The Handbook of

Language in Public Health and Healthcare



Edited by

Pilar Ortega, Glenn Martínez, Maichou Lor, and A. Susana Ramírez

The Handbook of Language in Public Health and Healthcare

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To all my students and patients, for being the best teachers. *Para mis estudiantes y pacientes, por ser quienes mejor nos enseñan*.

PC

To Sandra for showing me the meaning of care.

ĞM

To Mao and Pao Lor.

ML

To my mom. ASR

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At its very core, the delivery of equitable healthcare is centered on the paramount importance of the exchange of correct information via language concordance – including the language nuances, customs, and cultural meanings that add to the subtext of the conversation. This handbook offers a comprehensive analysis with well-written chapters that function as guidepost for such. The authors have done their diligence in identifying gaps with language incongruence and offer thoughtful frameworks on how best to enhance our current healthcare system and how best to prepare the next generation of healthcare workers. Each chapter reviews and distills what has been studied on relevant and important related topics. Collectively, the chapters in this handbook answer the call of a national imperative: As our population demographics continue to change, healthcare workers will be required to think differently in a pluralistic-facing society that is more than ever, multilingual and multicultural.

Antonia Coello Novello, MD, MPH, DrPH

Preface

What happens when an infodemiologist-public health expert, a nurse-scientist, a language professor-dean, and a physician-educator enter a videoconference? In our case, the outcome was this volume, *The Handbook of Language*, *Public Health and Healthcare*. Bringing together interdisciplinary voices and international perspectives, our collaboration has yielded what we hope will be a useful reference for scholars across the many fields of study that are impacted by and explore the impact of language and health.

The Handbook of Language in Public Health and Healthcare provides a comprehensive overview of the theory, history, and leading research pertaining to language and health. This volume uniquely addresses interprofessional topics related to the theory, linguistic analysis, education, assessment, clinical application, and public health implications of language in health. Authors explore both individual patient-clinician encounters and also look beyond the examination room to explore systemic issues in healthcare, education, and society. Importantly, the book relies on the perspectives of a diverse group of contributing authors and editors, whose collective expertise spans multiple continents and numerous professional domains, including linguistics, sociology, medicine, nursing, interpreting, and translation, among others.

This *Handbook* is organized in five sections. We have divided the book into sections that, first, provide a theoretical framework for the field of language and healthcare (Part I), and then more deeply explore focused ways in which the field has evolved. These areas include interpreting and translation (Part II), patient-clinician language concordance (Part III), the pedagogy of medical language education to enhance language-appropriate care (Part IV), and mass communication (Part V).

In Part I, edited by Glenn Martínez, we begin by providing a broad overview of theory, history, and context of linguistics in public health and healthcare. An introductory chapter by Stefanie Harsch and Maricel Santos traces independent developments in linguistics and public health that have resulted in the intersections of language, population health, and healthcare. Four additional chapters flesh out key theoretical concepts and demonstrate their application to the interdisciplinary understanding of language, health, and healthcare. Chapter 2 focuses on sociolinguistics as a key methodological approach for understanding language in healthcare in Spanish-speaking populations in the United States. Chapter 3 focuses on pragmatics and narrative theory as a methodological source for understanding illness narratives with a focus on Latin America and Spain. In Chapter 4, Milena Melo, Carla Pezzia, William Robertson, and Jill

Fleuriet draw on anthropological linguistic methods to explore health in border regions. Drawing on the theorizations of Bruno Latour, they apply border theory to case studies from the Texas-Mexico borderlands, the Guatemalan Highlands, and Chicago. Finally, Holly Jacobson provides theoretical insights at the intersection of applied linguistics, sociolinguistics, and anthropological linguistics, and the relevance of that intersection on public health.

Part II, edited by Maichou Lor, examines language interpretation and translation in public health and healthcare. In this section, we present evidence for the benefits and proper use of strategies to facilitate communication with linguistically diverse populations in language discordant scenarios. The section begins with a discussion on key issues that contribute to language-discordant situations in healthcare settings and an overview of the strategies to address the communication needs of linguistically diverse groups. Each subsequent chapter focuses on a specific strategy. In Chapter 6, Allison Squires provides a brief history of medical interpreting and methods for identifying linguistically diverse patients who would benefit from language assistance in healthcare settings. In Chapter 7, Elain Hsieh presents the different types of medical interpreting and the roles of medical interpreters in healthcare delivery, and synthesizes the impact of distinct types of medical interpreting on patient outcomes. Chapter 8 focuses on the translation of healthcare information to patients. Wioleta Karwacka emphasizes the translation of medical instructions for linguistically diverse patients across the care continuum. The section concludes with a chapter on health literacy. In Chapter 9, Suad Ghaddar provides an overview of health literacy in linguistically diverse patients, including existing clinical health literacy assessments. Efforts to improve health literacy among linguistically diverse populations, including plain language and other interventions, are also reviewed.

