this the Aboriginal manager realised how upset the staff member was, because she could now see this by reading the facial expressions, and her attitude changed immediately. She accepted the validity of what was being said and was willing to consider ways of resolving the problem.

As a postscript to this episode, the manager also received coaching to teach her to make sure she was clear about and had understood what other people had said, by using strategies such as paraphrasing (repeating back what others said to her). She commented that she also tried this technique at home and found she was getting on better with family members. She had long thought people were making things up when they said they had told her something which she could not remember. She found she understood what family members were saying better than before, and there were fewer family disputes based on misunderstandings.

WORK PERFORMANCE

In the earlier mentioned study of Aboriginal apprentices (Howard 2005) it was found that all the apprentices who experienced significant performance problems in the workplace had functional listening problems. However, their performance problems were not simply the result of functional listening problems; a range of other factors interacted with the functional listening problems to undermine performance. These factors included the following.

- The strategies the apprentices used to cope with their functional listening problems and failure to seek clarification when they did not understand things. There were more workplace performance problems when apprentices ignored directions that were not understood and there were fewer problems when clarification was sought.

- The attitudes of supervisors and peers when apprentices failed to understand what they had been told, and the use of avoidance as a coping strategy (despite their failure to understand what they had been told) when the attitudes of others were negative. There were more problems when supervisors were intolerant and attributed blame and fewer problems when they were supportive and viewed good communication as a shared responsibility.

- The extent to which listening skills were relevant to the work of an apprentice. There were more problems when the tasks involved heavy listening demands. For example, project work where each new task requires a new explanation presents more listening challenges than routine work. But routine work, such as reception work, that presents ongoing listening demands is particularly difficult for those with functional listening problems. There were fewer problems when the tasks were more routine, so that once mastered they could be performed with minimal ongoing listening demands.

In the project reported in this book, a range of workplace performance issues related to functional listening problems emerged. One Aboriginal Health Worker had difficulty using a stethoscope, especially when there was background noise. Transferring the Aboriginal Health Worker to a nutrition job was considered, but the purchase of an amplified stethoscope solved the problem.

There were many instances where participation in meetings had been influenced by functional listening problems. As mentioned earlier, one Aboriginal Health Worker with functional listening problems was disciplined for reading a paper during a training session which she had difficulty following. Other Aboriginal Health Workers with functional listening problems routinely arrived late, left early or did not attend meetings where they anticipated it would be hard for them to understand what was said, or when they thought that they may be shamed by a failure to understand what was happening.

There were also more subtle performance problems related to functional listening problems. Aboriginal managers with functional listening problems mentioned avoidance of meetings with people they found it difficult to communicate with. This could be because of a personal communication style (talking too fast or using too much jargon) or aspects of the communication process (unfamiliar people talking about unfamiliar topics). Meetings commonly avoided were those with staff from the Commonwealth Department of Health and Ageing. Rapid departmental staff turnover means that departmental staff are often unfamiliar and they talk about constantly changing government perspectives that are often difficult to understand.

Functional listening problems also have the potential to create performance problems through the disruption of general interpersonal communications. Difficulties that contribute to these performance problems include a failure to understand, or the misunderstanding of directions, feeling too shamed to do things in case something has been misunderstood, and feeling resentful at the negative judgements that are made because of functional listening problems.

Performance problems are more likely when both the person and process are unfamiliar and the environment is noisy. For example, with the earlier cited example of the Aboriginal Health Worker who was in conflict with a nurse, the nurse was new and the Aboriginal Health Worker had newly commenced her training and was not used to 'bossy' nurses. So, the person and the process were unfamiliar. An understanding of the way in which functional listening problems can contribute to performance problems helps people to understand how such problems have arisen, how best to manage them and how to prevent their recurrence.

In general, past middle ear disease contributes to a persistent level of hearing and auditory processing problems in adulthood. However, adults can still have acute episodes of middle ear disease. These can cause a temporary and significant hearing loss that, in association with ill health, can affect work performance.

