

Background

A significant mismatch in diversity between the healthcare workforce and the patient population can increase the risk for adverse health outcomes when cultural and linguistic barriers impair the patient-physician relationship. Numerous studies have shown that, despite access to interpreters, healthcare professionals often rely on their own limited proficiency or avoid communicating with families of limited English proficiency altogether.^{1,2} This ineffective, or even absent, form of communication impedes patient access to safe and quality healthcare, produces poorer health outcomes, and increases the risk for the misuse of prescribed medications.³

A recent study was performed to illustrate this significant mismatch between the languages which the physicians speak versus their patients across the United States. It was found that among the 50 largest metropolitan areas, only two have a strong match - Milwaukee, WI and Columbus, OH.⁴ The remaining, such as Chicago, IL, had physicians whose language capabilities did not correspond with that of their patient population (Fig. 1).

Metro	Language Most Underrepresented	Physician Language Rank	Patient Language Rank
Chicago, IL	Swahili and Sub-Saharan Africa	1. Spanish	1. Spanish
		2. Hindi	2. Hindi
		3. Persian/Farsi	3. Polish
		4. French	4. Chinese
		5. Arabic	5. Filipino
		6. Russian	6. Arabic
		7. Polish	7. Slavic, Non-Polish
		8. Chinese	8. Russian
		9. Greek	9. French
		10. German	10. Swahili and Sub-Saharan Africa

Figure 1. Languages spoken by multilingual patients and physicians in Chicago, IL.⁴

A potential way to remedy this multicultural barrier that exists between physicians and patients is to encourage a medical school environment that embraces and promotes the multiculturalism of their surrounding area. One way of achieving this would be for medical schools to implement programs aimed at utilizing the skills of multilingual students. Loyola University Stritch School of Medicine offers a peer-taught Medical Polish elective that students can choose to take during their first or second year of training. This study aims to evaluate how well the Medical Polish course helps students meet the multicultural needs of their community.

Hypothesis

The purpose of this study is to evaluate how Loyola University's Stritch School of Medicine (SSOM) addresses the language and cultural barriers in healthcare through the peer-led Medical Polish language program. We hypothesize that

- In attending Medical Polish classes, students will increase their knowledge of the Polish culture and Polish medical terminology.
- Through the Medical Polish language classes, students will become more comfortable conversing with and caring for patients whose primary language is Polish.
- Students that complete the Medical Polish elective will improve their overall cultural competency.

Description

SSOM is located adjacent to Chicago, a city with a foreign born population of 21.7% according to available U.S. Census data. Over half of the immigrants are from Latin America and about a quarter from Europe — with 7.3% of Chicago's population being Polish.⁵ Additionally, 2017 U.S. Census Bureau data estimates that 36% of the population in Chicago speaks a language other than English at home, and that 15% of the city's population speaks English less than "very well." Nationwide, more than one-fifth of households speak a language other than English at home, with 8.5% of the American population being of limited proficiency.⁶

