



Effective Health Care

Comparative Effectiveness of Language Interpretation Nomination Summary Document

Results of Topic Selection Process & Next Steps

- The topic, *Comparative Effectiveness of Language Interpretation*, will be addressed by an in-process AHRQ Effective Health Care Program review, *Improving Cultural Competence to Reduce Health Disparities for Priority Populations*. Given that the ongoing work will cover this nomination, no further activity will be undertaken on this topic.
 - Evidence-based Practice Center Systematic Review Protocol. *Improving Cultural Competence to Reduce Health Disparities for Priority Populations*. Rockville, MD: Agency for Healthcare Research and Quality. July 8, 2014. Available at: <http://effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/?pageaction=displayproduct&productid=1934>
- To sign up for notification when this and other EHC Program topics are posted, please go to: <http://effectivehealthcare.ahrq.gov/index.cfm/join-the-email-list1/>

Topic Description

Nominator(s): Health care professional association

Nomination Summary: The nominator is interested in understanding what type of translation service results in the best health outcomes for patients of limited English proficiency. He/she indicates that possible health outcomes include accuracy of diagnosis, comprehension of treatment, and improved intermediate and final health outcomes (e.g., improved control of high blood pressure, fewer CVD events).

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Population(s): Individuals with limited English proficiency (LEP)

Intervention(s): Professional language interpretation services conducted in-person, by telephone or via video

Comparator(s): Usual care, ad-hoc interpretation, or comparison of interpretation methods (e.g. video vs. telephonic interpretation)

Outcome(s): Improvement in health outcomes, comprehension of treatment

Key Questions from Nominator: What is the comparative effectiveness of language interpretation services?

Considerations

- The topic meets EHC Program appropriateness and importance criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- Approximately 21 million individuals are limited English-proficient (LEP) in the US. Language barriers can adversely affect the delivery of care for this population. The ability to communicate with a health care provider can mean the difference between receiving high or low quality care. For LEP populations, follow-up compliance, adherence to medication, and patient satisfaction are significantly lower than they are for English-speaking patients.
- LEP patients who are provided with an interpreter make more outpatient visits, fill more prescriptions, and have higher satisfaction with care than those without interpreter services. Medical interpreters can potentially bridge the communication gap between patient and provider to improve understanding of treatment and improve health outcomes.
- The topic was found to be addressed by an in-process AHRQ Effective Health Care Program review, *Improving Cultural Competence to Reduce Health Disparities for Priority Populations*. The following draft key question in the report may be relevant to language interpretation:

What is the effectiveness of interventions to improve culturally appropriate health care for racial/ethnic minority children and adults?