One manager reported that an Aboriginal staff member who was approached about recent poor work performance explained that she had been having trouble with her ears recently (an episode of acute otitis media). This had made her feel 'unmotivated and slack'. Her manager's concerns about her poor work performance included poor motivation and lack of initiative. The other elements of her poor performance all related to tasks that required her to communicate and make arrangements with others. It was clear that her performance problems resulted from a combination of both poor physical health and communication problems related to current middle ear disease.

THOSE WITH FEW FUNCTIONAL LISTENING PROBLEMS

In this study, the Aboriginal staff with the fewest functional listening problems was notable in that others said they coped well with cross-cultural demands. One Aboriginal Health Worker prided himself on the exceptionally quick completion of his training. Another was often asked to be a spokesperson when groups were dealing with non-Aboriginal people and was recognised as an effective cross-cultural broker at meetings.

In general, the staff with fewer functional listening problems thought they related especially well to non-Aboriginal people and coped well in situations where there were heavy listening demands. The ease these people felt when working and operating in cross-cultural environments serves to highlight the significant and adverse effects that functional listening problems can have on the capability of people who are working in these environments. These results are similar to what was found among the Aboriginal apprentices (Howard 2005). Those with fewest functional listening problems were described as 'catching on' quickly to explanations in English and cope well with cross-cultural demands.

NON-ABORIGINAL STAFF WITH FUNCTIONAL LISTENING PROBLEMS

Research indicates that about 10 percent of the non-Aboriginal population have functional listening problems. The comparable figure for Aboriginal people is

more than 40 percent (Yonovitz and Yonovitz 2000). This difference is primarily attributable to the levels of middle ear disease in each group. However, interviews with non-Aboriginal staff working for Aboriginal health organisations revealed that a significant number of them had functional listening problems. This was supported by the results from the listening questionnaires completed with both non-Aboriginal and Aboriginal staff.

These non-Aboriginal people with functional listening problems often mentioned feelings of affinity with Aboriginal people, and said that they often felt more comfortable with them than with many of the people from their own culture. They described a communication 'connection' that made it easier for them to relate to others in cross-cultural settings. Their sense of ease when working cross-culturally appeared to lead them to gravitate towards cross-cultural work and the establishment of cross-cultural relationships, including marriage. It was noticeable that they appeared to have had a longer history of cross-cultural work, or had plans to engage in this over the longer term.

Non-Aboriginal people with functional listening problems described themselves as having highly visual communication styles, relying more on non-verbal cues, and avoiding verbal communication when there is background noise. They often preferred to get straight to the point in conversations, at times misunderstood verbal communication, and disliked large meetings such as formal training sessions.

While they typically had very positive relationships with Aboriginal people, many had been involved in interpersonal conflict with their non-Aboriginal peers or managers. These conflicts were often related to misunderstood verbal communications and negative judgements about their work performance or motivation that paralleled the experiences of Aboriginal people with functional listening problems.

This is a subject that needs further examination. However, communication strategies that are effective with people with functional listening problems would appear to be an important issue not only for Aboriginal staff working in Aboriginal health, but also for a significant number of non-Aboriginal staff.

SHARED SOLUTIONS

It is important that functional listening problems are not simply treated as a new 'deficit'. This would be counterproductive as well as mistaken. It is important to focus on the whole communication process. The absence of non-verbal communication skills and the judgmental responses of non-Aboriginal people are as much a key component of cross cultural communication problems as are Aboriginal functional listening difficulties.

In cross-cultural management, functional listening problems are a shared problem that requires shared solutions. These solutions include better understanding of the reasons for verbal communication difficulties and the use of strategies that lead to more successful communication. These strategies should include:

- Greater use of visual cues to help explain what is said.
- Minimising levels of background noise during verbal communication.
- Being careful not to create 'verbal overload'.
- Fostering the pre-learning that creates 'knowledge frameworks'.
- Encouraging people to ask 'dumb questions'.
- Using specific telephone communication and presentation strategies.

Organisations can also take some practical steps to create an acoustic environment that helps people with functional listening problems to cope.

