Bridging Language Barriers in Health Care:
Public Opinion Survey of California Immigrants from Latin America, Asia and the Middle East

July 29, 2003

Introduction

An Unhealthy Divide

A patient's ability to communicate effectively with doctors and other health care professionals is vital. Patients unable to properly communicate their symptoms or understand instructions for prescribed medications, or children forced to act as makeshift interpreters for parents who may be facing life-threatening situations are realities for many. The repercussions of a communication failure in medical care and the impact on medical ethics are profound. It can lead to needless surgeries, missed symptoms, and prescription overdoses and these occurrences undoubtedly create a sub par system of medical care for those with a limited understanding of English.

California is at the forefront of changing demographics and its increasing diversity creates language stumbling blocks between doctors and patients. California's doctors are mostly English speaking and White, while their patients increasingly are neither. According to the 2000 U.S. Census, 25 percent of the state's population was comprised of immigrants. Between 1990 and 2000 the share of those who do not speak English in their homes in California increased from 31.5 percent to 39.4 percent. The 2000 U.S. Census also revealed that slightly more than half of those who said they spoke a language other than English at home also said they spoke English less than very well. These language barriers impact the state's medical care system and efforts are continuously being made to address this rising and critical issue.

Under federal law, the forty-year old Civil Rights Act of 1964 prohibits discrimination based on national origin, including ability to speak English fluently. Hospitals and clinics that receive federal funds are required to provide trained interpreters and other language access services. Recently proposed legislation in California would clarify and strengthen requirements that would guarantee that the needs of its growing immigrant population are met. The proposed legislation would ensure that patients are equipped with adequate language assistance services such as access to interpreters, as well as to other culturally proficient health care services. A case in point occurred when the *Los Angeles Times* reported this month that a legislative bill "was making its way through the state Legislature" that would ban the use of child interpreters younger than 15 by any state or local agency or program that receives state funding. While the issue of language access is clearly before the state's lawmakers, the immigrant communities in California still need to be aware of their rights to quality health care under the law, otherwise, like the Civil Rights Act, new legislative acts will be ineffectual.

The California Endowment, whose mission is to expand access to affordable, quality health care to underserved individuals and communities in California, recently funded New California Media (NCM) to undertake a multi-stage effort to address the issue of language barriers in health care. As an association of over 600 ethnic media organizations including newspapers, radio and television stations, publishing and transmitting in dozens of languages, NCM can utilize the power of ethnic media to raise the visibility of language access issues in health care and to serve as a major information source for California's 17 million ethnic residents. Ethnic media thrives in California unlike anywhere else because millions of immigrants reside there without any single ethnic group comprising a majority. The multi-stage effort will promote and raise awareness within the immigrant communities of the right to appropriate language access as a key component of medical care. This undertaking represents an unprecedented investment in ethnic media as a key vehicle for educating immigrant consumers on vital health care issues and for promoting improved language access services in the state as a whole.

An important element of this project is "Before and After" surveys to benchmark awareness levels among immigrant communities on the topic of language access in health care settings. The following report focuses on the "Before" survey, which was conducted among California immigrants in 11 foreign languages and dialects in June of this year. The survey measures current awareness levels of their rights to an interpreter and quantifies current attitudes and concerns of this growing population toward health care. This benchmark study represents the first step in New California Media's education and awareness program.

Methodology

The results, findings, and analysis in this report are based on a statewide public opinion survey of 1200 mostly foreign-born residents of California. All respondents were interviewed from May 30th to June 25th, 2003, in one of the following 11 languages and dialects: 100 respondents were interviewed in Cambodian, 100 immigrants were interviewed in Vietnamese, 100 Iranian immigrants were interviewed in Farsi, 100 respondents were interviewed in Armenian, 100 Chinese respondents were interviewed in either Mandarin or Cantonese, 100 respondents were interviewed in Korean, 100 Filipinos were interviewed in Tagalog, 100 immigrants were interviewed in Hmong. Another 100 respondents were interviewed in Russian; and 300 Hispanics were interviewed in Spanish.

The margin of error for the full sample of 1,200 respondents is approximately three percentage points.

Major Findings

1. **Medical care is rated as the number one issue by California immigrants. Their level of satisfaction with the quality of health care in the state is substantially lower than that of the general population. Koreans and other immigrants report having had problems getting medical care when they needed it.**

A large percentage of Vietnamese, Chinese, and Hispanic respondents rated medical care as the most important issue facing their community.

- Significant percentages of Filipino, Iranian, Korean, Armenian, and Russian respondents also considered medical care as the most important issue. The immigrant groups that rated medical care lowest were the Cambodians (5%) and Hmong (13%).

In addition, in a recent national survey of Hispanic voters, conducted in both English and Spanish for The New Democrat Network, education and the economy were ranked as the most important issues. Health care was cited by only ten percent of Hispanics as their top concern.

The poll also indicates that overwhelming majorities of all immigrant groups rank medical care as a "very important" issue within their communities.

- Medical care scored highest among Vietnamese, Hispanic, Iranian, Chinese, Russian and Filipino immigrants.

The intensity and importance of health care can be traced in part to significant pockets of dissatisfaction concerning the overall quality of available medial care to those in the immigrant community.

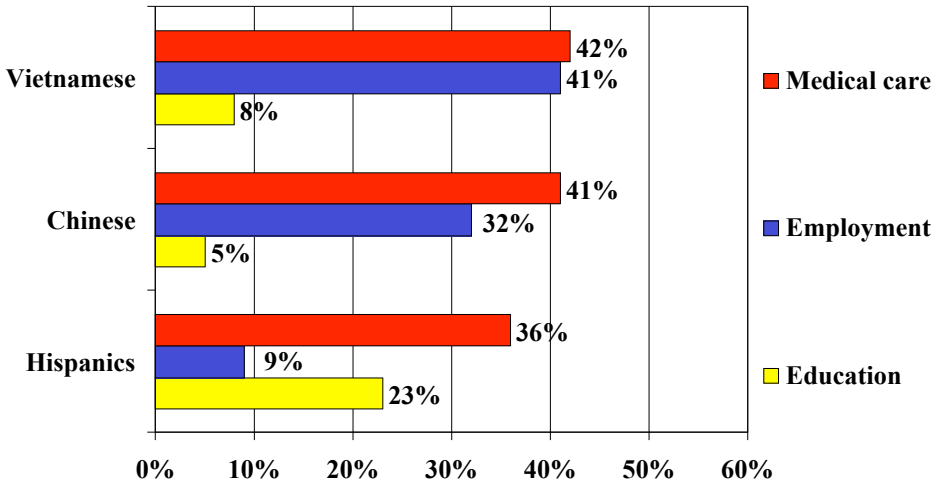
- Thirty percent of Hispanic respondents rated the quality of their medical care as either "poor" or "very poor." About one in four Russians and Iranians also rated their care as either poor or very poor, as did one in five Korean, Chinese, Hmong, and Vietnamese immigrants.

- Those least satisfied with the quality of their medical care do not speak English well, or have no insurance, or have been in this country for less than five years.

There is also evidence in the poll that significant percentages of Koreans, Russians, Vietnamese and Hmong have had problems getting medical care when they needed it.

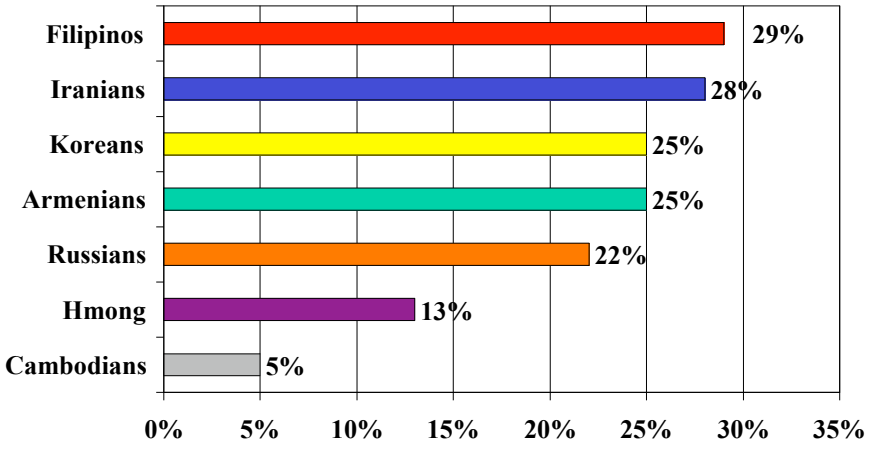
- Immigrants without any type of insurance have the greatest difficulty getting medical care.

In your opinion what is the most important issue in California today?

