A multilingual sexual and reproductive health animation: a novel educational tool for newcomer patients
Une animation multilingue sur la santé sexuelle et reproductive : un nouvel outil éducatif pour les nouveaux arrivants

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Implication Statement
Newcomer populations face many barriers accessing healthcare, including language barriers. Language-concordant care has been shown to enhance equity and optimize health outcomes for underserved populations. This paper describes a sexual and reproductive health (SRH) animation for newcomer populations. The animation was created collaboratively by the Department of Obstetrics and Gynaecology Global Health Unit, the Halifax Newcomer Health Clinic, and student volunteers. Integrating this animation into other healthcare settings may help improve inclusion, trust, and patient-centred care for newcomer patients. Institutions may also consider creating further SRH animations based on the needs of the patients they serve.

Introduction
Newcomer populations have unmet contraceptive needs and lower uptake of screening tests (e.g., Pap smear) than provincial or territorial guidelines recommend.1,2 Evidence suggests that language-congruent healthcare can improve patient safety while simultaneously enhancing access and responsiveness to healthcare information.3 Healthcare institutions are increasingly focused on the importance of culturally competent healthcare to improve the equity of services for newcomer populations.4

During the height of the COVID-19 pandemic, when in-person healthcare appointments were not always available, our team created the first SRH animation in Nova Scotia for refugee patients titled, “Your Gynecology Clinic Visit-Multilingual Videos.” Animation was chosen as the preferred medium, as voiceovers in various languages could be created to ensure the accessibility of this tool to a wide demographic of newcomer patients.
Innovation

During project initiation, the Newcomer Well Woman Clinic (NWWC), a local refugee clinic specializing in Intrauterine Device (IUD) insertions and cervical cancer screening, agreed to pilot our animation in their centre. Therefore, the animation focused on these two preventative health services, and the content was approved by physicians who work at the NWWC. As this animation covers contraception and pap testing, the target audience was women of reproductive age to 70.

An experienced animator who was knowledgeable about SRH was recruited to the team to develop a four-minute animation. The animation timing was selected secondary to the budget provided by the Women Deliver Grant. To ensure adequate representation, the characters used in this animation represent the patient population that the NWWC serves. Volunteer translators, many of whom were medical students, were recruited to translate the animation into various languages.

Outcomes

We published the animation on an unlisted YouTube channel on June 8th, 2021, and is accessible by QR code (https://finlaymagui.re/wellwoman_clinic/). It is also available on the IWK Health Centre’s website (https://www.iwk.nshealth.ca/your-gynecology-clinic-visit), the largest facility in Atlantic Canada for women and children. The animation has been downloaded onto tablets, funded by the Department of Obstetrics and Gynaecology, and provided to the NWWC. It has currently been translated into five different languages (English, French, Arabic, Farsi/Dari, and Somali), representing local population and needs. Based on YouTube analytics, the animation has garnered 442 views (as of April 7th, 2023). Using a monitoring and evaluation framework provided by Women Deliver, Table 1 shows the number of languages the animation has been currently translated into, the number of views per language, future language translations confirmed, and the number of presentations about the SRH animation.

Suggestions for next steps

We intend to formally evaluate the effectiveness of this educational initiative by conducting focus groups with newcomer patients at the NWWC. We will also evaluate whether a change in the uptake of preventative health services has occurred since the launch of the animation.

We plan to collaborate with other interested parties to continuously adapt this animation to meet the needs of other priority populations (e.g., high school students, Indigenous and LGBTQ+ patients) to effectively educate patient populations who are at-risk for poor health outcomes in this area.

Conflicts of Interest: KW has received speaker honoraria from Merck. The remaining authors have no conflicts of interest to disclose.

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