



GOOD COMMUNICATION

The Key to Quality Health Care

THE CENTRE FOR ACCESS TO
SERVICES IN ENGLISH

MAURICIE-CENTRE-DU-QUÉBEC

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GOOD COMMUNICATION...



... IS A PARTNERSHIP

Good communication creates a partnership between health care providers and patients, enabling them to explore the illness or condition together, and work as a team to promote healing. Patients are more likely to trust their healthcare team.



... IMPROVES OUTCOMES

Research has shown that effective patient/provider communication can improve patients' health as quantifiably as many drugs. Good communication can have a positive influence on anxiety, symptom relief, pain, and physiological measures such as blood pressure or blood sugar levels.



... LEADS TO BETTER UNDERSTANDING

Good communication enables patients to have a full understanding of their illness or condition, and its treatment. Patients feel empowered with a greater sense of being in control and are more satisfied with their care. They tend to find it easier to follow through with treatment.

LINGUISTIC BARRIERS

WHO FACES THEM?

First Nations and Inuit, immigrants and refugees, the deaf, or official language speakers in minority situations, such as English in Québec, or French speakers in the rest of Canada, can face language barriers. Even for bilingual people, linguistic barriers might arise in a health care situation due to stress levels, complex or unusual vocabulary, cultural differences, or physical factors associated with the illness itself.

As language barriers disappear, health outcomes improve

CAN LINGUISTIC BARRIERS AFFECT HEALTH OUTCOMES?

While there are many factors that can act as barriers to care, such as income, education, gender orientation, or disabilities, language is the most basic. Language opens the door to getting a clear understanding of each person and situation.

Language barriers are associated with:

- Increased risk of hospitalization
- Increased risk of medication errors and complications, and adverse events
- Decreased follow-through with treatment plans
- Less effective pain relief
- Less adequate management of chronic diseases, (diabetes, asthma)

LINGUISTIC BARRIERS

Language barriers can make it harder to access health services initially, either for first contact with a doctor or specialist, or with a health promotion or healthy-lifestyle program. Sometimes, people wait longer before seeking care. Linguistic barriers are also significant factors in accessing mental health and social services.

HOW MIGHT I BE AFFECTED?

- I might find it harder to access services initially.
- I might find it harder to find a psychologist, a counselor, or other mental health professional with whom I feel comfortable.
- I might wait longer than I should before deciding to consult or seek help.
- I might feel less satisfied with my care.
- I might not feel able to give my health care provider all the details they need to explore all options for my care.
- There is a higher risk of miscommunication about my health condition which could lead to other problems.
- I might need extra time to process what my health provider has said; I might retain less information in a second language.
- If my health provider is not fully bilingual but yet tries to communicate in my language, the message might not be clear.
- Due to language barriers, I might feel more anxious, which further reduces my ability to take in information.
- The overall quality of care I receive could potentially be affected.

WHAT YOU CAN DO

The good news is that there are strategies you can use to overcome linguistic barriers and reduce their effect.

Access to necessary health services is a right guaranteed by the Canada Health Act of 1984

SOME STRATEGIES

- Make sure the health provider is aware that the majority language is not your mother tongue.
- Interpreter services are available at the CIUSSS-MCQ; ask about them.
- Prepare a list of questions beforehand, if useful or appropriate. Give yourself more time to process information.
- Bring a trusted friend or relative to your appointments to help with translation and advocacy. Remind them that your personal information is confidential.
- Ask your doctor or nurse for materials or resources written in your language.
- Remember to breathe and keep calm.
- Contact the staff at CASE for referrals or support.

KEY TAKEAWAYS



GOOD COMMUNICATION IS IMPORTANT

A good communication that flows both ways can have an important effect on your healthcare outcomes and your overall sense of well-being and satisfaction.



LANGUAGE BARRIERS CAN AFFECT OUTCOMES

Language barriers are associated with a wide range of increased risk factors, so it is important to be aware of them. Sometimes the effect of a language barrier might not be immediately apparent. Even a person who is bilingual might struggle in a second language under unusual or stressful conditions.



REMOVING LANGUAGE BARRIERS

Strategies include taking extra time to think things through, using interpreters, asking for help, finding materials in your own language, and not being afraid to ask questions in order to be fully informed.

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Sources:

1. Bowen, Sarah, "Language Barriers in Access to Health Care", Report, Health Canada: 2001. <http://publications.gc.ca/site/eng/424952/publication.html>
2. Bowen, Sarah. "The Impact of Language Barriers on Patient Safety and Quality of Care," Report: Sociétésantéenfrançais 2015. <http://www.santefrancais.ca/wpcontent/uploads/2018/11/SSF-Bowen-S-Language-Barriers-Study-1.pdf>
3. "Communication." Canadian Nurses' Protective Society, Vol. 15, no. 3, May 2006.
4. Stewart, M.A. "Effective physician-patient communication and health outcomes: a review." Canadian Medical Association Journal, Vol. 152, Issue 9, 1 May 1995.
5. Travaline, John M, MD, et al. « Patient-Physician Communication: Why and How." Journal of the American Osteopathic Association, Vol. 105, Jan. 2005, pp 13-18. Tucker,
6. Carolyn M., et al. « Patient-Centered Culturally-Sensitive Health Care: Model Testing and Refinement." Health Psychology, Vol. 3, no. 3, May 2011.

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