

# CLINICIAN RESPONSES TO LANGUAGE BARRIERS IN AN EMERGENCY PSYCHIATRY DEPARTMENT

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**Background:** Language barriers between clinicians and patients lead to medical errors, under-reporting of adverse reactions to treatment, poor follow up, and even excess mortality.

**Objectives:** To investigate mental health clinician awareness of language barriers and their attitudes and practices when faced with language barrier in their patients with language barriers (LB) in a Psychiatry Emergency Department (ED), and to explore how institutional culture affects their practices.

**Methods:** Data were collected in Montreal, Quebec, Canada from September to December 2015 and from June to December 2017. This study used participant observation and semi-structured questionnaires to interview 110 mental health clinicians working in the psychiatric ED of a general hospital. Participant responses were entered into an SPSS database. Grounded theory guided the qualitative analysis assessed with MAXQDA software. SPSS produced descriptive socio demographic statistics.

**Results:** Psychiatrists (n=15), Residents (n=36), medical students (n=32) and nurses (n=27) were interviewed. Language barrier was common in the psychiatric ED, with half of the patients in this study having a non-mainstream mother tongue. Clinician attitudes and practices regarding language diverse patients varied across professions, with more ward nurses (33%, 9/27) and medical students (25%, 8/32) not being aware of language barriers. Attempts to communicate in these instances included speaking slowly, simplifying speech, and using translation Apps. This may be due to the training and hierarchical position of team members intersecting with tacit or unspoken institutional rules that give a low clinical priority to the use of official interpreters.

**Implications:** Training is needed in mental health care settings to increase clinician awareness of language barriers in patients and teach how and why to work with official interpreters.

Institutions need to support the use of professional interpreters by developing interpreter services. Language barriers need to be reinterpreted as a violation of a patient's fundamental right to mental health care.

## Full List of Authors

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## Learning Objectives

At the conclusion of this presentation, participants will be able to:

1. Recognize clinician awareness of and attitudes toward patients with language barriers
2. Describe how institutional culture affects the practices of clinicians regarding language barriers in their patients