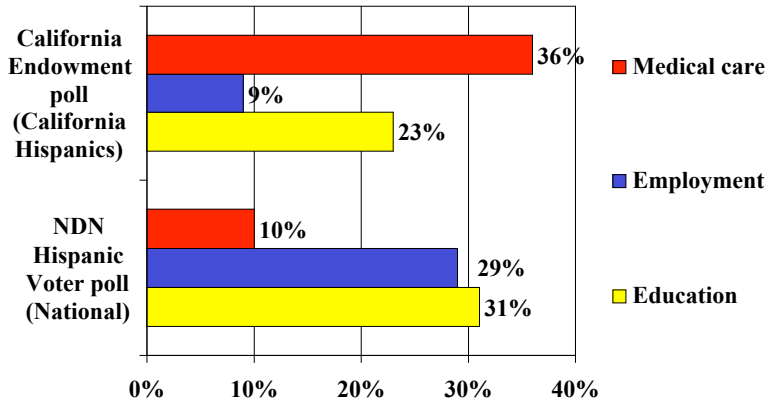


In your opinion what is the most important issue in California today?

Medical Care answers

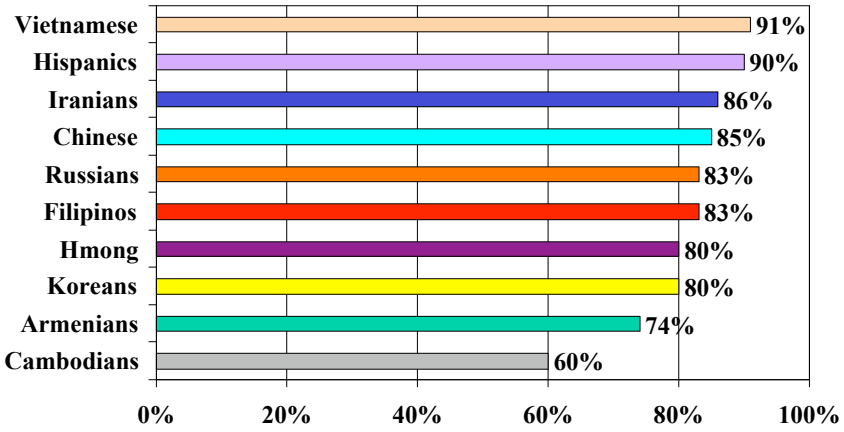


In your opinion what is the most important issue facing Hispanics today?



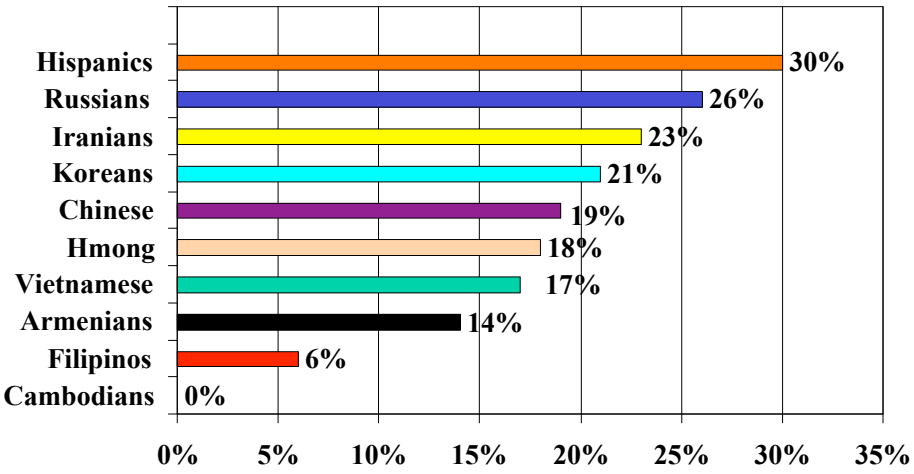
How important is the issue of medical care?

Very Important answers



How would you rate the overall quality of the medical care that you and your family receive in California?

Poor / Very Poor answers



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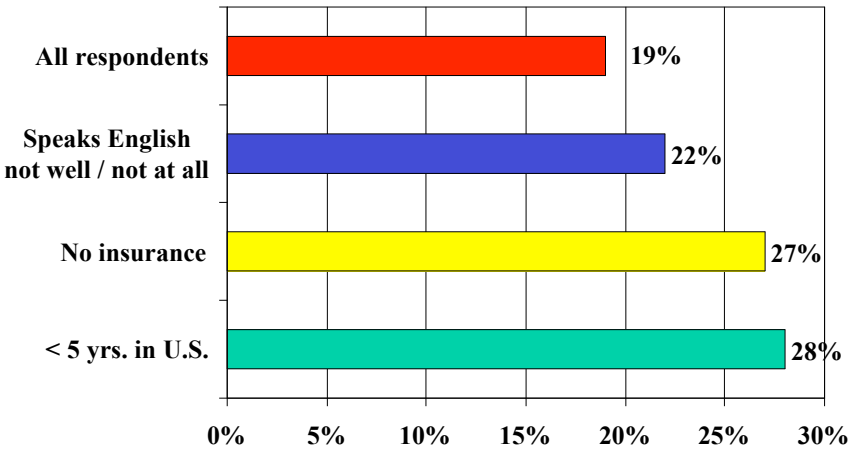
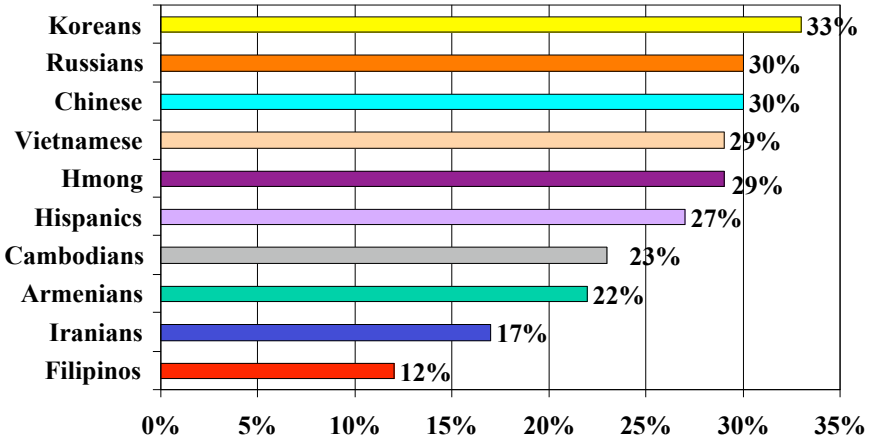


Have you ever had a problem getting medical care when you needed it?

Yes answers



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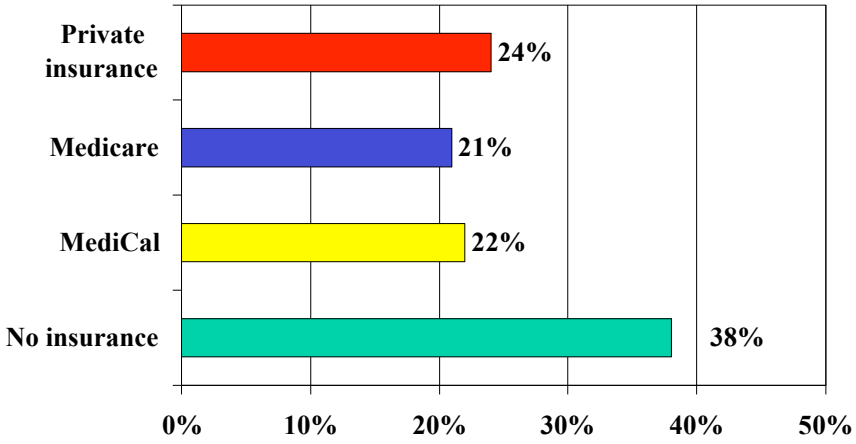


2. **While many immigrants have regular physicians or clinics where their native language is spoken, large numbers, especially Cambodians and Hmong, have encountered problems and difficulties understanding medical situations based on their inability to effectively communicate with health care professionals. The chance of misunderstanding instructions either from a physician or upon being discharged from the hospital doubles among immigrants who do not speak English well.**

High percentages of immigrants have a regular doctor's office, clinic, or health center that they visit for medical concerns.

The cost of medical care and good health are the top reasons that immigrants cite for not having a regular physician or clinic.

Large percentages of Vietnamese and Hispanics have a regular doctor's office or clinic where their native language is spoken.

However about half of all Hmong, Korean, Chinese, Filipino, Russian, Armenian, Cambodian, and Iranian immigrants regularly visit a doctor's office or clinic where their native language is *not* spoken.

For those immigrants who do not have a doctor's office or clinic that speak their native language, most "do the best that they can in English," or they bring a family member or friend along with them to translate.

Presently, a low percentage of immigrants have access to a professional interpreter to help alleviate their communication problems.

