

Study matters relating to minority-language health services

I, Ilene Hyman, PhD, am a researcher and adjunct professor in the Dalla Lana School of Public Health at the University of Toronto. Most of my research focusses on health issues faced by equity-deserving populations, such as newcomers, who may lack fluency in one of Canada's official languages. I have written several reports, together with clinicians, researchers and other experts in the field, on the need to invest in language access to health services, examining the adverse health impacts of failing to provide language interpreting, making the 'business case' for investing in professional interpreting services, and most recently, promoting medical interpreting as an essential human right for all [<https://lnkd.in/dQt28Egq>].

Equitable access to high-quality health care is one of the fundamental principles of our Canadian health care system. However, many Canadians who are not proficient in at least one of Canada's two official languages, English and French, face substantial health inequities due to language barriers. In 2017, according to Statistics Canada, 19.6% of Canadian permanent residents who arrived as immigrants spoke neither English nor French and this proportion rose to 49% among refugees. The reports I've written provide ample evidence that patients with language barriers are less likely to receive effective, evidence-based treatment, and more likely to receive untimely care. Non-English speakers in Canada are reported to be less satisfied with their medical treatment than their English proficient counterparts. This indicates that language support plays an important role in the patient experience. Provider satisfaction is overall higher when access to professional language services is available. Language barriers are shown to decrease the efficiency of the health care system and increase health care costs. Professional language support is associated with increased savings due to factors such as reduced emergency department use and more efficient use of staff time.

In summary, my research findings highlight the substantial social and economic benefits resulting from effective use of professional interpreting support. When quantified, these benefits outweigh the costs of implementing such services. More importantly, there is a consensus in the literature that the provision of language access services within health care should not be viewed as a separate 'add-on' program. Rather, it must be understood as an essential component of a strategy to meet broader health systems goals.

The following multi-level recommendations are made:

Governmental Level

The goal of a government health system to be accessible, inclusive and provide high-quality healthcare to all its citizens requires the provision of medical interpreting. At the government level, we recommend that governments do the following:

- Develop national standards for professional interpreters.
- Develop comprehensive strategies and concomitant funding models for professional interpreting services to support all healthcare organizations, from health promotion to tertiary care, ideally at a national level, or provincial level through Ministries of Health.

- Include the mandatory utilization of professional interpreters in Provincial and National Health Care Provider regulatory bodies' policy and procedure Standards of Practice guidelines.

Organizational Level

A goal of healthcare organizations is to provide a safe, welcoming and culturally responsive environment. At the organizational level, we recommend that organizations do the following:

- Ensure that their providers are aware of interpreting services and facilitate their access to such services.
- Establish mandatory training on cultural competence and the importance of interpreting services within the curriculum of all healthcare provider educational programs.
- Provide written health information in different languages, and different modes (i.e., not exclusively digital).
- Integrate access to interpreting services in EMR systems with regular reminders as to use.
- Develop and implement policies and standards of practice related to language access plans.

Provider Level

As providers ourselves, we recognize the many demands on individual providers and clinics. To support and encourage providers in the uptake and use of medical interpreting, we recommend that providers do the following:

- Receive appropriate compensation for the extra time and effort used in the use of interpretation services.
- Receive comprehensive training and education regarding the benefits of interpreting services and how to work with medical interpreters and ensure healthcare provider educational institutions and regulatory agencies have national standards to train people on the proper use of interpretation.
- Receive ongoing seminars and online courses on cultural competency and effective communication with diverse patient populations and peer-to-peer education.
- Provide opportunities for refugee patients to assist in the development and evaluation of interpreting programs.
- Empower refugee patients to advocate for their right to interpreting services.
- Continue to be informed by initiatives such as local healthcare provider champions for refugee health that encourage local colleagues to use these services.
- Continue to be guided by research addressing how providers make their decisions regarding the use of interpreting services and in what situations such services and, what type of interpreter is used and whether this varies by specialty, while also considering the proportion of patients who do not have access to desired interpreting services, and how often AI, e.g., Google Translate or family and friends are used and why.