- When selecting office space, acoustic conditions should be a priority.
- In existing offices, a noise audit should be carried out to review the placement of desks and meeting spaces. Noise dampening materials, such as carpets and curtains can make a significant difference.
- Consider the acoustics of the buildings and rooms that are used for meetings and use amplification systems for larger meetings or training groups.

- When a staff member is known to have functional listening problems, special care should be taken with the acoustics of their work environment.

- When purchasing new equipment, give preference to machines with the lowest possible noise emission levels.

- Put noisy appliances and machines in places where they will not intrude during conversations.

- Computer drive units should be placed away from employees, for example, under a table or desk.

- Provide readily accessible 'quiet rooms' or 'quiet spaces' where conversations can take place. 'Quiet places' are especially important in open plan offices.

- The use of amplified equipment (stethoscopes and telephones) should become standard practice, and make sure that telephones are available in quiet and readily accessible places.

- Staff training and mentoring should include information on functional listening problems and the implications of these for communication and cross-cultural management concerns such as performance management and conflict resolution.

- Where possible training of Aboriginal staff should be in the language with which they are most familiar. This may involve using interpreters.

Key Points

Many Aboriginal adults experience functional listening problems (hearing loss and auditory processing problems) as a result of endemic childhood middle ear disease.

Functional listening problems have been found to cause a range of problems for people when they are at work. Jobs that have high listening demands (for example reception

work) are more difficult for them and they often experience social difficulties in the workplace. The problems that they do face depend on the way they manage their difficulties, the understanding and the communication skills of those they work with, and the acoustics of the places that they work in.

Fifty percent of the Aboriginal staff interviewed during this project described having functional listening difficulties. They found certain people, especially non-Aboriginal people, for example, unfamiliar doctors on the phone, particularly difficult to understand. They found it difficult to listen when using stethoscopes. They also encountered difficulties during training, and especially when the trainers used few visual cues and relied on talking to get their message through. Trainers who used visual cues and had a 'lively' presentation style were easier to understand.

The way people respond to other people's listening difficulties is an important determinant of communication breakdown. If others decide that Aboriginal people with listening difficulties have limited capacity or motivation, they are less likely to clarify the things they want to say. So, miscommunication is more likely when others do not understand that communication problems are often associated with functional listening problems.

Aboriginal people with functional listening problems described a number of coping strategies. Some people undertook extensive preparatory work to build a framework of understanding around situations they might encounter, to compensate for their diminished auditory input and to help them to actually 'hear' better. They did so because they could then draw on their background knowledge to fill in the gaps caused by their functional listening problems. They preferred face-to-face communication so they could use their visual literacy skills. Some people also relied on 'listening buddies' who could clarify what was said at meetings.

Functional listening difficulties influence training outcomes, stress and anxiety levels and workplace performance. Functional listening problems were also found among some non-Aboriginal staff, and their more visual communication styles helped them to work well with Aboriginal people.

Functional listening problems limit people's ability to 'hear' what is said, and also affect their understanding of what they hear. Associated communication failures inhibit the development of the shared 'world views' that are basic to an understanding of culturally unfamiliar concepts.

There are some practical steps that managers can take to create an environment which takes into account the difficulties encountered by people with functional listening problems.

Chapter Six:
LISTENING AND GOVERNANCE

Communication and interaction among members of governing boards and councils was also considered in this study. The deliberations and decisions of these bodies play a central role in the operation of community controlled health organisations. Two day long meetings of two different bodies were observed, with the permission of committee members. Participants completed a questionnaire that helped to identify the members who had functional listening problems.

It was apparent that the effect of functional listening problems depended on the topics under discussion. When observed, the management committees were primarily concerned with two types of task. First, committee members were discussing 'community matters'; representing the interests of their community, conveying community wishes and reviewing and addressing complaints. Second, they were discussing 'external matters' in response to demands of non-Aboriginal organisations and other bodies, government regulators, professionals and researchers.