The best evidence of the importance of language in good medical care is highlighted by roughly a third of all respondents who report having encountered problems in the past "understanding a medical situation because it was not explained in their language."

Not surprisingly patients who are less proficient in English are more likely to misunderstand their medical situations. Half of all immigrants who do not speak English well report not understanding certain medical instructions; only 20 percent of respondents who have a better command of the English language experienced the same type of problem.

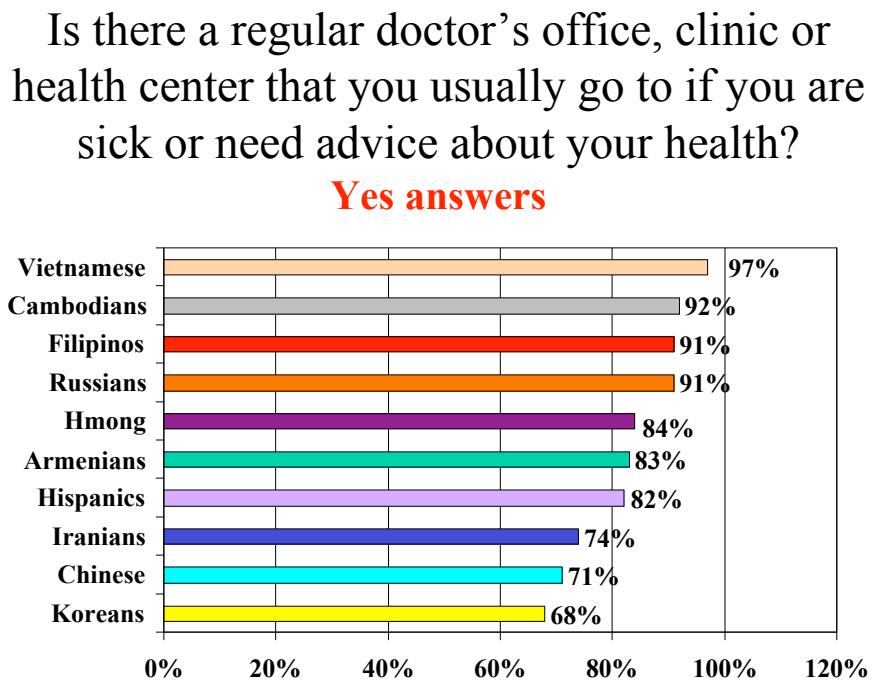
- Almost three out of four Cambodians have encountered such difficulties, as have well over half of all Hmong immigrants and significant percentages of Vietnamese, Korean, Chinese, Hispanic, Iranian, and Russian respondents.

- The chance of encountering difficulties understanding their medical situation more than doubles among immigrants who do not speak English well.

There is also evidence in the survey that a large majority of Cambodians and almost half of all Hmong respondents have had problems understanding instructions when being discharged from the hospital.

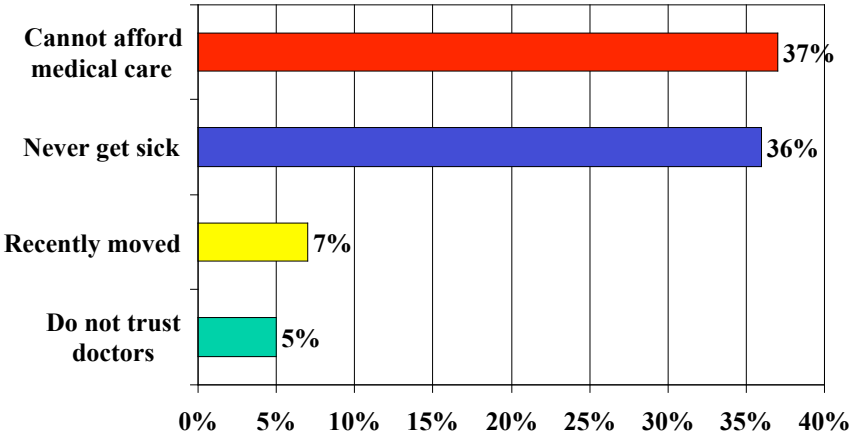
- The poll also reveals that patients who do not speak English well are twice as likely to get confused about medical instructions upon getting discharged from a hospital.

The study indicates that only a small number of immigrants report they have been treated unfairly at a doctor's office or clinic based on their inability to speak English. The rare exceptions to these findings are 39 percent of Hmong and 28 percent of Iranians who believe that they have been treated unfairly.

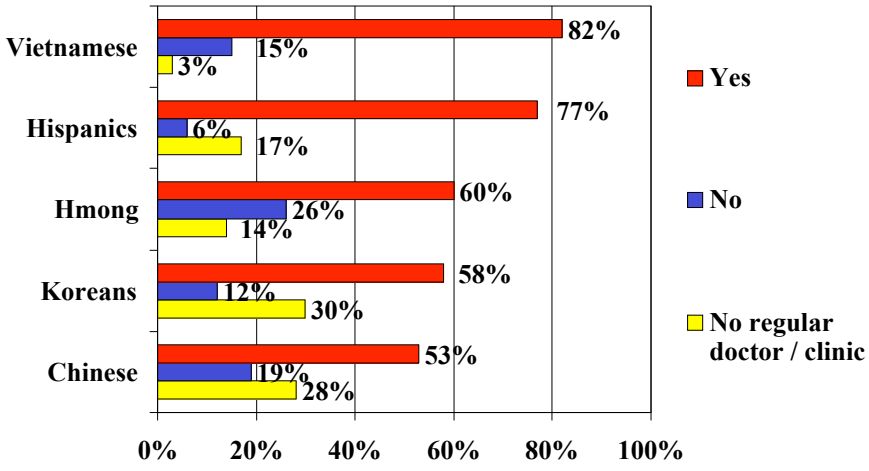


What is the main reason you do not have a regular doctor or clinic?

All Poll respondents



Does your doctor or anyone at your doctor's office / clinic speak ____?



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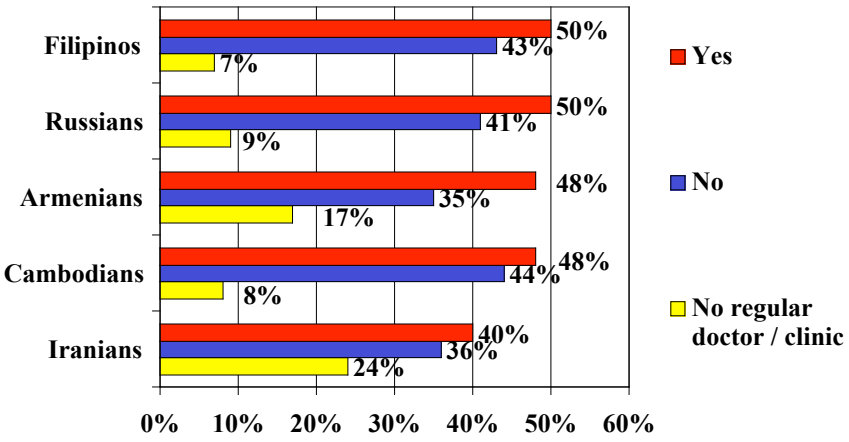
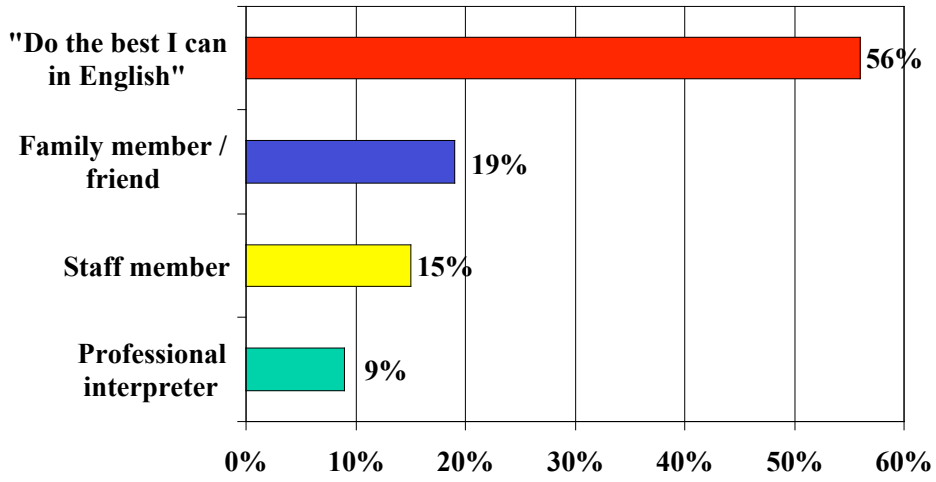


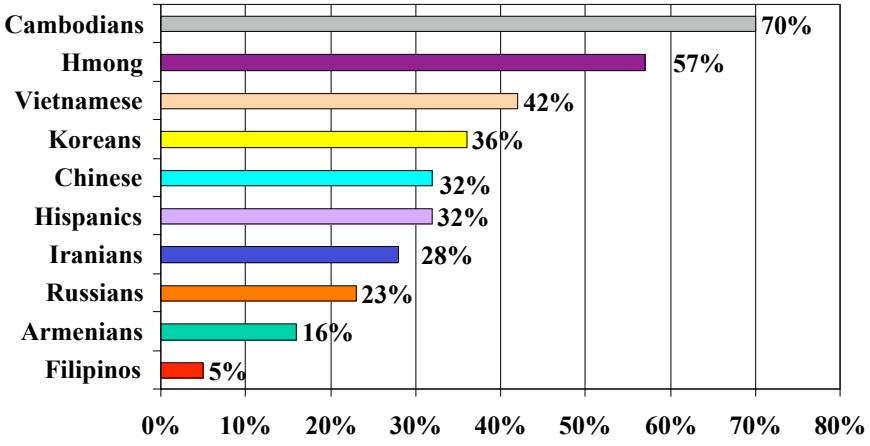
Who helps you communicate with your doctor?