In Part III, edited by Pilar Ortega and Glenn Martínez, we focus on language concordance in public health and healthcare. We begin by describing language concordance and the competent use of language skills in healthcare settings. In Chapter 10, Alicia Fernández and Francine Ríos-Fetchko present a conceptual framework for how the term language concordance has historically been applied in healthcare and analyze how researchers currently identify whether a clinical encounter is language-concordant or -discordant. In Chapter 11, Caroline Vickers and Ryan Goble deconstruct what is meant by language concordance and challenge existing perspectives that normalize monolingualism and view multilingualism as foreign or "other." In Chapter 12, Ute Knoch and Jason Fan discuss tools for assessing clinicians' communication skills in a language different from that of their medical training, paying special attention to how evaluating language proficiency for clinical contexts differs from general language proficiency tools, how instruments should be validated for this purpose, and standard-setting for passing thresholds. Next, John Cowden further explores the concept of setting standards for clinician practice in multiple languages in Chapter 13, including issues related to existing proficiency examinations, self-assessment options, and considerations for progressive review of skills and maintenance of certification. The section concludes with Chapter 14 in which George Corpuz, David Chirikian, and Lisa Diamond identify current gaps in language concordance work and outline the types of research needed to advance the field.

Part IV of the Handbook, edited by Pilar Ortega, turns to the pedagogy of medical language education. The section begins with a discussion of medical language learners: Who are they, and what are their language education needs? In Chapter 15, Karol Hardin

presents a linguistic perspective on pedagogy for second language acquisition for healthcare purposes and addresses issues in distinguishing learner proficiency level in healthcare language courses. The next chapter addresses individuals with multilingual skills. In Chapter 16, Josh Prada and Robyn Woodward-Kron define the concept of heritage learner and discuss the relevance of this population of learners in the medical language classroom. In addition, this chapter reviews evidence for the incorporation of translanguaging into medical language pedagogy. In Chapter 17, Marco Alemán and Alejandra Zapién-Hidalgo focus on medical Spanish education and the similarities and differences between educational initiatives that target specific competencies in medical Spanish compared to those that target more general cross-linguistic such as caring for minoritized communities of any language and determining one's limitations in a particular language. In Chapter 18, Rose Molina and Jennifer Kasper share examples of medical language programs in multiple languages, with a focus on international partnerships and global impact. Carmen Pérez-Muñoz and Tiffany Shin then present an overview of guidance on teaching clinical skills for communicating with patients who prefer non-dominant languages in Chapter 19. They describe how to create medical language programs that focus on patient needs and are institutionally structured in a way that promotes program sustainability and effectiveness. The section ends with a focus on faculty development. In Chapter 20, Mónica Vela and Adriana Black Morocoima describe issues in faculty development and institutional leadership for developing and teaching medical language courses.

In the fifth and final section of the Handbook, Part V, edited by Susana Ramírez, we move beyond the clinical setting to examine the global health information environment and consider the role played by the mass media in communicating health information to linguistically diverse populations. We begin this section with a historical perspective on mass communication in health. In Chapter 21, Katharine J. Head and Katherine Ridley-Merriweather trace the development of mediated interventions for public health in the context of communicable disease prevention, the shift to considering the influence of the information environment on patients' knowledge and behaviors, through the current focus on information seeking behaviors and misinformation effects. In Chapter 22, Christine Swoboda, Priti Singh, Susana Ramírez, and Naleef Fareed present a conceptual framework to examine critical issues in health information seeking behaviors and outcomes among linguistically diverse populations. In Chapter 23, Suruchi Sood and Rachael HaileSelasse explore the dynamic relationship between linguistic diversity and entertainment-education strategies that promote social and behavioral change. They briefly review the modern histories and definitions of both linguistic diversity and entertainment-education, describing the organic cross-influence between the two disciplines. Intervention examples from the field illustrate current practices and provide overall guidance on ways to integrate linguistic diversity and entertainmenteducation. Chapter 24 specifically explores the use of graphic medicine (comics) as a strategy for communicating with linguistically diverse populations. MK Czerwiec, Jane Zhao, Isa Álvarez, and Pilar Ortega situate the emergence of graphic medicine within the context of narrative medicine, sharing examples of comics developed for health education and then proposing graphic medicine as a tool to improve public health messaging, patient-clinician communication, and clinician wellness among healthcare students and professionals from linguistically diverse backgrounds. Chapter 25 examines the health implications of social media use. Anna Gaysynsky, Katherine Heley, and Sylvia Chou discuss the importance of studying social media use in linguistically diverse

populations, highlight the potential benefits and harms of social media use for these populations, and outline future directions for research and practice. This section closes with a reflection on communication during times of public health crises. In Chapter 26, Victoria Ledford, Susana Ramírez, and Xiaoli Nan present COVID-19 as a case study highlighting the urgent need for effective communication to linguistically diverse populations especially in situations of public health crises.