Functional listening problems were less evident when the discussion was focused on 'community issues' and more evident when 'external matters' were addressed. This reflects the differences in the knowledge frameworks of participants and their communication opportunities in each subject area. In general, there was no time constraint when community issues were considered, in the context of the issue, using the language committee members were most familiar with, and with accompanying signing.

On the other hand, discussion when dealing with 'external matters' often involves culturally unfamiliar concepts, often takes place within time-constrained meetings with limited opportunity for clarification, and the subjects are often considered in an abstract way and out of context.

These discussions take place in English, which can be a third or fourth language for committee members, and crucial information is often presented by non-Aboriginal people who provide few non-verbal cues. As discussed earlier, it is in this sort of situation that communication is most tenuous for people with functional listening problems. It is no surprise, therefore, that functional listening problems are most evident when governing bodies are dealing with 'external matters'.

The following evaluation is based on the results of a functional listening questionnaire completed by committee members and on observations made during their meetings.

Those with functional listening problems were most involved in discussion when 'representing community concerns'. During these discussions the participants, as well as being more actively involved in the conversation, were watching others very closely and monitoring non-verbal responses.

However, those with functional listening problems were noticeably less involved in discussions that involved 'dealing with non-Aboriginal matters'. In discussing these matters the people with the fewest functional listening problems, the most fluent English speakers, and the most literate often helped people with functional listening problems by explaining the issues and responding to non-verbal requests for help and apparent misunderstandings. When those with functional listening problems did participate in the discussions on these topics, it was often evident that they:

- had misunderstood what was said,
- talked off topic,
- asked for the repetition or clarification of points,
- asked about things that had already been discussed.

The participants with functional listening problems were the ones who most often used a familiar Aboriginal language during the meetings, often to clarify points already mentioned in English. Those with the best listening skills helped

by explaining or repeating what had been said, often in a mixture of an Aboriginal language, Kriol and English. Some committee members with functional listening problems left the meeting for long periods, came back late after breaks, or did not come back at all.

The staff involved in these meetings confirmed that these responses were typical for individual committee members. Staff from agencies also confirmed that some of the council and board members with functional listening problems had difficulty when providing feedback to their communities about the things discussed at meetings.

> *"People tell me that they ask her what was discussed and she tells them ' I don't know what all that was about."* (Aboriginal manager)

However, some participants with functional listening problems were described as 'active' in their efforts to keep in touch with issues 'outside' the meetings.

> *"She always comes and talks to me one-on-one before a meeting, canvassing what the issues are. She will have talked to other people too. Then after the meeting she will come and discuss anything that she is not clear about. Yeah, she is really active outside of meetings following up stuff, even though she seems to miss a lot during meetings, like today when she asked about something we had just finished talking about."* (Non-Aboriginal manager who chaired the meeting)

It was noticeable that, in one of the committees, the members acted as a team. Some had literacy and language skills that gave them a better understanding of ' non-Aboriginal' issues and they played a role in helping others to understand these. Some members with functional listening problems were important community leaders whose input into discussions or approval of decisions was crucial, and the committee members worked as a team to engage them in a meaningful way in the discussion.

Other writers confirm that Aboriginal committee members find it difficult to deal with external matters. Trudgeon (2000) recounted the comments of a community council chairman.

> *"We Yolgnu* (Aboriginal people from North East Arnhem Land) *sit in meetings all the time listening to English, but we don't understand it. Sometimes we can hear most of the words but the whole sentence doesn't make sense. We are too ashamed to say we don't understand what the Balanda* (non-Aboriginal people) *are talking about, so we sit there saying nothing and asking no questions. Sometimes we just say 'Yo, Yo'* (yes, yes) *to anything. I see many Yolngu acting this way, he continued. I used to act this way too before I asked for things to be explained or interpreted. Sometimes I don't need the whole lot interpreted, just the concept that is being talked about. As soon as I know what area is being talked about I can follow the rest of the conversation."* (Trudgeon 2000:68,69)

These types of difficulties with participation in meetings are generally seen as related to language and cultural issues. However, on the basis of what was said or observed during this study, it would seem that functional listening problems are also involved. The council members with functional listening difficulties had most difficulty with unfamiliar concepts presented in English, whether verbally or in writing. This is consistent with the findings of a study of the influence of conductive hearing loss on the participation of Aboriginal children in classrooms (Howard 2004a).

