Do chronically ill, elderly Francophone patients believe they are adequately served by Ontario's health care system?

Exploratory study of the effect of minority-language communities

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n an exploratory study conducted on behalf of the Consortium national de formation en santé, a Canada-wide umbrella organization bringing together 11 postsecondary institutions that deliver training programs in various health disciplines in French, our research team explored the effect of language barriers perceived by elderly Francophone patients living in 3 different regions of Ontario with one or more chronic diseases. Elderly patients with chronic diseases are especially vulnerable because they experience the most comorbidities and make the greatest use of health services; this group continues to grow both in size and as a proportion of the total population. In the context of Ontario, we wanted to determine whether belonging to an official language minority group is a factor that influences quality of care, and how elderly patients perceive this situation.

Our study was based on semistructured interviews of 25 elderly subjects (13 men and 12 women) with chronic diseases. It enabled us to determine the effect on the perception of the quality of care received by this Francophone population in relation to the challenges of language and literacy. At one time, the notion of literacy referred to the ability to read, understand, and use information; however, the meaning of the term has expanded to include a range of knowledge, skills, and abilities related to reading, mathematics, science, and so forth.

When collated, the results show that communicating effectively and trusting health professionals are core challenges for these elderly patients. Overall, when it comes to their health, these elderly patients are more comfortable expressing themselves and being addressed in French; however, the issue of language is complex. Elderly patients are more likely to encounter communication problems owing to various psychological or social factors such as the specialized level of medical language, concern that they will not be able to understand medical language, a feeling of being rushed during the short time allocated for the physician-patient

La traduction en français de cet article se trouve à www.cfp.ca dans la table des matières du numéro de décembre 2012 à la page 1325.

meeting, the challenge of understanding and expressing themselves in English, and the challenge of expressing emotion and pain in English.

In addition to these factors, there is the effect of assimilation. In the past, to obtain services, using English was a necessity. Some of the elderly individuals with whom we talked about this reported that they knew only the English terms associated with their disease.

We believe that all of these communication gaps are interrelated and expose a threefold issue of literacy—ie, level of ability in French and English, level of education, and level of understanding of medical language.

Despite the exploratory nature of our study, we would like to put forward a few recommendations for improving the quality of health care received by elderly Francophone patients living in minority-language communities:

- Actively offer services in French. More elderly Francophone patients would speak in their own language if they were addressed in French and if the documentation provided or posted in institutions gave both official languages equal status.
- · Train and fund "facilitators" who would offer accompaniment and culturally adapted translation services to guide elderly Francophone patients with chronic diseases in their exchanges with health professionals and to help them to navigate the health system.
- Create, evaluate, and adapt tools for communication either in writing or online, in appropriate language. Here, we are referring to documentation on different types of chronic diseases common among elderly
- Continue efforts to reach out to the population by creating local services, including (particularly for the elderly) coordinated, integrated, flexible, and linguistically adapted home care services.
- Train service providers on language rights and on the different cultural and experiential contexts of Francophone minority populations.
- Create an online or print lexicon that is easy to use and that contains the medical terms for diseases common among elderly patients, in English and in French, with clear and simple definitions.

Do chronically ill, elderly Francophone patients believe they are adequately served? | Commentary

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Acknowledgment

This study was funded by Consortium national de formation en santé—volet national and by Réseau de recherche interdisciplinaire sur la santé des francophones en situation minoritaire. The authors thank Martin Desmeules and

Competing interests

None declared

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The opinions expressed in commentaries are those of the authors. Publication does not imply endorsement by the College of Family Physicians of Canada.

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