Assessing Language Barriers to Mental Health Services in a Multi-Ethnic Patient Population

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Background: On arrival in Canada, 42% of immigrants speak neither English nor French. The emergency department (ED) serves as the entry point into the mental health care system for many patients with limited mainstream language proficiency. After ED discharge, and compared to patients from mainstream language and ethnic communities, patients from ethnic minorities are less likely to use long-term follow-up within standard mental health services due to language and cultural barrier, and the failure of clinicians to understand the meaning of symptoms. Although professional language interpretation has been associated with improvements in patient satisfaction, treatment adherence, and fewer emergency visits, these services are largely under-utilized in psychiatric settings. Barriers to the regular use of professional interpreters include a tradition of relying on ad hoc interpreters, the perception of insufficient time to use interpreters in routine clinical practice, labor and costs associated with obtaining and working with an interpreter, and adjustment to triadic interaction in clinical work. The present study involves an evaluation and comparison of the mental health care received by Francophone, Anglophone, and Allophone patients at a general hospital in an ethnically diverse neighborhood in Montreal.

Research Goals: 1) To estimate the proportion of linguistically diverse patients (i.e. those whose mother tongue is neither French nor English) among patients seeking outpatient mental health services; 2) To identify the proportion of these patients who prefer to use English as a second language (ESL); and 3) To determine whether linguistically diverse patients have access to and make use of interpreters during the course of their treatment.

Methods: Patients were recruited from lists of outpatients with appointments at the Institute of Community and Family Psychiatry of the Jewish General Hospital. All participants met the following eligibility criteria (i) Being a psychiatric outpatient and (ii) Being from 21-65 years of age. Data on demographics, clinical assessment, health care utilization and use of interpreters were collected from patient files. Case managers completed the Treatment Adherence Questionnaire, which addressed their perceptions of patient adherence to different aspects of treatment including language and communication difficulties, use of medications, psychosocial interventions and regular attendance at appointments. A research assistant interviewed eligible patients using the following questionnaires: Questionnaire for Patients, Patient-Reported Provider Cultural Competency Scale, Patient-doctor Relationship Questionnaire, and the Patient Satisfaction Survey. These questionnaires assessed aspects of the patient’s language choice and use of interpreters over the course of their mental health care, the quality of the patient-clinician relationship, and the patient’s overall opinion of the treatment team.
Results: To date, there have been 93 interviews with patients, with the following findings: 58% were female (53/91), the average age was 44 years, and 40% were born outside of Canada (36/90). **Goal #1:** The proportion of linguistically diverse patients was 42/90 (47%), meaning that these patients spoke a language other than, or in addition to, French and/or English while growing up. There was great linguistic diversity, with 23 other reported languages. The most commonly reported languages were Arabic (n=6), Spanish (n=4), Russian (n=3), Greek (n=3), Haitian Creole (n=3), and Italian (n=3). A small number of patients (5/90, or 6%) reported speaking French and English while growing up, and (6/90, or 7%) spoke French, English and a third language. **Goal #2:** Of the 42 linguistically diverse patients, the majority (29/40, or 73%) preferred using English with their treatment team, and 10/40 (25%) preferred to use French. **Goal #3:** Only 1 patient reported having been offered the services of an interpreter.

Conclusions. According to these data, almost half of psychiatric outpatients at a general hospital in Montreal reported speaking a language other than French or English during childhood. The majority of these preferred to use English with their treatment team. Only one linguistically diverse patient was offered the services of an interpreter during the course of treatment. These preliminary results hint at a paucity of interpreter use in a linguistically diverse patient population.

**ACKNOWLEDGEMENT:** This research was funded by Health Canada and administered by the McGill Training and Retention of Health Professionals Project.