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LEP Prevalence in Southern New Jersey and The Use of Interpreting Services in Healthcare Settings

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LEP Prevalence in Southern New Jersey and The Use of Interpreting Services in Healthcare Settings

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Background

Language barriers are an arising issue in healthcare settings. Areas like New Jersey with larger groups of minorities are at greater disadvantages.

- Language barriers accrue when patients and providers are not able to communicate clearly with each other.
- Patients who are not able to communicate with providers suffer high risk of unequal treatment and unequal health outcomes.
- New Jersey is home to nearly 2 million immigrants and refugees whose communities represent significant geographic and language diversity.⁸ This calls for a greater need for language accessibility for Limited English Proficient (LEP) individuals.
- Aside from English, Spanish is the most widely spoken language in New Jersey, with an estimate of over three million speakers.⁷

Objective

- Partner with community stakeholders to understand the extent of the presence and needs of LEP populations in southern New Jersey.
- Examine the types of resources and interpreting services available to LEP individuals, especially in healthcare settings.
- Create an intervention that will help alleviate the language barriers LEP individuals experience in their community in southern New Jersey.

Methods

- Google Scholar Search: "LEP in South Jersey", "Language Services"
- Literature Review using words such as: "LEP", "Language Barriers", "Interpreter"

Results

In Camden County, the largest LEP populations speak the following languages: Spanish, Chinese, and Vietnamese. According to the NJ Language Access Plan, Spanish is by far the most common and fastest growing LEP language in New Jersey and across all 21 counties.⁶

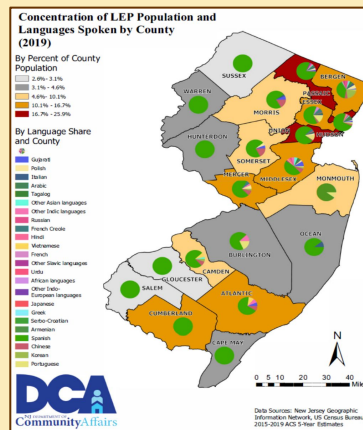


Figure 1. This data from the NJ DCA Language Access Plan compares the percentages of LEP individuals, as well as the languages spoken by LEP individuals that make of these percentages, based on county.

The presence of language barriers in healthcare settings creates impaired patient understanding of diagnoses, medications, and follow-up.⁴ Being of LEP has been identified as a significant mediator of ambulatory health disparities and is associated with decreased access to care and patient satisfaction.¹

According to the results of the Medscape Provider Survey,⁵ completed by 4,708 providers across the United States:

- Only 32% of providers asked patients about their language preferences.
- Only 24% of providers indicated having a formal in-person or telephonic interpreting service.
- Almost half of the providers (40%) indicated asking family members of the patient to interpret as being their main form of interpreting strategy.
- Private practices tend to use bilingual staff as interpreters over trained interpreters.

Conclusion

Language barriers in southern New Jersey pose a serious problem for individuals with LEP.

- Patient outcomes are more often worse for individuals whose first language is not English.²
- LEP individuals are more prone to using emergency and more expensive treatments and methods for non-urgent medical cases.³
- Several individuals in the LEP population prefer returning to their home country in order to receive treatment rather than receiving treatment in the United States.¹
- Many healthcare providers do not make use of medical interpreters and tend to use informal methods of interpreting in clinical settings.

Limitations

- There is not enough literature examining the health outcomes of LEP populations in southern New Jersey.
- Census data does not provide a true estimate of the LEP populations in southern New Jersey.
- Southern New Jersey being more rural than north or central New Jersey may result in limited access to public resources and language services.

References

