




2017

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## Recommended Citation

Flavin-Lee, Pamela, "Language Concordance: Overcoming Language Barriers" (2017). *Physician Assistant Scholarly Project Posters*. 39. <https://commons.und.edu/pas-grad-posters/39>

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# Language Concordance: Overcoming Language Barriers

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## Abstract

❖ Language discordance is a growing problem facing health care today. Communication barriers can be cultural or language based and are commonly cited as a major contributor to poor patient compliance and health outcomes.

❖ This research project seeks to identify promising developments aimed at overcoming language discordance through analysis of different translation implementation methods and correlating these with health outcomes.

**Keywords:** Language discordance, language barriers, translation, health disparities, quality of care, physician-patient communication, language concordance, immigration, refugee health, medical literacy, limited English proficiency (LEP), mental health, health care barriers, communication, minorities.

## Introduction

Patient compliance is one of the biggest obstacles to positive healthcare outcomes. This is especially true in populations where there is an identified language barrier. An inability to follow through with discharge instructions in regards to medications, home care and follow up results in increased health care costs overall as well as increased risk to health and wellbeing.

As foreign born people comprising the US population increases every year, language barriers have become more common. A number of strategies have been implemented with varying degrees of success.

The primary purpose of this research project is to determine if availability of interpretation services to patients in their native language equates with improved health outcomes as measured by patient compliance, improved clinical outcomes and overall improved health status. A secondary goal of this research is to identify interpretation methods associated with improved outcomes.

## Statement of the Problem

❖ Lack of understanding of a patient's health condition and treatment can lead to lack of medical compliance on the part of the patient. A patient may not understand how to take a medication prescribed or the need for follow up tests or medical visits. This may lead to a breakdown in continuity of care.

❖ A healthcare provider may have difficulty interviewing a patient during the physical exam. A great deal of information is exchanged during this part of the health care process and an inability to develop an appropriate assessment and plan may be encountered. This is especially true with mental health concerns.