All poll respondents that do not speak same language as doctor



Have you ever had a problem understanding a medical situation because it was not explained in your language?

Yes answers



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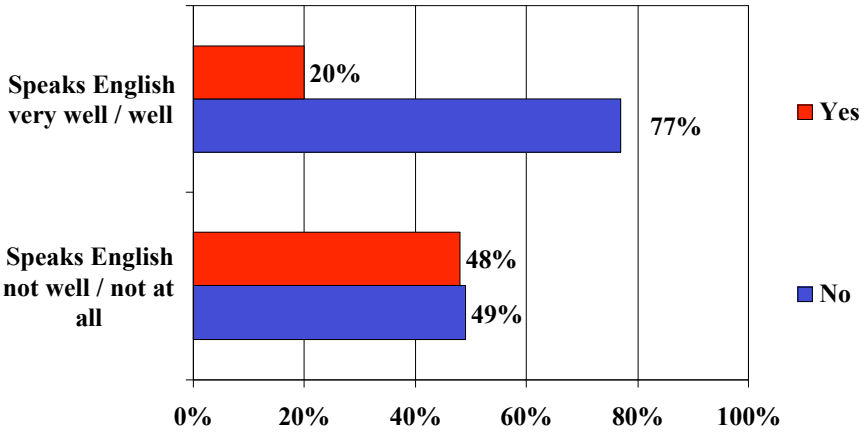
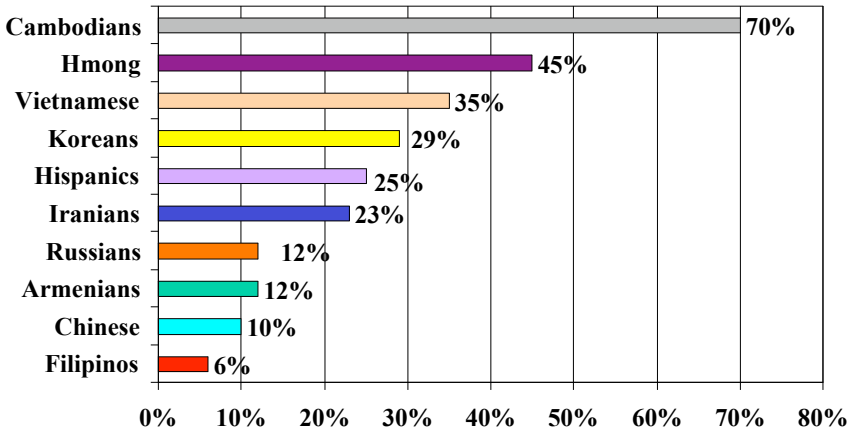
All Poll respondents



Have you ever had a problem understanding the instructions when you were discharged from a hospital because they were not given in your language?

Yes answers



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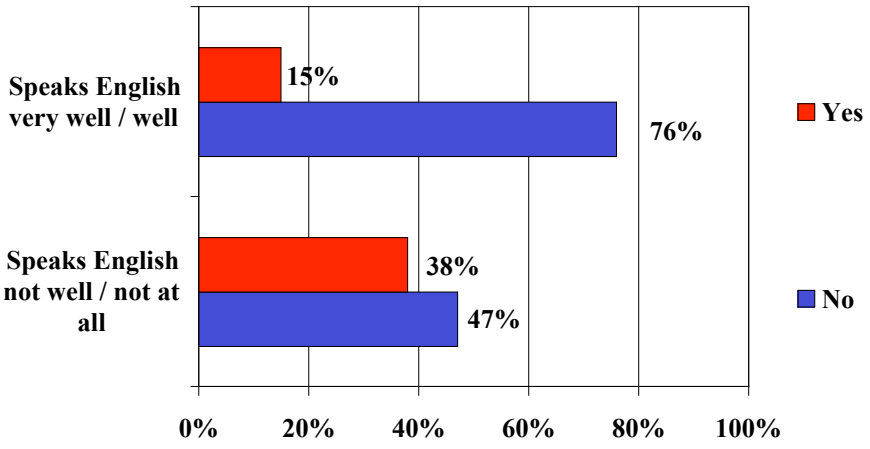
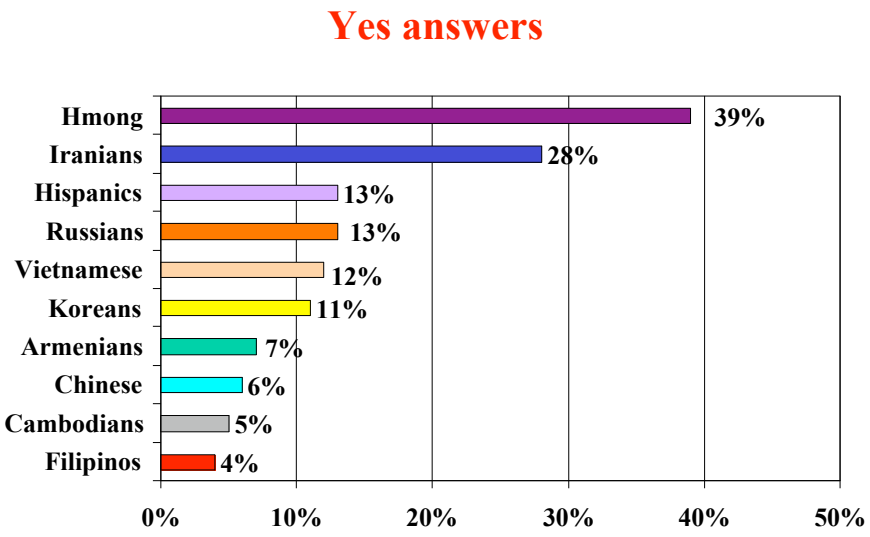




3. **<u>A strong majority of California immigrants are unaware of the United States law that gives them the right to an interpreter when they visit a clinic or a hospital. This is especially true for Hmong, Chinese and Vietnamese immigrants.</u>**

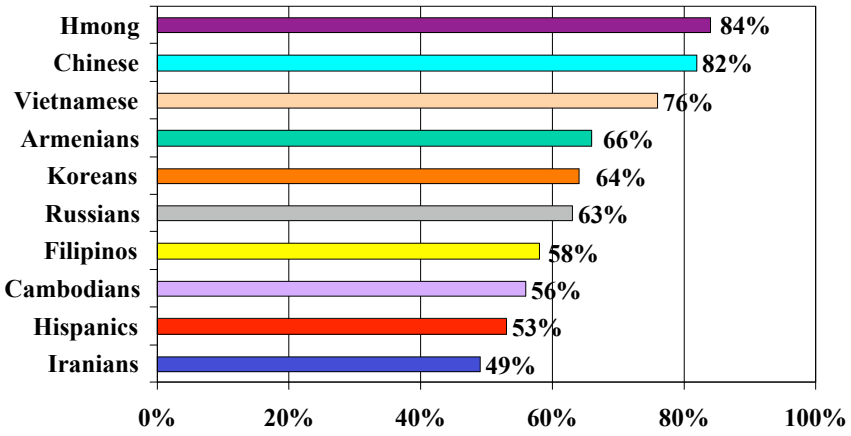
Overwhelming majorities of Hmong, Chinese and Vietnamese respondents were *unaware* of their rights to an interpreter under the law. Knowledge about the law is highest among Iranian, Cambodian, and Hispanic immigrants.

Despite these gaps in knowledge of the law, support for the universal right to interpreters is wide spread among all groups. Interestingly, support is highest among Hmong, the group with the least amount of knowledge concerning their rights under the law.

Over 85 percent of all respondents support the right of all to an interpreter. Belief in this right is uniformly strong among all sub-groups, regardless of an individual's income, education or, perhaps most significantly, current ability to understand and speak English.

