



QuantiaMD Study Finds Cultural and Language Barriers Hinder Patient Care and Lead to Longer Appointment Times

In Largest-Ever Study of its kind, Over 4,300 Clinicians Confirm the Need for Better Tools and Resources for Treating These Patients

Waltham, Mass. July 27, 2011 – A new [study](#) of more than 4,300 physicians and other providers presents an eye-opening look into clinicians' thoughts on language and cultural barriers and their detrimental effects on patient care. The study, conducted by [QuantiaMD](#), the largest mobile and online physician community, found that over half of the respondents feel that language and cultural barriers – either religious or ethnic – are a significant issue to providing efficient, high-quality patient care. This study, along with two previous QuantiaMD studies, identified the tools and resources physicians need to help reduce gaps and barriers with culture and quality.

This largest-ever study of its kind was conducted by the [Doctor-Patient Relationship](#) Interest Group on QuantiaMD and can be viewed at http://www.quantiamd.com/q-qcp/QuantiaMD_Culture_Language_Care_study.pdf. The study focuses on national results as well as on individual states – such as New York, Pennsylvania, Illinois and Texas – selected from across the country for comparisons. According to the results:

- One-quarter of all respondents stated that at least 25% of the patients they serve have either limited English proficiency and/or a cultural barrier that influences their care.
- 90% of the clinicians felt that language barriers have compromised care and service for patients with limited English proficiency at least sometimes.
- 86% of the respondents felt that cultural barriers have compromised care and service at least part of the time.
- A considerable 73% of respondents felt that these barriers lead to longer-than-average appointment times.

Clinicians noted that the most common culturally related beliefs that affect patient care include perceptions about treatments (including adherence to medications for chronic conditions) and feelings about disease origin, nature and history. The top culturally related behaviors that affect care include eating traditional diets that might put a person at risk (e.g. high in fat, sugar or salt) and the use of complementary, alternative or folk remedies.

“As I am fluent in Spanish, I feel that I can provide medical care to my Spanish-speaking patients more effectively than if I weren't,” said Cardiologist Victor Bonilla, MD, FACC, FSCAI, University of California, Davis. “The ability to communicate with a patient in their native tongue is a huge asset, but it only addresses part of the issue. It is just as important for physicians to understand the effects of different cultural beliefs and behaviors and how these may influence expectations of healthcare, understanding of a disease state or adherence to treatment. This is why physicians need proper tools and resources to support them in caring for this nation's diverse population.”

Results of the 2010 US Census show that minorities compose more than one-third of the U.S. population and have represented between 81% and 89% of the population growth since 2000. As the U.S. landscape continues to diversify, gaps in care caused by language and cultural barriers will continue to lead to practice inefficiencies and introduce opportunities for medical errors. Compounding these issues is the fact that the rate of insufficient insurance among patients with a language or cultural barrier is high, with almost 40% of respondents saying that over half of these patients also lack sufficient health insurance, per the QuantiaMD study.

“If patient safety and quality improvement initiatives have taught us anything, it’s that the root causes of adverse events and sub-optimal outcomes are almost always system failures,” said Michael Paskavitz, Editor in Chief of QuantiaMD. “And this study has clearly identified a major failure in the system that supports physicians and patients, which is access to resources that address the cultural diversity of today’s patients. QuantiaMD’s physician members are eager to share a solution with their patients.”

Previous QuantiaMD studies found that 80% of physicians believe having non-English patient education resources is important, and 64% of those same physicians feel their existing resources are fair, poor or non-existent. Physicians lack adequate multi-lingual patient resources – specifically in Spanish, Arabic and Hindi – and, more specifically, related to chronic conditions, such as diabetes, asthma, depression and pain.

QuantiaMD is now working with Joseph Betancourt, MD, MPH, Director of the Disparities Solutions Center and Director of Multicultural Education at Massachusetts General Hospital, and co-founder of Manhattan Cross-Cultural Group, which deploys the [Quality Interactions](http://www.qualityinteractions.org) e-learning program (www.qualityinteractions.org) to improve cross-cultural communication. They have partnered to create [educational content](#) and tools to improve clinicians' relationships with their multilingual and multicultural patients. In the coming months, QuantiaMD’s Doctor-Patient Relationship Interest Group will become a home for educational modules, multicultural resources and collaboration among cultural experts and engaged clinicians. Please go to <http://quantiamd.com/home/culturallanguagebarriers> to view the current resources and tools on QuantiaMD.

About The Doctor-Patient Relationship Interest Group

Doctor-Patient Relationship is a Special Interest Group (SIG) on QuantiaMD that is dedicated to helping physicians improve care and service through strong relationships with their patients. SIG members work together to achieve this goal through expert education, sharing resources, and discussing and supporting each other. This SIG is one of many that QuantiaMD members can join to learn, respond and connect with colleagues across the country who share the same passions. Please view the SIG at http://www.quantiamd.com/home/sig_doctorpatientrelationship.

About QuantiaMD

QuantiaMD® is an online physician-to-physician learning collaborative where 1 in 6 U.S. physicians engage, share, and learn from experts and each other, free of charge. Through any computer, smartphone or mobile device, members visit QuantiaMD daily to engage with respected experts who deliver clinically relevant, unbiased content in a concise, interactive format to fit the busy schedules of today’s physicians. QuantiaMD® is a branded service developed and operated by Quantia Communications, Inc., a privately held corporation headquartered in Waltham, Massachusetts, USA. For more information, visit <http://www.quantiamd.com>.

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