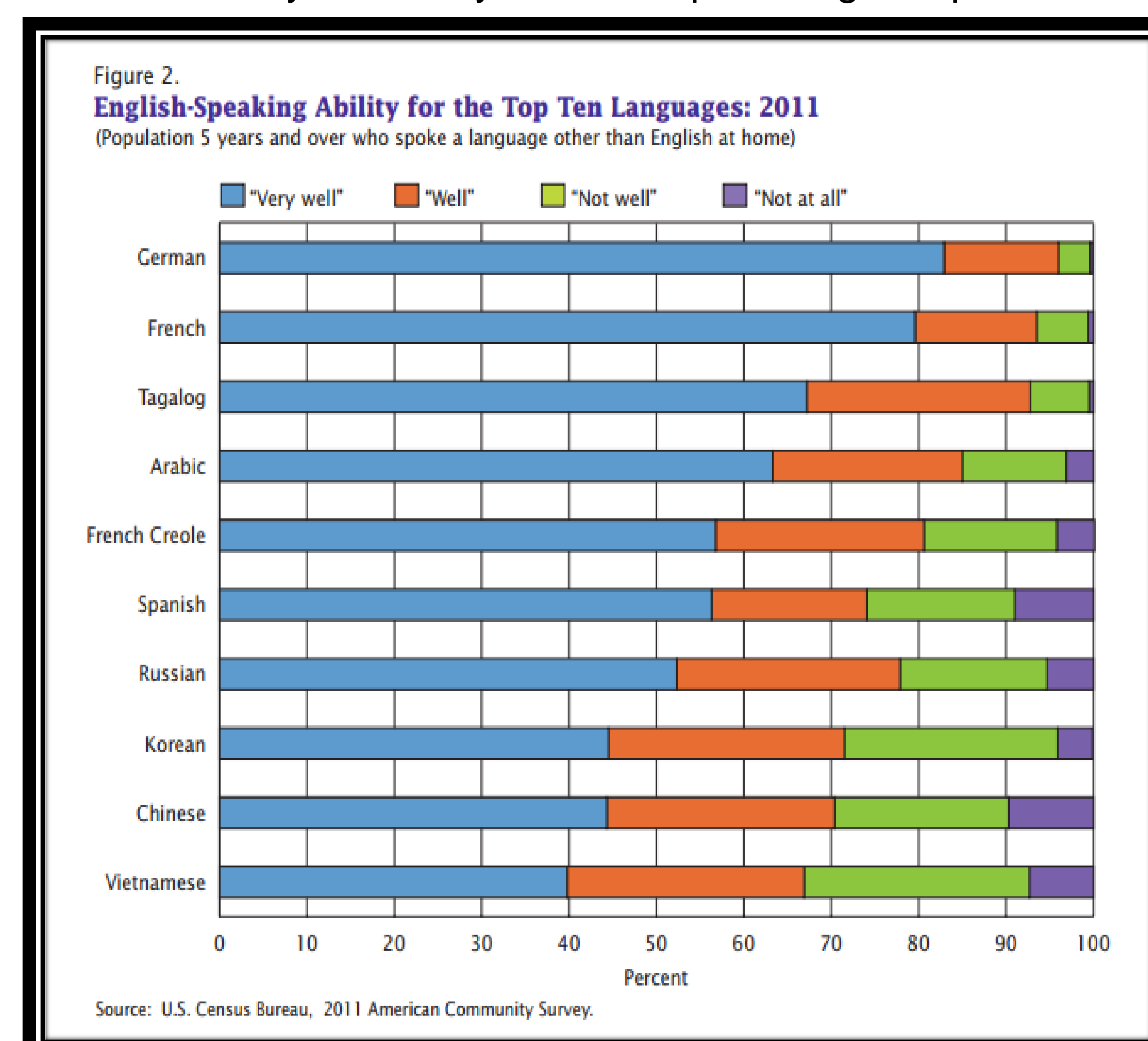
## Research Questions

- Does the availability of interpretation services to non-English speaking patients in their native language lead to measurable improved patient outcomes?
- What measures can be assessed to determine positive outcomes?
- What is the best method for providing interpretation services for foreign speaking patients in US healthcare facilities?

This project analyzed current research to evaluate methods to overcome language discordance and to determine the most effective methods used in terms of patient satisfaction, positive health outcomes and overall cost-effectiveness.