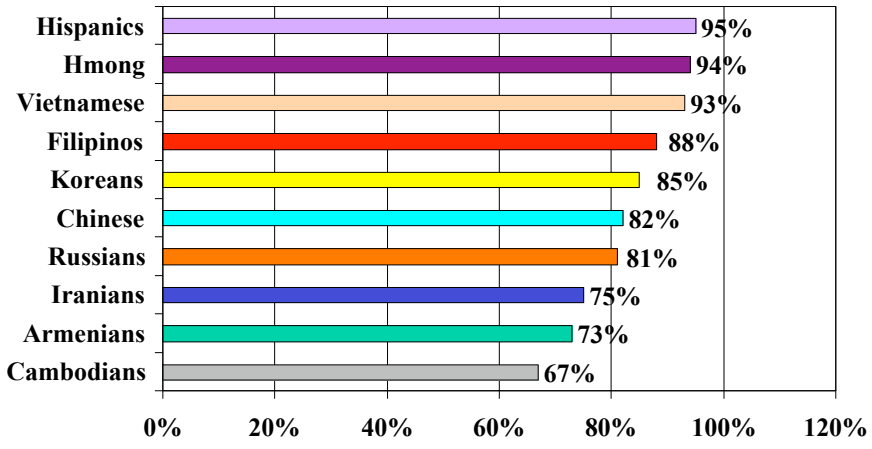
Did you know the law in the United States gives you the right to an interpreter when you visit a clinic or hospital?

No / Don't Know answers



"Every person in the United States has the right to ask for an interpreter – free of charge – when he or she visits a clinic or hospital"

Agree answers



4. **Substantial percentages of California immigrants, especially Iranians, Hmong, Cambodians and Hispanics, are often confused about how to use prescription medicines. Many immigrants also have trouble understanding the label on their prescription medicines. More than a quarter of these immigrants with a poor understanding of English have gotten sick as a result of this barrier.**

A third of all immigrants report confusion over how to use their prescription medications.

- The immigrant groups most likely to get confused are Iranians, Hmong and Hispanics with roughly half of their respondents encountering difficulties.

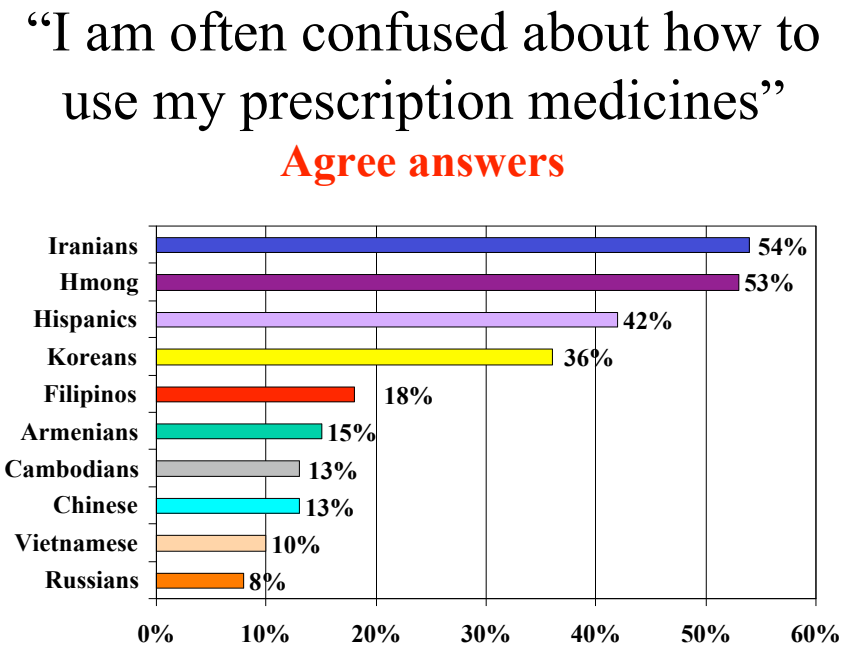
Immigrants also face problems understanding the label on their prescription medicines.

- A majority of Hmong, Cambodians and Iranians report problems reading their prescription medicines.

Over a quarter of all immigrants, with a poor understanding of English, have gotten sick as a result of not understanding the instructions on prescription drug labels.

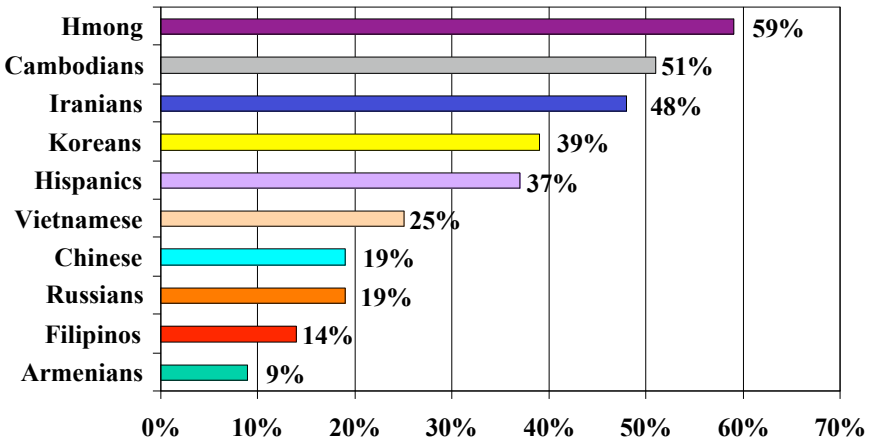
- The groups that most often report experiencing a negative reaction to the drugs as a result of their inability to read their prescription labels were Cambodians, Hmong, and Hispanics.

- Patients who do not speak English well or at all are twice as likely to get sick or have a bad reaction from their prescription medicine because of the language barrier.



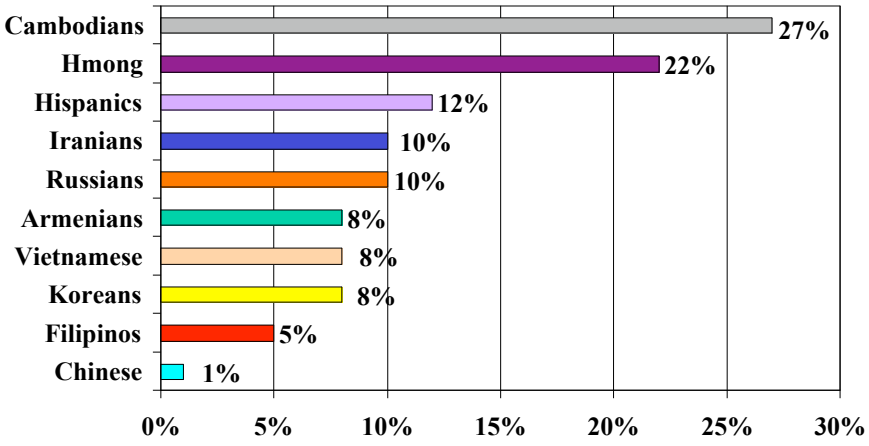
Do you ever have trouble understanding the labels on prescription medicines?

Yes answers



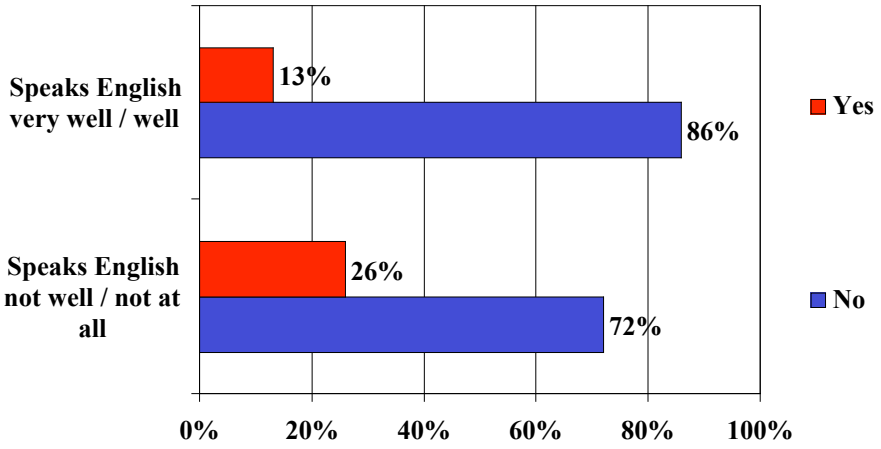
Have you ever gotten sick or had a bad reaction to a prescription medicine because you did not understand the instructions?

Yes answers



Have you ever gotten sick or had a bad reaction to a prescription medicine because you did not understand the instructions?