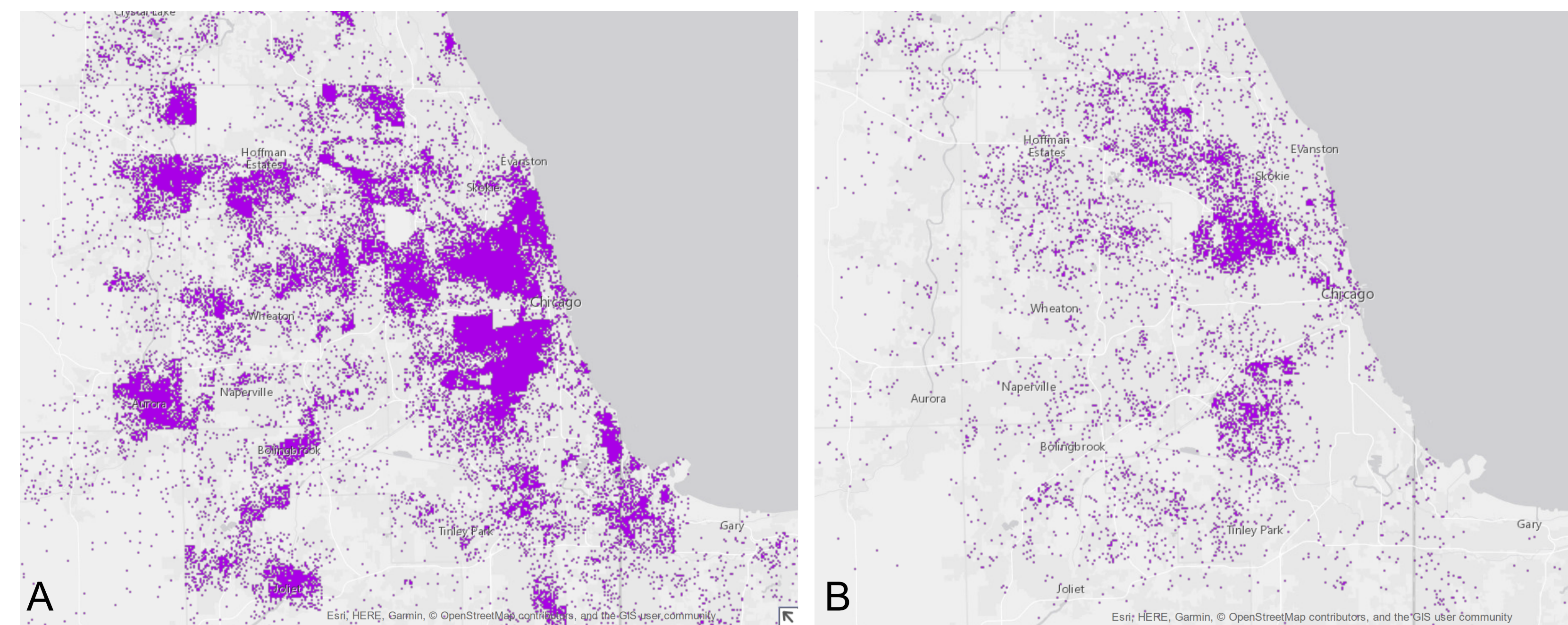


Figure 2. Amount of people speaking a language other than English at home in the Chicagoland area that speak English "less than very well." (A) People speaking Spanish at home (B) People speaking Polish at home. 1 dot = approximately 10 people. (U.S. Census Bureau 2011 Language Mapper Tool)

To produce healthcare professionals who are prepared to better serve the local needs of its diverse patient population, SSOM offers a year-long Medical Polish elective to enrolled medical students. This peer-led elective focuses on teaching medical terminology and common medical beliefs within the Polish immigrant population, as well as other significant aspects of Polish culture.

The curriculum consists of the following:

- Weekly 1 hour sessions (throughout the academic year) taught by fluent first year medical students
- Weekly self-assessment quizzes
- Two required cultural competency events
- A Polish primary care physician shadowing session—completed by both students and teachers of Medical Polish
- End of the year reflection paper
- 1 week of elective credit for students
- 2 weeks of elective credit for teachers

Medical Polish Student and Teacher Enrollment

	2017-2018		2018-2019		2019-2020	
	Teachers	Students	Teachers	Students	Teachers	Students
Medical Polish	4	22	3	16	3	19

Outcomes

- Participants developing new language skills and self-reporting an increase in their cultural competence, which will help them better serve the prominent Polish patient population
- Students gaining an understanding of common cultural practices within the Polish community and their health implications
- Positive end-of-year instructor evaluations and reflections, which demonstrate the rewarding nature of this course for both students and teachers

Conclusions

- Such programming at SSOM can be adapted at other medical schools to teach languages that reflect the local patient population and in such a way to promote safe healthcare practices and positive outcomes.
- The presence of this peer-led course encourages Polish-speaking medical school applicants to apply to SSOM and to feel more confident in the value that they can provide to the healthcare setting.
- Recruitment and subsequent medical training of multilingual students provides a direct solution to language and cultural disparities still affecting healthcare—especially in urban spaces with large immigrant populations.

References

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