



MASSACHUSETTS
GENERAL HOSPITAL

MEDICAL
INTERPRETER SERVICES



Neurology, Healthcare Access and Quality of Care Received by Immigrant Communities and Patients with Limited English Proficiency (LEP)

Volume 10, Issue 1

November 5, 2021

by Claudia Avila-Urizar

During the most recent Interpreter Grand Rounds as part of Medical Interpreter and Translator Week, Nichte Mejia, MD, MPH spoke to us about healthcare inequities and how professional



medical interpreters can decrease disparities. Extensive research has shown that Latinx, Black and other racial minorities suffer from disparities in access to health care, leading to delayed diagnosis, subpar treatment, and worse clinical outcomes.

Dr. Mejia told us that all neurological diseases put together are the number one cause of patient disability in the world, and that the Covid-19 pandemic has amplified inequities that exist in healthcare systems. Access to neurological care,

even when adjusted for level of education, insurance and income shows that when it comes to race and ethnicity, disparities persist. (Saadi A., et al, 2017)

The literature has shown that improved language access increases quality of care, and that patient education is more likely to happen when professional medical interpreters are involved in patient care. Professional medical interpreters are cultural allies and members of the health care team and make language access possible. Dr.

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Mejia described a research study that she and others, including our Director Chris Kirwan, performed at Mass General Hospital, and published in the Journal of the American Heart Association. The study highlighted the effect of improved language access to care for patients with ischemic stroke, when working with Professional medical interpreters (PMIs). It showed through “multivariable analysis adjusting for other socioeconomic factors...that acute

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ischemic stroke patients who did not receive services by PMIs had lower odds of receiving defect-free stroke care.” (Luan Erfe, et al, 2017)

Collecting accurate data on race, language, and ethnicity (REaL data) is critical to the work of identifying healthcare disparities. MGH Interpreter Services has worked with the Department of Neurology, the Disparities Solution Center, the Lawrence Center for Quality and Safety and the Mongan Institute to fine tune its ability to collect accurate data on how patients’ language access needs are met and use that data to identify and address disparities. This created the possibility for measuring the outcomes of the Ischemic Stroke study because the authors were able to identify which patients had PMIs and which did not. Work is ongoing with other departments and similar studies such as the Department of Surgery, which show comparable results.

Dr. Mejia also shared with us that her colleagues agreed that working with an interpreter in person is especially helpful when patients are confused, hard of hearing, speak softly and slowly or have speech limitations due to neurological conditions. The expansion of telemedicine services has also improved access to language services via video and telephone. A study published in January of 2021 by the American Journal of Managed Care showed that telemedicine access differences may compound disparities in chronic diseases and Covid-19 outcomes. Therefore, institutions should study data on video visits across demographics and equip patients, clinicians, and practices to promote telemedicine equity. Patients over the age of 65, Black, Hispanics, Spanish speaking, and those from areas with low broadband access, were less likely to use video visits. (Rodriguez, J. Betancourt, J et al) The perennial challenge in health care is access to language services at all levels of the health system. MGB is currently addressing one such disparity by setting up a central

MGB translation team. Better access to translations gives access to a broader range of patient education materials. This is one avenue toward reducing disparities.

Another problem that Dr. Mejia mentioned is the considerable gap in the diversity of the healthcare workforce when it comes to race, sex, and linguistic diversity. It is widely recognized that patients from diverse communities including LEP patients have not been included in a broad range of research studies. Research committees are working to address differences and close the gap. One way of doing so is to create a more diverse workforce to attract a more diverse patient population.

Regardless of the healthcare encounter taking place at outpatient clinics, inpatient units or emergency rooms, Professional medical interpreters are part of the solution when it comes to breaking down the barriers to achieving equity and providing culturally sensitive care for the diverse communities we serve.

References:

Saadi A, Himmelstein DU, Woolhandler S, Mejia NI. Racial disparities in neurologic health care access and utilization in the United States. *Neurology*. 2017 Jun 13;88(24):2268-2275. doi: 10.1212/WNL.0000000000004025. Epub 2017 May 17. PMID: 28515272; PMCID: PMC5567325.

Luan Erfe, Betty M., Khawja A. Siddiqui, Lee H. Schwamm, Chris Kirwan, Anabela Nunes, and Nicté I. Mejia. 2017. “Professional Medical Interpreters Influence the Quality of Acute Ischemic Stroke Care for Patients Who Speak Languages Other than English.” *Journal of the American Heart Association: Cardiovascular and Cerebrovascular Disease* 6 (9): e006175. doi:10.1161/JAHA.117.006175. <http://dx.doi.org/10.1161/JAHA.117.006175>.

Rodriguez JA, Betancourt JR, Sequist TD, Ganguli I. Differences in the use of telephone and video telemedicine visits during the COVID-19 pandemic. *Am J Manag Care*. 2021 Jan;27(1):21-26. doi: 10.37765/ajmc.2021.88573. PMID: 33471458.

Publications with Involvement of Medical Interpreter Services

Our Medical Interpreter Services team has been involved in a number of peer reviewed publications together with colleagues from across MGH. Here are the most recent publications:

Dr. Erica Shenoy – Crediting Translators who helped the Department of Infectious Diseases to develop a COVID tool kit which will be published by Dr. Shenoy with recognition to the Translation team.

Esteban Barreto PhD et. al., *The Role of Race, Ethnicity and Language in Care Transitions* published in The American Journal of Managed Care acknowledges Chris Kirwan, Anna Pandolfo and Melissa Calverley along with the Translation teams for their contributions to these surveys and the results of the research.