All Poll respondents



5. **<u>A majority of Hispanic and Korean immigrants do not understand the proper use of antibiotics. Immigrants that have limited English skills are considerably more likely to be confused about antibiotics.</u>**

Although it has long been established that antibiotics are ineffective against the viruses that cause the runny nose, cough and other symptoms of the common cold, belief in the effectiveness of antibiotics as a treatment for a cold is wide spread among certain immigrant groups in our survey.

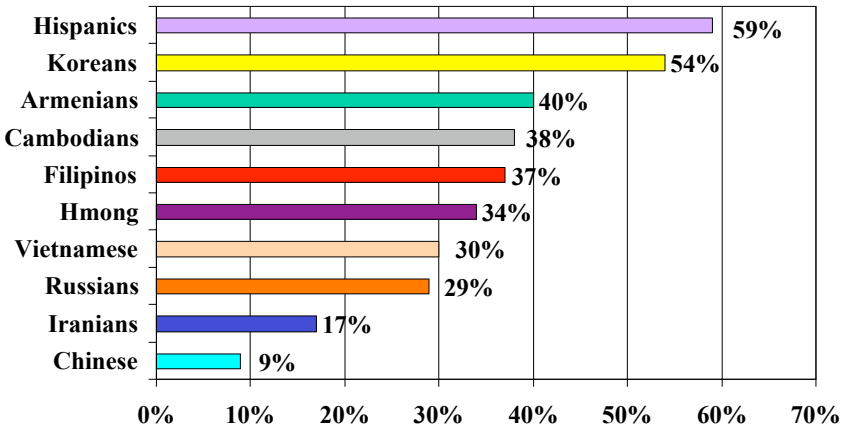
- The two groups that tended to be more confused about the proper role of antibiotics were Hispanics and Koreans with well over half of their respondents in our survey agreeing with the statement "Antibiotics are needed to treat the flu or a cold."

- Among Hispanic respondents, those who were born in Mexico are more likely to be confused over the proper role of antibiotics in treating illness than are those who were born in either South or Central American countries.

The poll indicated that nearly two-thirds of immigrants with a limited ability to speak English are confused about the proper role of antibiotics as proper treatment for colds and flues.

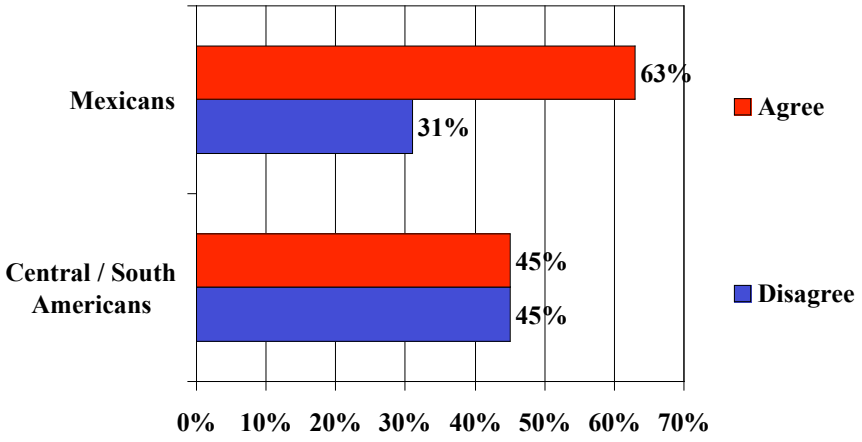
"Antibiotics are needed to treat the flu or a cold"

Agree answers



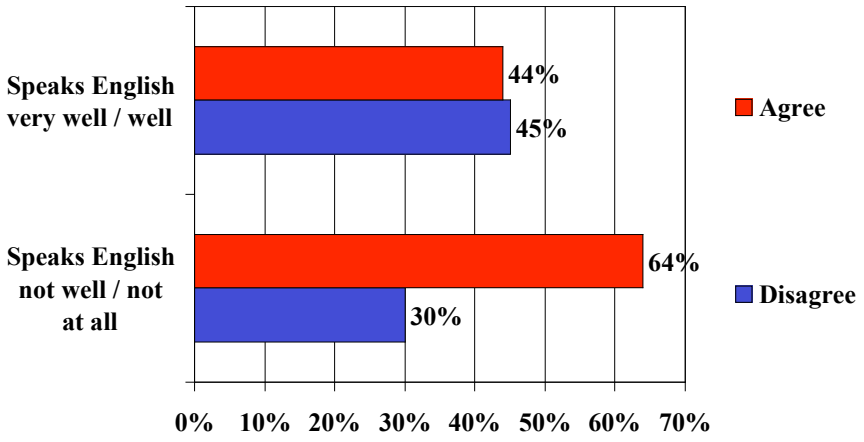
"Antibiotics are needed to treat the flu or a cold"

Hispanic immigrants



"Antibiotics are needed to treat the flu or a cold"

All Poll respondents



6. **<u>A majority of California immigrants do not speak English well. Hispanics are at the top of the list with three quarters of them reporting very limited English skills. Nevertheless, most immigrants have taken classes to improve their ability to speak it.</u>**

Three quarters of Hispanics in the survey reported that they either speak English "not well" or "not at all." More than half of Cambodians, Koreans, Chinese, and Hmong also report difficulties speaking English

Most immigrants are more likely to experience difficulty speaking English than reading it. However, the percentages of immigrants who have difficulty reading English are relatively high.

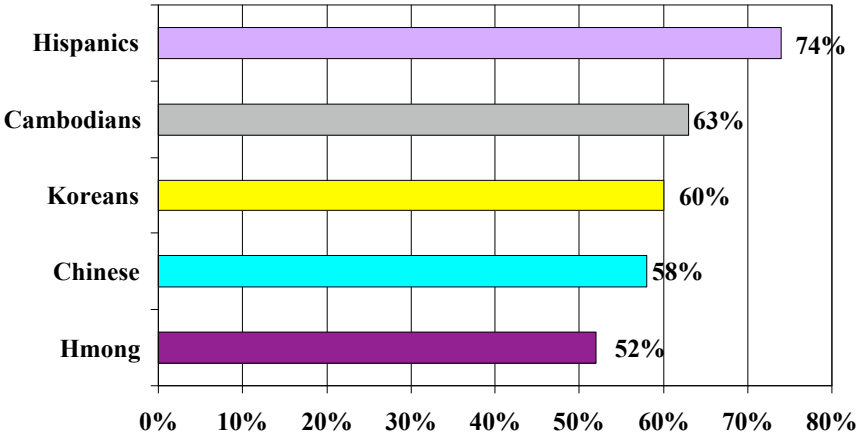
Large majorities in all groups have taken classes in an effort to improve their fluency in English.

- Iranian, Vietnamese, Cambodian, Russian, and Korean immigrants are the groups most likely to enroll in English classes to help improve their fluency.

For those few who have not taken classes, it is not because of a lack of desire to learn English. The greatest obstacles appear to be related to the inconvenience of class times and locations.

How well do you speak English?

Not Well / Not at All answers



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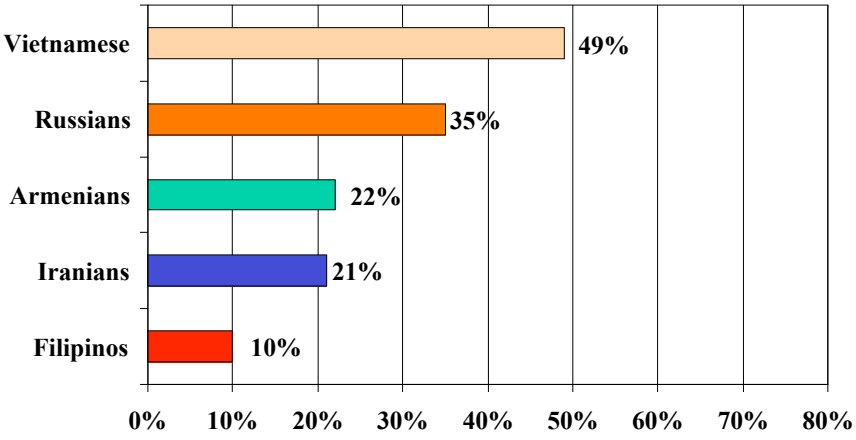
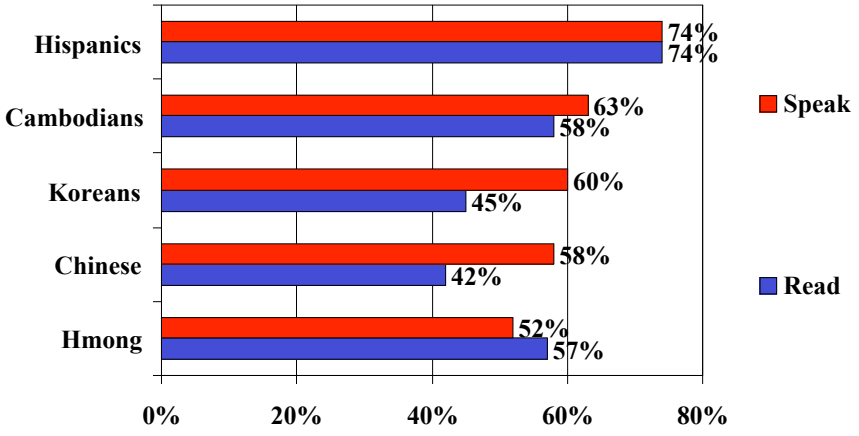
Not Well / Not at All answers



How well do you speak / read English?

