

Limited English proficiency tied to worse access to health care

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In adults, limited English proficiency (LEP) is associated with worse



access to care, according to a study published online July 26 in the *Journal of General Internal Medicine*.

Natalia Ramirez, M.P.H., from the American Cancer Society in Atlanta, and colleagues examined associations between LEP and access to care in adults. The analysis included adult participants in the Medical Expenditure Panel Survey (2014 to 2018) with (18,908 individuals) and without (98,060 individuals) LEP.

The researchers found that adults with LEP younger than 65 years of age were significantly more likely to lack a usual source of care (adjusted odds ratios [aOR], 2.48); not have visited a medical provider (aOR, 2.02); and be overdue for receipt of preventive services, including a blood pressure check (aOR, 2.00), cholesterol check (aOR, 1.22), and colorectal cancer screening (aOR, 1.58), compared with adults without LEP. Similar results were seen for adults aged 65 years and older.

"System-level interventions, such as expanding access to <u>health insurance</u> <u>coverage</u>, providing language services, improving provider training in cultural competence, and increasing diversity in the medical workforce may minimize barriers and improve equity in access to care," the authors write.

More information: <u>Abstract/Full Text (subscription or payment may be required)</u>

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