As in the workplace, the level of background noise in meetings also influences communication. One of the meeting rooms had a computer server with a fan that created a continuous audible background hum. On one occasion a committee member with functional listening problems referred to the noise made by the equipment, and said it was making it hard to follow the discussion. At morning tea the researcher asked the computer technician if the fan could be switched off for the rest of the meeting. This was done. Participants were asked at the end of the meeting if the quieter environment had helped them. Ten out of 12 participants said it had made a difference, with eight out of 12 saying that it made a big difference. All of these eight either had a listening problem or were sitting closest to the equipment creating the noise.

A recently appointed manager in this organisation, who had a functional listening problem, said that he had had two interviews for his position, one in a

smaller office and a second in the larger meeting room with the computer server. He said he had found it difficult to follow conversations and questions during the second meeting, because of the background noise level of the computer equipment. Also, the telephone in this meeting room was placed right next to the computer equipment and anyone using it had to contend with noise intrusion from that source.

So, a low level of background noise is an important component of good communication in the meeting rooms and workplaces of Aboriginal organisations.

These results suggest that functional listening problems do affect the governance processes of these management committees but can be managed in appropriate ways. For example, although the committee members found it harder to deal with 'non-Aboriginal matters', it is possible to manage the presentation of these issues to a committee in ways that make consideration of each issue easier for all concerned, and that facilitate discussion. People involved with the presentation of this type of information may want to take the following presentation protocols into account.

- Before the meeting, provide a plain language written outline of the issues that will be discussed. Include explanations of any technical or unfamiliar language.

- Discuss issues using diagrams or illustrations that help to explain what is said.

- Keep to the sequence of topics set out in the agenda, and note the transition from one topic to the next one.

- Use gestures, tonal variation and facial expressions during any presentation - it is hard to listen to a *'blank face going blah, blah, blah'.*

- Use amplification in group situations when presenting unfamiliar topics or when speaker is non Aboriginal.

* Encourage discussion of topics in language with which participants are most familar. This may involve using interpretors.

The first two suggestions help people to build the individual 'frameworks of knowledge' that are needed if they are to understand each subject and discuss the relevant issues. When the agenda is followed in order and the transition from one topic to the next is noted during the meeting, people know which topics are being addressed at any one time. They are then able to draw on the relevant framework of knowledge to help them understand points that might otherwise be unclear, and they are better able to contribute to any discussion in an appropriate way. Amplification helps ensure that what is said has the best chance of being heard.

Key Points

Functional listening difficulties were evident during meetings of governing boards and councils. While discussions about familiar, community issues were not affected, difficulties were apparent when unfamiliar 'external' topics were discussed. Some committee members with listening problems coped by putting more effort into preparation, others participated less in discussions. A number of strategies can assist meetings function more effectively. These include presentation protocols, using written agendas and selective amplification

ACTION SUMMARY

The following summarises key information and recommended actions for those working in Aboriginal health services, as well as those in other cross cultural organisations. The chapters referred to are where the full rationale and evidence for the recommended actions is described.

A bigger workload in cross cultural management

The indirect and non-verbal communications that are a feature of Aboriginal communication styles (see Chapter 4) have important implications for cross-cultural management. Managers must watch for and recognise the signals that indicate that someone is conveying a non-verbal message, and be able to evaluate and understand the nature of that message. This often involves talking to third parties. So cross cultural managers often need to be more proactive in actively seeking views and clarifying any indirect messages, often through third parties.

Cultural differences in communication styles mean Aboriginal staff often experience lots of unfamiliar and demoralising criticism, while non-Aboriginal staff often receive very little criticism, which can foster them having unrealistic confidence. Managers may need to support Aboriginal staff by providing compensatory positive feedback and limiting the level of destructive criticism directed toward them. Conversely, it may be important to find ways of ensuring non-Aboriginal staff receive constructive criticism from Aboriginal staff and clients.

