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Culturally Competent Healthcare Services: Overcoming Language Barriers in Utica, New York

This purpose of this research project is to investigate culturally competent healthcare practices in regards to language barriers faced by immigrants and physicians in Utica, New York using concepts and models employed within cultural ethnography and medical sociology. Striving for culturally competent healthcare includes overcoming language differences to help establish a patient/physician relationship. The biopsychosocial model of medical sociology stresses the importance of establishing effective communication for a better patient/physician relationship within the patient-centered approach to medical care. Utica, New York has a growing population of immigrants from numerous countries, most of whom speak no or very little English. The biopsychosocial model recognizes that a patient must be addressed as a whole person and that effective communication needs to be established, including overcoming any language barriers. This research identifies the National Standards for Culturally and Linguistically Appropriate Services in Healthcare (CLAS) and analyzes the extent to which the area's healthcare groups have adopted those standards. The research employs open-ended survey/interview questions to gain insight on the concerns that the area physicians, immigrants and interpreters have with the adopted culturally competent healthcare practices, especially those related to the patient/physician relationship of non-English speaking patients. This project is designed to identify common areas of concerns in culturally competent healthcare practices and to help area physicians, healthcare administrators and the larger community understand the problems Utica New York faces to prevent any possible breakdowns in culturally competent healthcare in the near future.

Keywords: Culturally Competent Healthcare, CLAS, Patient/Physician Relationship, Biopsychosocial Model