of communication, such as the intentional absence of eye contact or expected discussion of a patient’s condition with family members, is particularly revealing, as it became evident that not only verbal communication but also body language is culturally specific and, as such, open to misinterpretation.

Further to this, I engaged in meetings with the hospital’s translator services, consultants, nursing staff and patients. Through them I was made aware of the educational tools used to strengthen communication between staff and patients. These included posters, books, leaflets, radio broadcasts and community meetings, all established in an attempt to integrate the healthcare paradigms of the Aborigines with the Western approach to medicine.

Throughout the study it became apparent that the Aborigine people had already suffered from psychological damage from decades of displacement and were finding it difficult to cope in a climate of change and cultural upheaval. For example, the relatively new abundance of alcohol has led to its frequent misuse by this group. This has become such a problem that, on 17 September 2007, the Federal Government of Australia imposed a drinking ban in certain Aborigine districts. Many in, and out, of the region feel that these measures are too quick, easy and generalising, and miss the root of the problem.

There is a specific need within the mental healthcare system to understand the normal behaviour and health patterns for a population, so that professionals can intervene more appropriately. For example, to diagnose a patient as suffering from delusions, a physician is required to have an adequate understanding of what is a normal belief for that patient’s culture and society. It is difficult to feel confident in such diagnoses if, at very basic levels, there is inherent miscommunication and misunderstanding.

The challenges in communication between Western medical and Aborigine patients in Australia’s Northern Territory affect the mental well-being of this population and in many cases have led to patients absconding from the hospital system. They have resulted in much neglect of health, both physical and mental. There is an inherent miscommunication between the health system and the Aborigine community, and the subsequent frustrations suffered, malnutrition, depression, child abuse, alcoholism and substance misuse are rife in this region.

Although, in Britain, we are fortunate not to have such a dramatically displaced sub-population, I am reminded through this work of the continual need to assess cultural differences when recommending healthcare pathways to patients. There is, I believe, evidence that good mental health begins with a feeling of being understood.

Marcus Cumberbatch
University College London Alumni, Chesterfield Royal Hospital

Correction
Heart disease is not the only major killer of patients in the United States. According to a recent American Heart Association report, the leading cause of death is heart disease. According to the report, heart disease is responsible for more deaths than all other causes combined, including cancer and stroke.

Lauren Hill
Year 5 medical student, Brighton and Sussex Medical School