

Improving Outreach and Care to Non-English-Speaking Communities

Learning about a neuromuscular disease diagnosis is hard on patients and their families, and it can be difficult to understand all the implications. But imagine how much harder it is with a language barrier.

Meeta Cardon, MD, a pediatric neurologist and assistant professor of neurology at the University of New Mexico, sees many non-English-speaking patients in her practice. To provide them with optimal care, she says it's important to plan for outreach and care-related services.

Improving communication

The most important part of this plan is communicating with patients in their own language.

"We have an interpreter service through our hospitals, and many hospitals and clinics I've worked with use the same type of service," she says. In addition, Dr. Cardon speaks Spanish, the most common language among non-English-speakers in the United States. Having a physician or staff member who speaks the patient's language improves communication and helps build a connection between the staff and the patient.

"There can be a huge look of relief on a patient's face if they are struggling to keep up in English to know they can switch to their native language," Dr. Cardon says. "It's as if the flood gates open and families speak freely when they might hold back if speaking in English."

Relying on an English-speaking family member to act as a patient's interpreter or representative is a common mistake. "We've seen over and over how this often doesn't work," Dr. Cardon says. "The English-speaker may be well-intentioned, but they may not understand the medical issues being explained or may even purposely hold back information from the patient to protect them from a scary prognosis."

Dr. Cardon cautions that working through a language barrier can require some time and patience from providers. "You need to be ready to spend that extra time to ensure that you can double-check their understanding during appointments," she says.

Practicing with empathy

If your hospital or clinic has handouts available in a patient's language, these can be a good supplement to your communications with patients. But keep in mind they work best when backed up with more tangible support services.

"Imagine a child is being given a new fatal diagnosis," Dr. Cardon says. "We really need to think of how information is conveyed to families when they're scared. If you have someone available who has been in their shoes that they can talk to or has helped people who have been in their situation, it's worth so much more than a handout. But you need to have these people in place before the clinic appointment."

Dr. Cardon also recommends having a staff member check in with non-English-speaking patients to make sure they understood what was shared at their past appointments. "My nurse coordinator is attuned to uncertainty, checking in to see if they have more questions and going over what happened at the last appointment," Dr. Cardon says.

Dr. Cardon's recommendations boil down to practicing with empathy. "If we in the medical community can imagine ourselves in the position of being medically vulnerable in a foreign country, then it becomes easy to understand how difficult our non-English-speaking patients may view this aspect of healthcare. And it becomes easy to practice with compassion," she says.