



DECEMBER 2022

Rates of Limited English Proficiency in Counties with Critical Access Hospitals

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KEY FINDINGS

- Close to 200 U.S. counties that have at least one Critical Access Hospital (CAH) have significant language diversity, with at least 5% of residents estimated to have limited English proficiency (LEP).
- While the majority of U.S. residents with LEP report Spanish as their primary language, there is significant language diversity across the U.S., including in counties with CAHs.

PURPOSE

The ability of patients to communicate with their health care providers and other hospital staff is crucial for seeking quality, informed care. Previous research has shown that limited English proficiency (LEP) often leads to communication barriers in accessing the health care system and is associated with disparities in access to health care,^{1,2} utilization of services,^{2,3} and clinical outcomes.^{4,5}

While it is commonly assumed that rural areas are monolithic, lacking diversity in race, ethnicity, and language, many rural counties are becoming increasingly diverse.⁶ The purpose of this analysis is to describe the rates of LEP throughout counties containing at least one Critical Access Hospital (CAH), in order to more accurately quantify the language needs of these communities.

APPROACH

Data for this report were taken from the American Community Survey (ACS) 2019 five-year estimates (2015-2019) for the number of individuals per county with LEP. ACS participants were asked to identify the languages they spoke and then rate their own ability to speak English: “Very well,” “Well,” “Not well,” or “Not at all.” The U.S. Census Bureau defines a person with LEP as any individual who is at least 5 years old, speaks English in addition to at least one other language, and reports their English ability as anything other than “very well.”⁷

ACS data from all U.S. counties with at least one CAH as of December 31, 2021 were included for this analysis. Out of 3,142 total counties in the U.S., 1,147 counties contained at least one CAH and were matched with the corresponding ACS data using county Federal Information Processing System (FIPS) codes.



RESULTS

Figure 1 depicts the county-level data on LEP within counties containing at least one CAH. Counties without a CAH are depicted in grey, while all counties with CAHs are shaded along a gradient corresponding to the percentage of their population estimated to have LEP. This has been grouped into four levels corresponding to: fewer than 1 percent, between 1 and 5 percent, between 5 and 10 percent, and greater than 10 percent of the population. Darker hues correspond to a larger share of the population with LEP.⁷

In the vast majority of all U.S. counties (90%), the proportion of the population with LEP is less than 10%. This analysis found that among the 1,147 counties in the U.S. with at least one CAH operating in 2021, 197 counties were estimated to have at least 5% of their population with LEP and 76 counties were estimated to have at least 10% population with LEP.

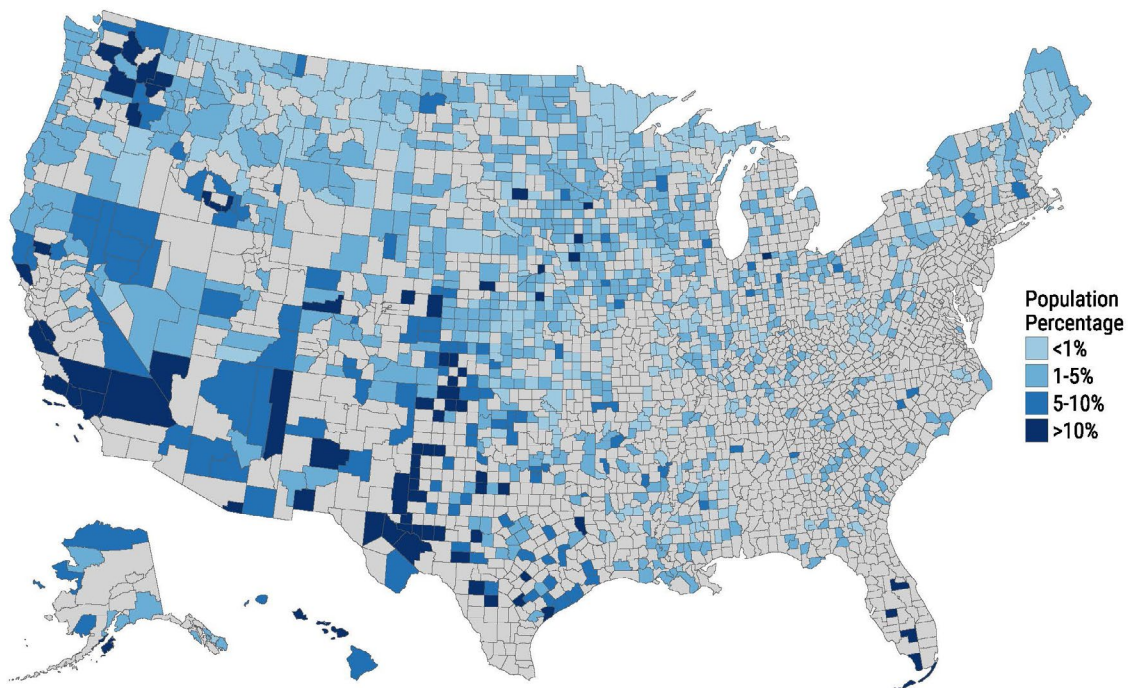
An overwhelming majority of the population with LEP in the U.S. reported speaking Spanish as their primary

language, but there are also 20 counties with CAHs where at least 5% of foreign language speakers with LEP report a primary language other than Spanish. Other common languages spoken in these counties include Navajo and other Native North American languages, Japanese, Tagalog, Vietnamese, Chinese, and German.

CONCLUSION

Many rural communities have diverse populations with a multitude of non-English languages represented throughout the country. This analysis reinforces that there are rural communities within the U.S. with a significant share of the population with LEP. It also highlights important considerations for providing language interpreter services in CAHs. Previous research has indicated the relationships between availability of language interpreting services and better health care outcomes.^{4,5} This analysis suggests that such services need to be tailored to local needs, and based on demographic data and language preferences unique to specific communities.

FIGURE 1: Percentage of population with LEP in U.S. counties with CAHs





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This report was completed by the Flex Monitoring Team with funding from the Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services (HHS), under PHS Grant No. U27RH01080. The information, conclusions, and opinions expressed in this document are those of the authors and no endorsement by FORHP, HRSA, or HHS is intended or should be inferred.