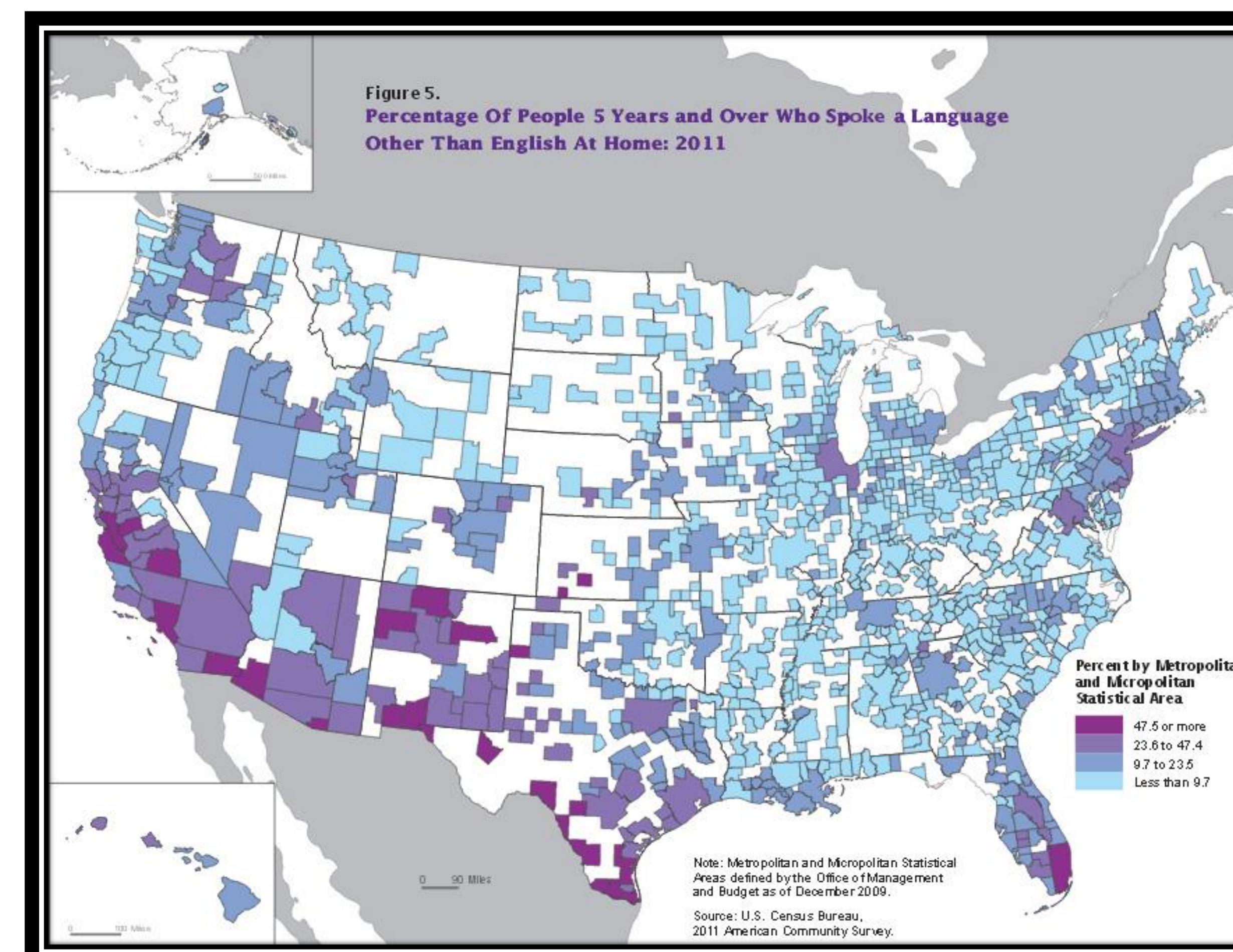
## Literature Review

- ❖ Numerous studies show a direct link between language discordance and reduction in quality of health outcomes.
- ❖ Strategies at addressing language discordance include services via telephone and video, employment of interpreters in the more common languages of foreign speaking patients in that region, community volunteers and family members of patients who provide interpretation.
- ❖ Mental health care in particular is well served by availability of interpretation services as a great deal of the diagnosis and treatment of those health conditions involves a thorough verbal interview and follow up with the patient.
- ❖ Both health care providers and patients report high satisfaction with professional interpretation services.
- ❖ Patients report higher satisfaction with family members providing interpretation with physicians being less satisfied by the family members providing interpretation.



## Discussion

- ❖ The availability of verbal and written language interpretation services offered to patients during and following a health care encounter leads to measurable improvements in patient outcomes in terms of medical compliance, increased patient satisfaction as well as decreased health costs overall.
- ❖ Interpreter availability improves healthcare provider ability to diagnose and treat patients, especially those with mental health issues.
- ❖ The landscape of interpretation services is changing slowly yet steadily. It is evolving from an ethical consideration to a health regulatory one.



### Four primary interpretation models were identified

1. Trained professional interpreters
2. Community volunteers
3. Family members
4. Telephone/Video interpretation services

The method associated with the highest degree of visit satisfaction overall by patient and provider as well as accuracy of interpretation was by use of **trained professional interpreters, however due to variation in languages spoken, video interpretation services are emerging as a promising alternative.**



## Applicability to Clinical Practice

- ❖ Given the increasing number of immigrants in the US, it is imperative that policies and protocols are developed to address issues of language discordance.
- ❖ An increasing number of states have adopted legislation linking Medicare and Medicaid reimbursement to availability of interpretation services.
- ❖ Every state has at least two laws in regards to availability of interpretation services. There are also many of federal laws that address language access in health care settings.
- ❖ Virtually all health care providers must comply with Title VI of the Civil Rights Act of 1964 which was designed to ensure that federal money does not support activities that discriminate on the basis of race, color, or national origin. This Act states, "All providers who receive federal funds from HHS for the provision of Medicaid/CHIP services are obligated to make language services available to those with Limited English Proficiency (LEP) under Title VI of the Civil Rights Act and Section 504 of the Rehab Act of 1973.

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## Acknowledgements

I would like to thank my wise, sweet husband; Jon for his unwavering love, support and making coffee every morning and salads every night and mia mamma; Maria for giving me a childhood where I felt that the entire world was my home. Thanks to my children, natural and acquired; Khiarra, Zachary, Olia, Nathaniel and Megan for encouragement and believing in me. My grandchildren; Aly, Maddy, Ella, Sasha and Max for the happiness you inject into my life. Each one of you gives my life meaning, joy, vibrancy and color.

Thanks also to my friends Joan and Ruth. Thank you for making me feel like Wonder Woman when in fact, it is you who are my heroes.