Giving constructive feedback to Aboriginal staff

Aboriginal staff's sensitivities about direct verbal criticism means cross cultural managers have to be careful in giving constructive criticism. Ways that managers provided feedback to Aboriginal staff when this was needed (See Chapter 8) depended on the Aboriginal staff member and their relationship with the manager. Ways that managers described managing performance included the following.

- Approach performance issue as a joint problem that needs to be solved; "we are going to have trouble about this thing so we need to do something about it".
- Asking for the staff member's 'help'. "I am going to get into trouble if this keeps happening, do you think you can help me".
- Talking to staff about the areas where there are problems only after discussing the areas of their positive performance.
- Taking care that these conversations were not overheard or observed in ways that would shame the person.
- Talking to the whole staff group about a problem without naming any individuals.

Widespread functional listening problems among Aboriginal staff can be a contributing factor to performance problems. Where this is the case, one approach is to redesign communication processes to reduce listening demands in the job. For example, give written as well as verbal direction and consider the listening demands of work.

Managing staff Trauma

Exposure to trauma is so usual in Aboriginal health (see Chapter 1) that managers need to consider what the support needs of traumatised staff are.

- Support and debriefing should be offered, but group debriefing sessions should not be used as these are not appropriate in small close knit communities.
- Staffing arrangements need to be able to provide for regular and predictable periods of rest after exposure to trauma.
- People are more vulnerable if they experience a new traumatic incident before they have recovered from an earlier trauma. Work commitments should be managed to minimise the risk of successive traumatic experiences.
- People should be monitored after a traumatic incident and encouraged to seek help if the associated symptoms last more than a month.

Cross Cultural Communications Guidelines

Cultural and linguistic differences as well as listening problems can be obstacles to cross cultural communications. The endemic middle ear disease experienced by Aboriginal children results in a high proportion of Aboriginal adults having hearing loss and/or auditory processing problems which create functional listening problems (see Chapter 5).

Some indicators of functional listening problems are:

- Asking for things to be repeated;
- Misunderstanding what is said;
- Relying on non verbal cues;
- Being very quiet and shy;
- Having difficulty understanding when there is background noise;
- Needing to see the face of the person speaking and;
- Avoiding communicating with unfamiliar people, especially unfamiliar non-Aboriginal people.

Listening difficulties contribute to, as well as interact with, linguistic and cultural factors. For example, those with hearing loss often avoid cross cultural contact that is needed to develop a shared world view that facilitates mutual understanding. So listening problems can not only affect people's hearing what is said but also their understanding of what is heard.

Non-Aboriginal people's response to listening difficulties is important in communication outcomes. Judging people's capacity and motivation on the basis of their ability to understand verbally presented information often results in people being unwilling to ask for clarification when something is not understood. This means a non judgemental attitude is a key to effective communication.

The following outlines factors that influence listening for Aboriginal people with listening problems and what facilitates ease of listening and understanding.
Three key elements contribute to 'easy listening' for people with listening problems. These are 'the place', 'the person', and 'the message'.

THE PLACE

A good listening place is one with low levels of background noise. Background noise plays a critical role in affecting the understanding of people with listening problems. People without listening problems can cope with louder background noise and still communicate effectively. People with listening problems find it more difficult to cope with background noise and need a louder 'signal' or a quieter environment to follow conversations. Furthermore, if a message is conveyed in a language that is not the first language of the listener, then an even louder signal and/or quieter environment may be needed. This means that an adequate signal-to-noise ratio (how much louder than the background noise is the signal that is being listened to) for a person who does not have listening problems, and for whom English is a first language, will be quite different to that needed by someone who has listening problems and who does not speak Standard English as their first language.

However, it is non-Aboriginal staff members who do not have listening problems are often the ones who make judgements about the adequacy of listening environments. Anyone involved in any communication with Aboriginal people should be aware that most will need a better signal-to-noise ratio than the average non-Aboriginal person. A good listening context has low levels of background noise from computers, telephones or conversations among other people.

