Health care satisfaction appears higher among new immigrants, survey shows

Hispanic patients who speak little English grade their treatments more highly than other patients, possibly because they have more deferential attitudes toward physicians.


Another wrinkle has emerged in the developing medical literature on patient ratings of care. Hispanic immigrant patients who have limited English proficiency and in other ways demonstrate a lack of assimilation into American culture give doctors higher satisfaction grades than patients who are white or black, or than Hispanics who have lived in the U.S. longer.

Researchers from the University of Illinois College of Medicine in Chicago surveyed 881 patients receiving care at four outpatient family medicine clinics. In addition to reporting demographic information, Hispanic patients completed a 12-item language proficiency scale that also measures psychometric properties. While 291 white patients gave their physicians an average grade of 8.8 on a scale of 10, the 303 black patients surveyed gave them a 9. Nearly 200 assimilated Hispanic patients, categorized as “biculturated,” handed out an average grade of 9.1. Ninety of the less-assimilated Hispanic patients, dubbed “unacculturated” by researchers, rated their doctors an average 9.7 out of 10.

“When you come from another country, you’re probably more deferential and you try not to displease people with what you say,” said Memoona Hasnain, MD, PhD, lead author of the study. “While you’re not exactly happy with the care you’re getting, you’ll rate it higher.”

The findings came as somewhat of a surprise, given that a large body of research has documented that patients with limited English proficiency have more trouble communicating with physicians and other health professionals and are at greater risk for adverse events in the outpatient and inpatient settings. The American Hospital Assn. has argued that patients’ race, education and income levels affect their care ratings and that Medicare’s value-based purchasing initiative should adjust performance-based pay rates based on those factors.

The study, published Oct. 4 in the Journal of Immigrant and Minority Health, should give policymakers, researchers and physicians pause when they consider how recent immigrants evaluate the care they receive, Dr. Hasnain said.

“Ratings of care, particularly when looking at patients with less acculturation, need to be taken with a pinch of salt,” said Dr. Hasnain, associate professor and director of research in UIC’s Dept. of Family Medicine. “If there are overall higher ratings from populations such as the one we’re looking at, we need to look at it more carefully and tailor our data collections and processes to make sure the information we’re receiving is valid and accurate.”

Exercises help black patients’ communication with physicians

Regardless of how minority patients grade their care, racial and ethnic disparities in health outcomes have persisted during the past decade, according to reports from the federal Agency for Healthcare Research and Quality. One strategy intended to reduce these disparities by improving communication between black patients and nonblack physicians appears to have some efficacy, according to an Archives of Internal Medicine study published in November.

Before seeing their doctors, 99 black patients with hypertension completed so-called values affirmation exercises. These are surveys in which respondents select life values — such as religion, humor, music and athletics — that are most important to them. They also are asked to write about their values. Such exercises have been shown to cut the racial gap in academic achievement by nearly half by reducing respondents’ fears of stereotyping, the study said.

In this case, the patients who completed the exercise as intended had better communication with their physicians, talking more frequently and having what researchers deemed more interactive and respectful encounters. “This early study suggests that values affirmation can be a useful means of improving the experience of health care visits for African-American patients,” the researchers wrote.

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