Claire de Crescenzo, MD et. al., *Increasing Frequency of Interpreting Services is Associated with Shorter Peri-operative Length of Stay*, Journal of Surgical Research Feb 2022.*

Jessica H Tran et. al, *Challenges and opportunities caring for neurology outpatients across language differences in Neurology: Clinical Practice* (June 2019).*

Juan Matute MD et. al., *The healing power of language: caring for patients with limited English proficiency and COVID 19* (March 31, 2021). Chris Kirwan is acknowledged as a contributor to the article.

Betty M. Luan Erfe et. al., *Professional Medial Interpreters Influence the Quality of Acute Ischemic Stroke Care for Patients Who Speak Languages Other than English*, Journal of the American Heart Association, Sept 2017.*

Aswita Tan-McGrory et. al., *The American Journal of Managed Care: Addressing Virtual Care Disparities for Patients with Limited English Proficiency*. Chris Kirwan contributed to this article.

*Chris Kirwan is listed as a co-author of these articles

LAC Award Presented to Dr. Uzma Shah during Medical Interpreter and Translator Week

Once again this year, our celebration of Medical Interpreter and Translator Week was limited by the COVID pandemic. Next year we hope to have our MIS table in the White Lobby, and our famous International Potluck Lunch.

A highlight of the week this year was the presentation of the Language Access Champion award to Dr. Uzma Shah of Pediatric Gastroenterology. Dr. Shah, who sadly for us is leaving our institution, accepted the LAC award via Zoom at the beginning of our Staff Meeting during that week. She left us with the following poem, which she said exemplified the profound way that we listen as medical interpreters:

When Someone Deeply Listens to You

When someone deeply listens to you
it is like holding out a dented cup
you've had since childhood
and watching it fill up with
cold, fresh water.
When it balances on top of the brim,
you are understood.
When it overflows and touches your skin,
you are loved.
When someone deeply listens to you
the room where you stay
starts a new life
and the place where you wrote
your first poem
begins to glow in your mind's eye.
It is as if gold has been discovered!
When someone deeply listens to you
your bare feet are on the earth
and a beloved land that seemed distant
is now at home within you.

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The Interpreter is published once quarterly by MGH Medical Interpreter Services.

Publisher: Chris Kirwan, Director MGH MIS

Managing Editor: Andy Beggs, abeggs@partners.org

Interpreter Profile: Laila Tagzine

By Andy Beggs

Languages: Arabic, the Moroccan dialect, and French

Country of Origin: Morocco
At MGH Since: 2017

Laila was born in Casablanca. When she tells people that she is from Morocco, many of them don't know where that is, but they all know Casablanca! Laila went to University in Morocco and majored in Math and Physics. Her father put a high value on education, and thus Laila came to the USA to continue her studies. Laila met her husband, who is Lebanese, in Boston. The two were blessed with three wonderful and amazing boys who are still a big part of her life although they are all now done with college.

While her kids were still growing up, Laila liked to stay home with them, and during that time she did volunteer work in Math tutoring at her children's school. Then in 2014, Laila studied at an organization called "Found in Translation" and completed her training as a medical interpreter. She worked for many hospitals and agencies in the area before coming to Mass General in April of 2017. Laila says, "I am proud and honored to be part of this team, led by committed and motivated leadership." She is also an Arabic language coach, teaching interpreters the Arabic part of their medical terminology training and doing role plays in Arabic.

We all feel lucky to have Laila on our team. Since she is from Morocco, we can always send requests

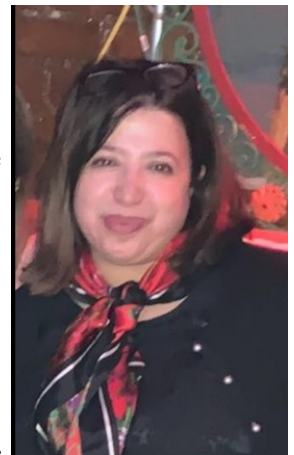
The MIS Newsletter was created in response to the need for a new and improved mode of inter-departmental communication. The information shared in this publication is intended for the use of MGH MIS staff and freelance interpreters.

We are always looking for information and ideas for articles that would interest our readers. Please submit any contributions that you might have to Andy Beggs at the email address given to the left.

Whether you have an important event that impacts our profession, an article that might be of interest, or general information that the department might find useful, please help to make this instrument an effective method of communication.

Thank you!

for the Moroccan dialect on to her. However, Laila emphasizes that if she is not available, to please try to see if another Arabic interpreter can take the call. There are two reasons for this. 1) Not all Moroccan people speak only the Moroccan dialect. If they have gone to school and learned classic Arabic, there will be no problem. Also, 2) The other Arabic interpreters may be able to speak with a patient who speaks the Moroccan dialect as well, so always give them a chance before automatically sending a Moroccan dialect request out to Cyracom.



Laila loves advocating for patients who speak the Moroccan dialect. They are generally older patients or those who didn't go to school. When she identifies a patient who only speaks this dialect, she urges providers to request an interpreter for them who speaks the Moroccan dialect. Patients are shy, she says, and if they get an interpreter who only speaks to them in Arabic, they may say "Yes, yes, yes," but not really be understanding. Laila recalls arriving at an interpretation in which the patient had had a Cyracom interpreter in Arabic, and she asked the patient if they had understood what the provider had said. There reply was no.

Laila's passion is to help people, and she is always pleased "when patients and providers appreciate your service, and you see that you made a difference." Laila believes fundamentally that everyone has a right to health care and that it needs to be accessible to all. She loves the saying that she once read, that "Inclusion for all is a value to all. Integration for all is empowerment for all."