The physical environment also contributes to the level of background noise. A bare room with a hard floor and hard wall surfaces produces loud sounds with a slight echo - interfering with easy listening. Conversely, soft surfaces on floors, walls and ceilings absorb sound, reducing the level of background noise and suppressing echoes.

'Outside' or open-sided buildings are often a favourite gathering place for meetings with Aboriginal people. This is often thought to be because meetings were traditionally held in such places, without the formality of Western meeting styles. However it may also be because 'outside' buildings there are no hard surfaces for noise to bounce off, and it is easier for people to move to or find a space where there is less background noise.

THE PERSON

Hearing, listening, and communication will be most successful when people know each other well, and there is a match between language and cultural backgrounds. Aboriginal people with listening problems find it easier to listen to someone who speaks the same first language and whom they know. The language they are most familiar with will be easiest to hear and understand. Listening to someone they know means they will be familiar with the speaker's style of verbal and non-verbal communication and the likely topics of conversation, because they know the speaker's interests and concerns. A known speaker will also be aware of the listener's communication needs, and will know when to increase the degree of information conveyed non-verbally, adjust the pace and volume of their speech, repeat information, or move closer when speaking, in response to the needs of the listener.

In addition, a shared cultural background means that there are mutual understandings between the speaker and listener that facilitate good communication. A 'shared' background means that there are common understandings of the meanings of the words that are used, the way they are used, and the values and priorities that they represent. A shared personal history of communication, in addition to shared language and culture, produces even better communication outcomes. Family or well established friends, with whom there is a shared life-long history of communication, experiences, and interests are usually the easiest of all to hear and understand. Aboriginal people with significant cross-cultural communication difficulties related to listening problems often rely on family members to help them communicate with others.

An unknown person from the same cultural background will be easier to communicate with than an unknown person from a different cultural background. On the other hand, the ease of communication with a known person from a different cultural background will depend on the degree of familiarity with the person and that person's skill in Aboriginal styles of verbal and non-verbal communication as well as their understanding of culturally based ways of thinking.

THE MESSAGE

Aboriginal people with listening problems will find it easier to understand a message if they are familiar with the words and concepts used by the speaker and the message is conveyed in a variety of ways, and not through words alone. Ease of listening is also shaped by the extent that the subject matter fits within a known framework of knowledge. It is easier to listen to someone talking about a known community situation or issue than it is to listen to someone talking about an unfamiliar topic or unfamiliar processes. When the subject and issues are familiar ones, people with listening problems are able to fill in the gaps created by words they have not heard properly.

However, western concepts often involve alien conceptualisations which make it difficult for people with listening problems to understand what they hear. Jargon or unfamiliar words make it even harder for people with listening problems to understand what they hear. In these circumstances, contextual or visual cues can make an important contribution to 'ease of listening' and understanding for Aboriginal people with listening problems. A spoken description of how to do a task is easier to understand when the action or activity is shown at the same time and oral presentations are easier to listen to when accompanied by visual images that help explain the words.

People with listening difficulties have to work harder listening and often tire more quickly than others when having to listen. This means that how the message is delivered is also important. People may listen effectively only for short periods and need more 'processing time' before comprehending or giving a response. They often prefer people who 'get to the point' quickly and clearly. These points are summarised in the following Table.

Easy Listening	Moderately hard listening	Hard listening
PLACE • Low background noise • Loud signal • Little reverberation	• Mixture of low & high background noise, loud & quiet signals and variable reverberation • Moderate levels of all three	• High background noise • Quiet signal • High reverberation
PERSON • Family member • Familiar person from the same culture	• Unfamiliar person from the same culture • Familiar person from another culture	• Unfamiliar person from another culture
MESSAGE • Familiar words that place what is said within a known conceptual framework • Strong contextual or visual clues that help explain what is said	• Some unfamiliar words about topics that may or may not be known • Some or no visual cues	• Unfamiliar words about new topics • No contextual or visual cues

Phone Communications

Phone communication between Aboriginal and non-Aboriginal people can be difficult because of language and cultural differences as well as the high prevalence of hearing loss and auditory processing problems, that results from endemic middle ear disease among Aboriginal people. The following are suggestions for organisations on how to improve phone communications.