Not Well / Not at All answers



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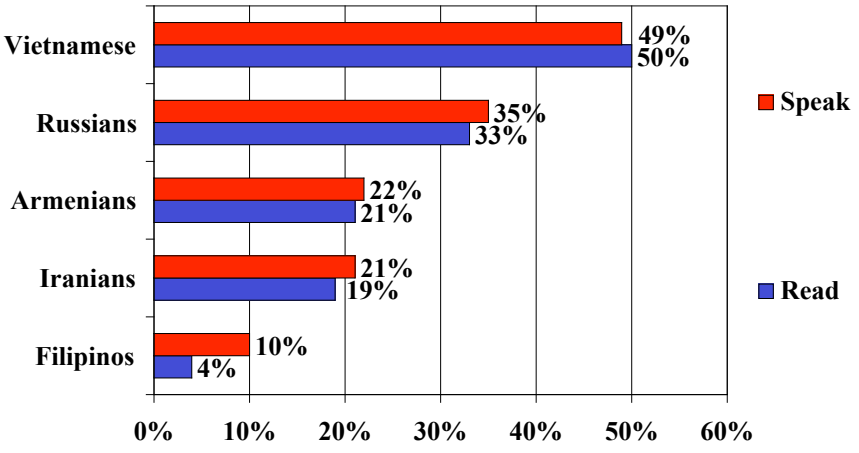
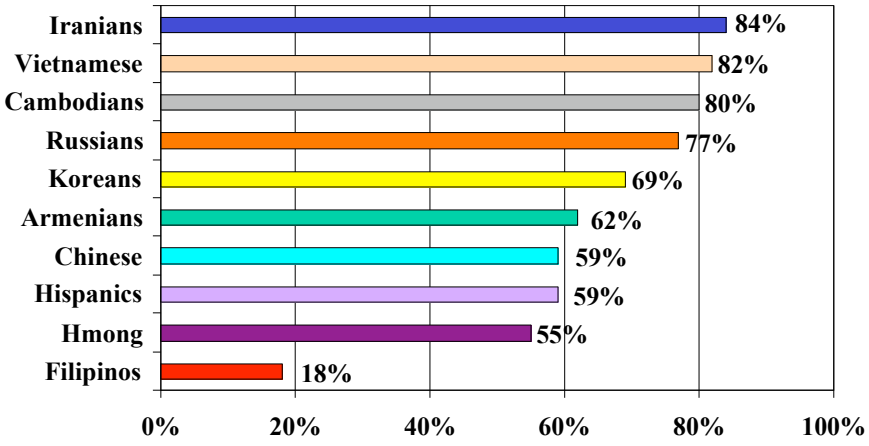
Not Well / Not at All answers



Have you ever taken classes to improve your fluency in English?

Yes answers



What is the most important reason you have not taken an English class?

All Poll respondents

1. Inconvenience of class times and locations
2. Difficulty of learning English
3. Lack of interest in learning English
4. Poor quality of classes
5. High cost of classes

7. **Foreign language media is a prime source of medical information for California immigrants. Hispanics and Chinese utilize it the most. Television is the most popular medium followed by newspapers, the Internet and the radio.**

Immigrants tend to overwhelmingly prefer the use of ethnic media as opposed to English language media as a source of medical information.

- Hispanics are the greatest consumers of foreign language media, followed by Hmong, Koreans, Vietnamese, Iranians and Chinese immigrants.

Overall, television is the most heavily used medium for immigrants to get medical information, followed by newspapers, radio, and the Internet

- Television is a prime source for a majority of Hispanics, Hmong, Armenians, Iranians, and Filipinos.

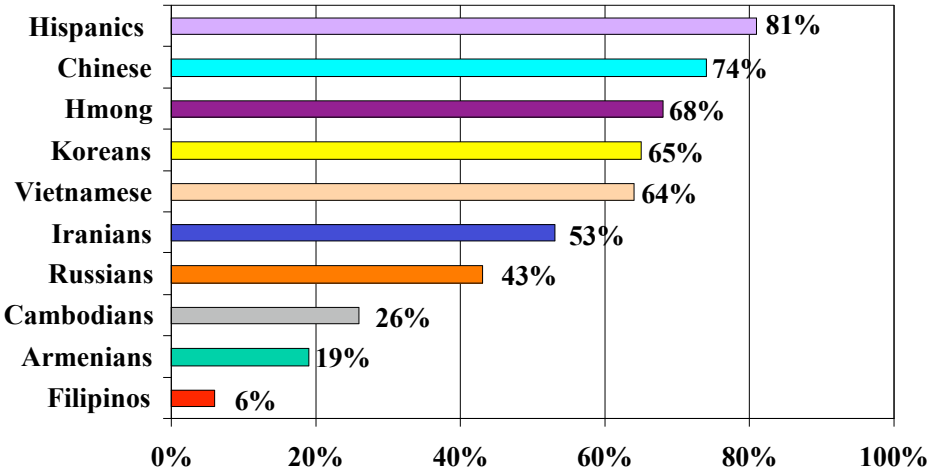
Newspapers serve as a primary source of medical care information for Koreans, Chinese, and Vietnamese respondents.

Significant percentages of Iranians, Russians, Filipinos, and Armenians cite the Internet as an important source of medical care information.

Hmong and Vietnamese report that radio is an important source of medical care information.

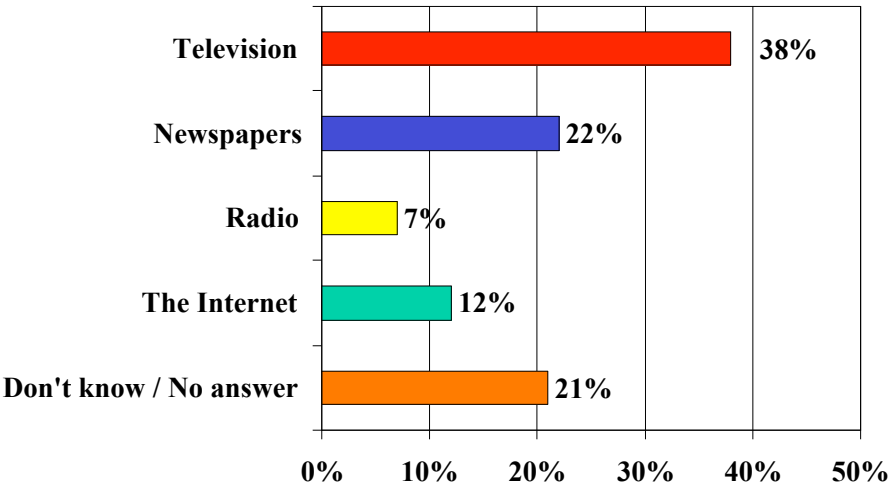
Where do you get most of your information about medical care – from English language media or foreign language media?

Foreign Language Media answers



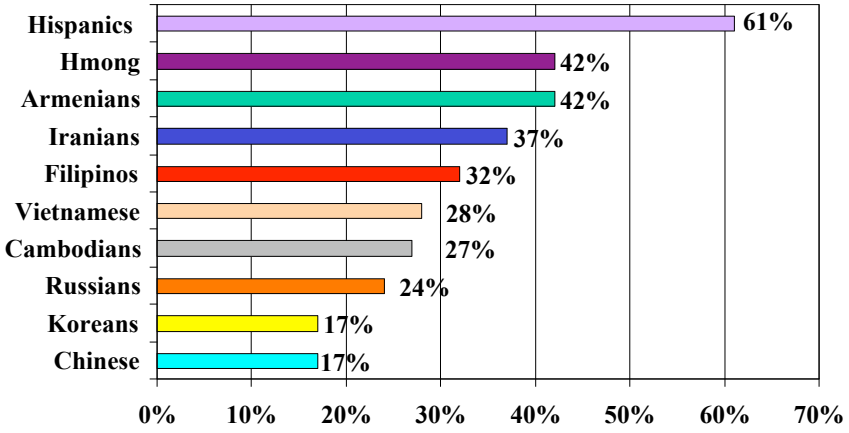
Where do you get most of your media information about medical care?