In addition to the substantive chapters, we provide a glossary of essential terms in the study and practice of language in public health and healthcare. Most of the glossary terms are used throughout the volume. In some cases, we have included some terms in the glossary that we consider problematic and have intentionally avoided throughout the Handbook. In the glossary, we provide a description and rationale for why we recommend avoiding certain terms or usages and propose alternatives.

The Handbook for Language in Public Health and Healthcare's innovative approach was made possible thanks to the contributions of an interdisciplinary group of scholars with a *depth* and *breadth* of professional and personal perspectives in language, health, and healthcare. In addressing theory, history, and practice as related to patient-clinician communication, education, assessment, research, and mass public health communication about language, we not only discuss issues and gaps but also present actionable strategies that have the potential to improve the health and healthcare of linguistically diverse populations worldwide.

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Part I Theory, History, and Context: Language in Public Health and Healthcare

Introduction to Part I

Glenn Martínez

This section opens a window on multiple interactions and interstices between the scientific study of language, healthcare, and public health. The goal of the section is to demonstrate how a variety of approaches within the fields of linguistics and applied linguistics have interacted with healthcare and public health and to shed light on the ways in which theoretical approaches to language inform and enrich public health and healthcare practices. Many of the themes discussed in this section including health literacy, graphic medicine, the social determinants of health, and language concordance will be treated more fully in later sections of this volume. The present section seeks to highlight the ways in which linguistics and applied linguistics interact with and inform these themes.

The section opens with Chapter 1 by Stefanie Harsch-Oria and Maricel Santos. In this chapter, Harsch-Oria and Santos provide an applied linguistics perspective on language in public health and healthcare with a focus on two key areas of focus: language as a social determinant of health and health literacy. The authors approach these two focus areas from the optic of language teachers in adult education settings. This framing allows the authors to peel back the often unstated assumptions about language that are settled into health literacy and language as a social determinant of health research and practice. The authors conclude by exposing six myths about language and healthcare while at the same time exemplifying the underlying theoretical perspectives of applied linguistic scholarship.

Chapter 2 reviews sociolinguistic studies that shed light on language, public health, and healthcare. After introducing the field of sociolinguistics and its turn from a focus

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on distribution to a focus on mobility, Dalia Magaña shows how sociolinguistic research informs efforts to promote health equity with a particular focus on Spanish-speaking communities in the United States. Her approach covers issues related to languages in contact during the clinical encounter, the role of language in COVID-19 health communication, and issues around language access in the wider health delivery system. The chapter concludes by offering practical advice for working against language prestige, promoting local language, and creating more equitable healthcare for minoritized language speakers.

Chapter 3 extends the focus on sociolinguistics to the analysis of illness narratives across multiple genres including oral, written, and graphic. Roxana Delbene draws on theoretical insights from sociolinguistics, literary studies, and graphic medicine to shed light on our understanding of illness narratives as they emerge in their local context and as they circulate in different contexts. She begins by tracing the development of thinking around illness narratives and pointing out different traditions rooted in testimonial narrative and pathography. She proposes a communicative-oriented view of illness narratives that considers the target audience, the message, and the communicative intent in order to glean the intrinsic value of each genre. Her approach draws on the key applied linguistics notion of communicative affordances as a way of grasping the import of illness narratives across traditions.

Chapter 4 provides a linguistic anthropological lens to language, public health, and healthcare to shed light on bordering and debordering practices in health through a multiple case study approach. Melo, Fleuriet, Pezzia, and Robertson contend that language is a key operator in boundary-making and that geopolitical, social, political, and economic borders are made and remade through linguistic practice. Using three case studies focusing on undocumented patients with end-stage renal disease in South Texas, indigenous Maya struggling with addiction in the Guatemala highlands, and LGBTQ patients with anal cancer in Chicago, the authors draw on Bruno Latour's bordering theory to highlight the role of performative, communicative practices in healthcare settings in reinscribing, rejecting and creating boundaries between people, objects and bodily conditions that shape health and healthcare experiences.

Finally, Chapter 5 brings an applied linguistics perspective to key issues in public health and healthcare such as health literacy and plain language. Holly Jacobson traces the history of applied linguistic incursions into public health and outlines the various methodologies that have borne fruit in this endeavor. The chapter highlights the contributions of conversational analysis, interactional sociolinguistics, discourse analysis, first and second language acquisition, and text and genre analysis to these efforts. Together, these five chapters lay out key theoretical insights that inform the intersection of language, public health, and healthcare. Applied linguistics, sociolinguistics, and anthropological linguistics have a long history of engagement with public health and healthcare. In this section, readers will appreciate this history of engagement and glean the theoretical insights that enrich our understanding of language in public health and healthcare.