

# Language barriers adversely impact health-care quality

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For the millions of Americans whose native tongue isn't English, language remains a critical road block to quality healthcare, according to a University of California, Irvine study.

Researchers in the Center for Health Policy Research in the UC Irvine School of Medicine have found that language barriers between patients and healthcare providers result in longer hospital stays, more medical errors and lower patient satisfaction.

In a nationwide study of more than 2,700 patients who have limited English-language proficiency, Dr. Quyen Ngo-Metzger and colleagues found that these language barriers were associated with less health education, poorer doctor-patient interactions and lower patient satisfaction.

Their study appears in a special "Language Barriers in Health Care" issue of the *Journal of General Internal Medicine* published this month.

Specifically, the researchers found that patients who did not speak the same language as their doctors were less likely to receive lifestyle counseling in diet, exercise and smoking cessation. In turn, having access to a clinic interpreter allowed health education to take place and partially overcome the language barrier.

However, in patients' ratings of their doctors and the quality of interpersonal care, having an interpreter did not serve as a substitute for

shared language. Patients who were able to speak directly with their doctors were the most satisfied with their care.

“While interpreters are a necessary solution to the problem of language barriers in healthcare, our findings suggest they are likely to be an imperfect one,” said Ngo-Metzger, an assistant professor of medicine at UC Irvine. “It remains important that our healthcare system recruit and train more bilingual providers to meet the needs of an increasingly diverse population.”

According to the 2000 census, approximately 47 million people in the U.S. speak a language other than English at home.

Source: University of California - Irvine

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