All Poll respondents



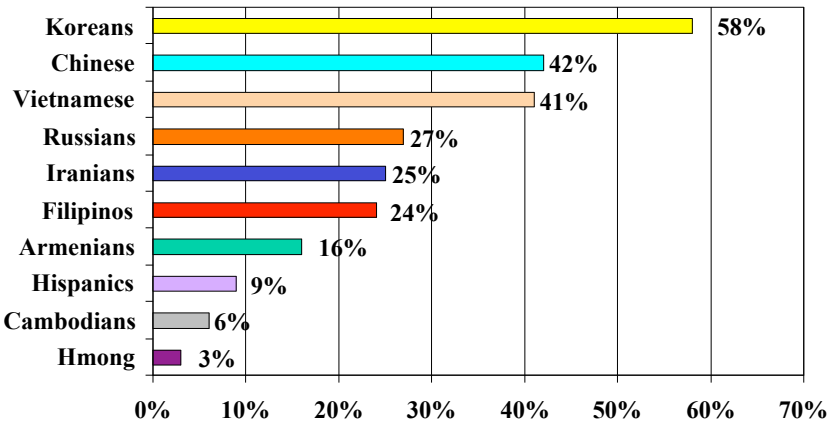
Where do you get most of your information about medical care?

Television answers



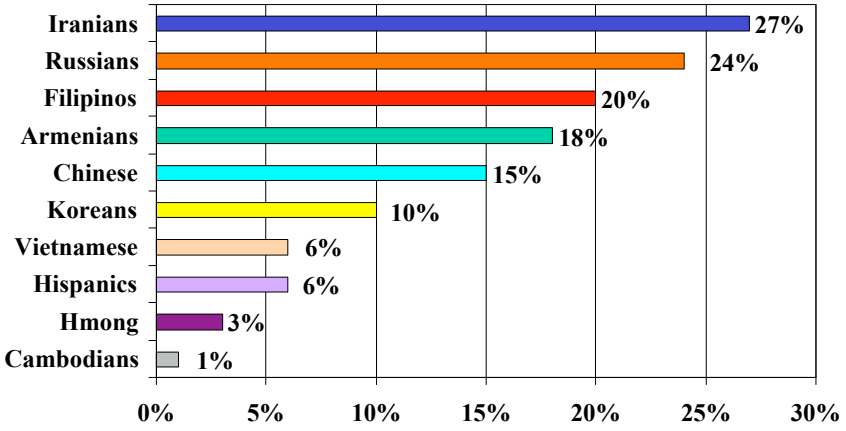
Where do you get most of your information about medical care?

Newspaper answers



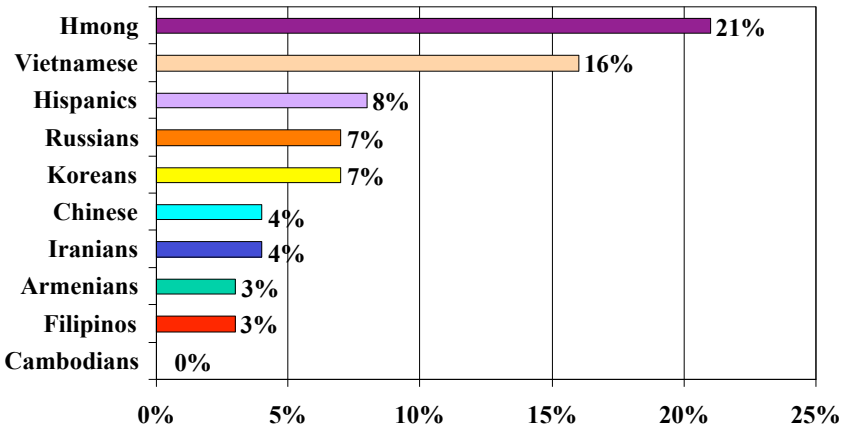
Where do you get most of your information about medical care?

Internet answers



Where do you get most of your information about medical care?

Radio answers

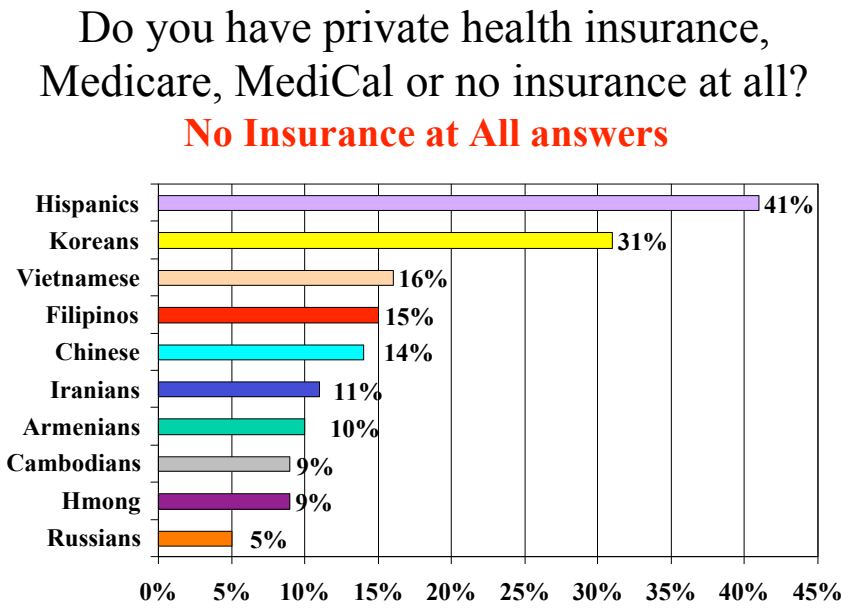


8. **<u>A substantial percentage of California immigrants do not have any type of insurance. Hispanics and Koreans are the two immigrant groups most affected by this problem.</u>**

The study reveals that Hispanics and Koreans are the groups that are least likely to have any form of medical insurance.

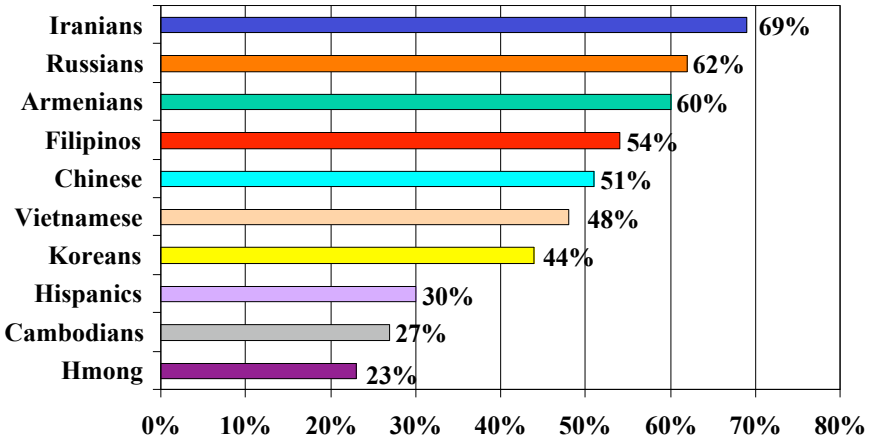
More than half of all Iranian, Russian, Armenian, Filipino and Chinese immigrants have private medical insurance.

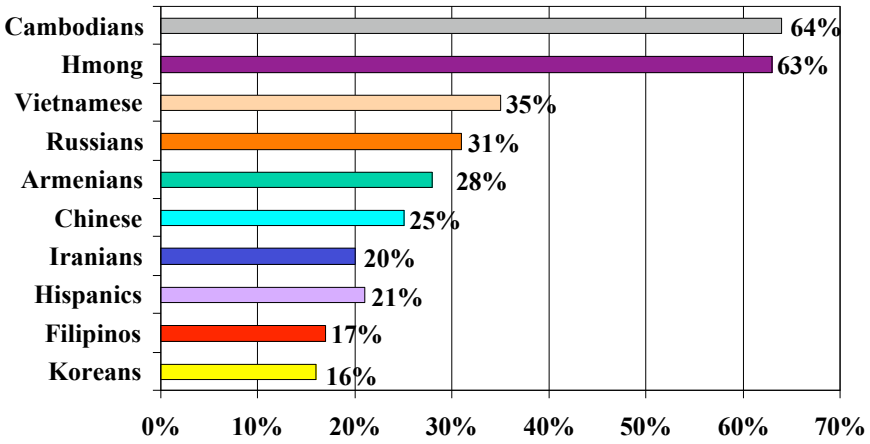
The immigrant groups most likely to receive medical insurance through Medicare or MediCal are Cambodians and Hmong.



Do you have private health insurance, Medicare, MediCal or no insurance at all?

Private Health Insurance answers



Do you have private health insurance, Medicare, MediCal or no insurance at all?

Medicare / MediCal answers