Title VI of the Civil Rights Act
Language Access to Health Care

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Demographics

- Among people aged 5 and over, 47.0 million (18 percent) spoke a language other than English at home.

- The number of people who spoke a language other than English increased between 1990 and 2000.

- Almost 11 million people, 4.2% of the U.S. population, speak English “not well” or “not at all.”

- 21 million, 8.1%, speak English less than very well.

*US Census Bureau. Census 2000
LEP Individuals

- Limited English Proficient (LEP) individuals cannot speak, read, write, or understand the English language at a level that permits them to interact effectively with English speakers.

- Do not know how to access various benefits and services for which they are eligible.

- Are excluded from programs or experience delays/denials of services
LEP Individuals

- Receive care based on inaccurate or incomplete information.
- A LEP individual who is seeking health treatment might be:
  - Turned away,
  - Forced to find his/her own interpreter (often a family member or friend),
  - Forced to wait or come back when an interpreter is available,
  - Might not comeback to a second appointment,
  - Might not adhere to treatment,
  - Might not be able to appropriately transmit his/her necessary information to the health care provider.

Minorities & Mental Health

- 1 in five Americans have a diagnosable mental illness (NIMH).
- Rates of mental illness in minority populations are the same as in the Caucasian population at 22.1%.
- “Minorities face greater disability burden not necessarily because the illnesses are more severe but because of the barriers they face in terms of access to care”
  
  SG Report of Culture, Race & Ethnicity.
Title VI

- Title VI was enacted as part of the landmark Civil Rights Act of 1964.
  - Section 601 states: "No person in the United States shall on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."

- This includes discriminations based on an individual’s ability to speak and/or understand English.

Title VI

- Is very broad in scope and affects all areas of government administration.
- Provides that funds shall be withheld from any institution and program recipient of Federal financial assistance which continues to discriminate in violation of this law.
- Any individuals or groups aggrieved by the non-compliant agency can file a complaint against the agency.
HHS Guidelines

- In 2000 President Clinton issued Executive Order 13166: Improving Language Access to Services for LEP persons.
  - Federal agencies providing financial assistance to nonfederal institutions had to publish guidance on language access issues.
    - HHS revised guidelines in 2004

Language Access Services

- Include trained on-site interpreters, telephone interpreter lines, materials in other languages, bilingual staff, volunteer trained interpreters.
- Language services only cost an extra 0.5% of the average cost per visit.
- Significantly decrease ER visits.
- “Increasing access to services may lead to cheaper, more targeted early intervention, avoiding long-term and more costly services to government and society” (OMB, 2002)
Benefits

- Opponents of Title VI raise issues of cost as a principle area of concern. In actuality, different studies have suggested that the overall benefits outweigh any costs.
  - The overall benefits outweigh any costs.
  - “The benefits of Title VI implementation are not easily quantifiable in dollar amounts but that they are significant.”

Benefits

- Access to care
- Better communication
- Adherence to treatment
- Increased patient satisfaction
- Decrease medical costs
- Decrease unnecessary emergency room usage
- Decrease medical errors
- Improved health
- Informed consent
Implementation Status

Commonwealth Fund 2001 Health Care Quality Survey:

- 1 of 3 Latinos and 1 of 4 Asian Americans have problems communicating with their doctors.

- Access to language interpreters is limited.

- Among non-English speakers who said they needed an interpreter during a healthcare visit, fewer than one-half (48 percent) said they always or usually had one.

Implementation Status

- Title VI has not been fully implemented.
- For example:
  - A 2005 NCLR study of the DC Department of Human services found substantial differences in overall treatment impacting negatively Spanish speaking individuals.
    - LEP individuals were less likely to get documents and information in Spanish.
    - Only 20% of Spanish speakers received appropriate treatment in comparison with 60% of English speakers.
    - Visits of Spanish speakers lasted 11 hours and 10 minutes in comparison to 4 hours and 30 minutes for English speakers.
Implementation Status

- DHHS has not thoroughly enforced Title VI.
- The Office of Civil Rights at HHS has responsibility to assure compliance.
  - OCR focuses on voluntary compliance and TA
  - In 1999 the US Commission on Civil Rights criticized OCR’s lack of success.
- Office lacks resources.

State Financing for LA Services

- In 2000 the Health Care Financing Administration (Now CMS) stated that federal Medicaid and SCHIP funds could be used for language activities and services.
- Each state determines if and how it will provide reimbursement for interpreters.
States Directly Reimbursing Providers for Language Services

- Hawaii
- Idaho
- Kansas
- Maine
- Minnesota
- Montana
- New Hampshire
- Utah
- Washington

Trained Interpreters

- Federal funding is available through MEDICAID to help states and providers pay for these services.
- 58% of patients polled by the Asian Health Services reported that they would not see a physician if interpreting services were not available.
Contact Information

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