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— REPORT SUMMARY AND FACT SHEET —

***What a Difference an Interpreter Can Make:
Health Care Experiences of Uninsured with Limited English Proficiency***

A Survey by The Access Project of Brandeis University
Of Over 4,000 Uninsured Patients Around the United States

1. Important for Avoiding Costly Medical Mistakes

Medical interpreters can help avoid costly or unnecessary health care problems. This benefits patients and their families as well as physicians and health care providers, and may keep treatment costs down.

- ❖ Over one quarter of patients surveyed who did not have an interpreter and needed medications did not understand the instructions for taking their medications. This compares with only 2% of those who had an interpreter or did not need an interpreter.

After going to an Alexandria hospital with a severe stomach ache, a Hispanic man in Virginia was prescribed three medicines. After taking all three medicines at once, he experienced a severe reaction and went to the emergency room. An interpreter was found who explained in Spanish that he was not supposed to take all three at once. (From information provided by Tenants & Workers Support Committee in Alexandria, VA)

- ❖ For providers, language barriers can increase the risk of complications if a provider does not know about other treatments or medical history. Language barriers can limit providers' understanding of patients' symptoms, and hinder their ability to help patients understand and follow treatment advice.

A relative, trying to interpret for a patient who could not speak English, misinterpreted. Based on misunderstanding the patient, the doctor scheduled the patient for surgery. On the morning of the procedure, a trained interpreter conveyed information that showed the surgery was not only unnecessary but also likely to be harmful to the patient. [From information provided by the National Health Law Program]

"I would tell the doctor 'okay,' but I didn't understand anything." [Quote from a person interviewed for The Access Project survey]

- ❖ For health care institutions, interpreters decrease costly, repeat visits to the emergency room by ensuring that patients will make use of outpatient clinics.

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2. Crucial for Providing Financial Information

Medical interpretation can benefit patients by improving communication about financial information and assistance. Health care providers also benefit by learning about patient eligibility for applicable programs.

- Survey respondents who had an interpreter were significantly more likely to be asked if they needed help paying for medical care; two-thirds of those with an interpreter were asked, but only half of those who needed but did not get an interpreter reported that staff asked if they needed help paying for medical care.
- Over 75% of patients who needed but did not have an interpreter reported that staff did not ask if they needed help paying for prescription drugs, compared to 50% of all patients.

3. Making a Business Case for Interpreter Services

Patients who receive interpretation are more satisfied and are more inclined to use the hospital again if they become insured.

- Three out of four respondents needing and getting an interpreter said that the facility they used was “open and accepting,” compared to fewer than half of the respondents who needed and did not get an interpreter and 57% who did not need an interpreter.
- 90% of patients who needed and got interpreters said they would return to their present facility if they became insured.
- One out of every three respondents who needed but did not get an interpreter said they would NOT use the facility if they became insured.

A Virginia woman went to a hospital at 7PM. No interpreter was available. At 11PM, her blood was drawn. By 3AM, when no one had spoken to her to explain her condition or the delay, she left. She paid for emergency services at a private doctor. (From information provided by Tenants & Workers Support Committee in Alexandria, VA)

4. Some Facts About the United States

The United States is experiencing an increase in the numbers of people who have Limited English Proficiency.

- Over 30 million Americans (11%) are immigrants.
- The Hispanic/Latino population more than doubled in 22 states between 1990 and 2000, in both urban and nonurban areas. These states are in all regions of the country and include Virginia, Georgia, Nebraska, Nevada, Utah and Washington. (Complete list on The Access Project website: www.accessproject.org)
- The proportion of the population speaking English less than “very well” increased by 39% between 1990 and 2000.

[Source: U.S. Census]

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Does the “Interpreter Issue” really matter? A 2001 survey revealed widespread disparities in the quality of health care among racial and ethnic groups.

- Over 44 million Americans speak a language other than English at home. [U.S. Census]
- One-third of all Hispanics – 43 % of Hispanics whose primary language is Spanish – and 27% of Asian Americans reported difficulty in communicating with physicians.
- One-third of Hispanics and Asian Americans find it difficult to understand instructions on prescription bottles.
- Hispanic and Asian American adults are less likely than the overall population to receive a physical exam, cancer screening, and other preventive services.

[Source: The Commonwealth Fund, *Diverse Communities, Common Concerns: Assessing Health Care Quality for Minority Americans*, March 2002]

5. About the Study

National Survey of the Uninsured Community Access Monitoring Survey (CAMS)

In 2000, The Access Project collaborated with 24 community-based organizations to survey the uninsured on their experiences and perceptions of the care they received from local health care institutions. Called the Community Access Monitoring Survey (CAMS), the survey gathered data from over 10,000 uninsured individuals who received care at 58 different health care facilities in 18 different states. The survey asked people about their experiences on a wide range of issues, including the facility’s openness to the uninsured, respondents’ difficulties paying for care, and the availability of interpreters and other materials for respondents with limited English proficiency.

In 2001, The Access Project released reports presenting the findings for each of the 24 sites. On April 25, 2002, it will release its first issue brief on the national findings, *What a Difference an Interpreter Can Make: Health Care Experiences of Uninsured with Limited English Proficiency*. This report describes the impact of having interpreters for those with limited English proficiency on respondents’ overall experiences at the urban hospitals included in the study. Another issue brief describing the financial consequences of lack of insurance for those receiving care at local, primarily safety net, institutions will be released in the summer of 2002

6. For more information

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