- Make sure your telephone system has a good volume control so people can turn up the volume.
- Receptionists often deal with both face-to-face reception duties and incoming telephone calls. This may make it harder for them to manage incoming phone calls because of background noise from people waiting in the reception area.

If possible, telephone and face-to-face reception duties should be managed separately. If this is not possible, have a quiet room nearby with a telephone so calls can be transferred there when it is noisy in the reception area.

- It may be helpful to test the hearing of staff who are regularly involved in telephone reception work, especially if they have had difficulties in taking messages. However, if people do have problems using the phone because of hearing or auditory processing problems, it is important that this is not associated with poor motivation or a lack of ability.

Guidelines for people who make telephone calls to those with listening difficulties

- Say who you want to talk to, who you are, give your telephone number if you want a return call, and you may need to spell your name.
- Speak slowly, avoid jargon, repeat key points and do not try to pass on too much information at once.
- Don't say 'Have you got all of that?' Instead ask 'Should I say that again to make sure I have covered everything?'
- It may be helpful to place your message in a context that will be familiar to the person you speak to. For example, explain the services you provide or where you come from and why you are calling, or talk about your last visit.
- Follow up important or detailed messages with a fax or email.
- Make sure there is minimal background noise at your end, and be aware of background noise on the other end of the telephone line, as this will make it harder for people to follow what you say.

Suggestions for people who find telephone calls difficult

- Make sure you know who is calling.
- If people are giving you too much information or talking too fast, ask them to give you the key points or slow down.
- Confirm names, telephone numbers and key information by repeating these details back to the caller.
- Ask the caller to send a fax or email if you are not sure you have got all the points they have spoken about.
- Tell them if there is too much background noise on their end of the phone for you to be able to hear well.
- If there is too much noise at your end of the phone, ask people to be quiet or move to a telephone where it is quieter.
- If you often get messages wrong, you may need to get your hearing checked.
- Don't be ashamed to tell people if you find it difficult to hear other people on the phone. Functional listening problems don't mean people are dumb or lazy. They are usually the result of middle ear disease during childhood.

Making meetings easier

These are suggestions as to how to make meetings easier for Aboriginal people who, for a variety of reasons, may find communication hard, especially with non-Aboriginal people.

- Prepare a written agenda for meetings, circulate this before the meeting, keep to the agenda and ask the chairman to tell the meeting when an item is finished and the next one is 'on the table'.
- Make information on the agenda items available before and after the meeting for people who wish to seek this or who would like a briefing about the issues or to clarify points of discussion after the meeting.
- Hold one-on-one meetings where these are beneficial for and preferred by people with functional listening problems.
- Use amplification selectively in meetings. For example when discussing unfamiliar topics or being addressed by non-Aboriginal people.
- Try to ensure that the language listened to in meetings is the one with which Aboriginal participants are most familiar. This may mean using interpreters.

Changes

Changes in the workplace can be challenging for people who find some communications difficult; especially for those with functional listening problems who rely on routines to reduce listening demands.

- Consult staff in depth about planned organisational changes and changes to their jobs.
- Plan management reorganisation and job changes in ways that take into account the needs of those with functional listening problems, to minimise the associated stress and any resistance to the planned changes.

Recruitment

There are a number of recruitment strategies that can help to overcome obstacles to recruiting Aboriginal staff. These include the following.

- A plain language written job description.
- Informal 'two-way' interview and orientation processes where applicants can ask about the work and bring along 'supporters' if they wish to do so, before the formal interview.
- Ensure standard questions are given to applicants before an interview. This is especially helpful for people with functional listening problems and can ease anxiety as applicants have time to prepare their answers.
- Avoid telephone interviews where possible. When this is not possible, make sure that there is minimal background noise, a good line, and preferably an amplified telephone. Remember that Aboriginal people with listening problems may be disadvantaged if they cannot see others' faces when being interviewed.