

Arizona Complete Health (AzCH) infuses language access in everything we do and at all points of entry. AzCH works to advance language access so that all have fair and just health equity opportunities to attain their highest level of health and independence regardless of preferred language, cultural diversities, and all other factors that affect access to health care and health outcomes<sup>1</sup>. AzCH acknowledges that focusing on improving, maintaining, and sustaining strong language skills is essential to promoting health equity by enabling clear communication between health and care providers and members from diverse backgrounds. Sustaining strong language skills further enhances healthcare access and literacy which improves member engagement. Addressing and removing language barriers in health and care is a critical step towards achieving health equity and improving the overall well-being of populations.

According to research<sup>2</sup> language skills, particularly vocabulary knowledge, can remain largely intact throughout a person's life, meaning they are "valid" for a very long time, even if not actively used regularly; studies have shown that individuals can recall significant portions of a language they learned years ago when needed, with a slight decline in fluency only occurring with very limited exposure and practice over extended periods.

Best practice tells us that maintaining the highest level of language skills is critical as Arizona's population grew by more than 7 million in 2020, up 11.9% since 2010. The Arizona population grew by more than 250 thousand in 2023, up approximately 4% and up approximately 0.89% from 2022. Arizona continues to become more diverse. According to the U.S. Census Bureau (2024) domestic migration served as the leading cause of Arizona population growth.

## Language Access as a Social Determinate of Health (SDOH)

- Language access refers specifically to the ability of individuals to communicate with healthcare providers in their preferred language (inclusive of interpretation and translation), whereas SDOH encompasses a broader range of social factors like income, education, housing, and environment that significantly impact a person's health outcomes.
- Language as an SDOH factor:
  - Language barriers are recognized as a significant SDOH, meaning that limited language proficiency can directly affect a person's access to healthcare and overall health outcomes.
  - Language barriers hinder care when patients cannot understand their health and care providers due to language differences, it can lead to poor health outcomes, missed appointments, and decreased trust in the system.
- Addressing language access within SDOH initiatives:
  - Healthcare organizations aiming to address SDOH often include strategies to improve language access as a critical component of providing equitable care.
  - Having strong language skills in interpretation and utilizing qualified interpreters for members with LEP is essential for promoting health equity and quality care.
- Cultural Competency:
  - Beyond language fluency, understanding cultural nuances can further enhance communication and patient care.
  - Understand cultural characteristics and nuances so you can convey the speaker's message respectfully.

## Strong Language Skills and Culturally & Linguistically Appropriate Services (CLAS) Standards

Strong language skills identify a certified fluency in speaking and understanding a language, focusing primarily on linguistic competency without considering or integrating cultural nuances involved in communication. Whereas CLAS standards are a broader concept that includes strong language skills as one component within a wider framework for culturally sensitive care<sup>1</sup>. CLAS Example: An interpreter with strong language skills in Spanish can communicate with a Spanish-speaking member while understanding the member's cultural beliefs and tailoring communication accordingly.

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<sup>1</sup> Think Cultural Health, 2025

<sup>2</sup> Language Teaching Research Quarterly, 2020

## Best Practice-Guidance: Language Skills Retention (interpretation-translation)

Scholars<sup>3</sup> have identified the following best practice-guidance regarding important factors influencing language retention and maintaining language skills.

### Level of Proficiency

### Frequency of Use

Higher levels of fluency attained initially will generally be retained better over time. Practice regularly and look for opportunities to learn and grow. You can practice by interpreting content like podcasts, news broadcasts, TED Talks, and interviews in different languages. Have a strong command of both the source language and the target language.

Regular practice and exposure to the language are crucial for maintaining fluency. Be able to read, write, and speak clearly in the languages you're working with. Use mnemonic devices and other techniques to improve your memory retention.

### Motivation and Engagement

A strong desire to maintain language skills can significantly impact retention. Pay attention to the speaker's voice, intonation, pace, and structure. Practice with feedback from experienced colleagues or mentors.

### Key points about facial expressions and body movement

**Conveying emotions and tone:** Facial expressions can convey a wide range of emotions like happiness, sadness, anger, surprise, and even question-marks or emphasis, like how intonation works in spoken language.

**Grammatical functions:** In some sign languages, specific facial expressions can also indicate grammatical elements like tense, negation, or questions.

**Body movement and context:** Body posture, head tilts, and eye gaze can further enhance the meaning of a sign by adding context or indicating the direction of a concept.

**Example:** A simple hand gesture could mean "interesting" with a neutral expression, but by raising the eyebrows and tilting the head slightly, it can be interpreted as a question, "Are you interested?".

### Retention Efforts

Candidates that are borderline to the cut scores (or the minimum passing threshold) should be tested every 1-2 years to ensure their language skills have not fallen.

Candidates performing at a high level of proficiency need to be tested less, if at all depending on their level of frequency-motivation-engagement. Even at this level candidate should always be mindful of how comfortable they are with the language and their skills.

At a level 10 and higher (nearly fluent-advanced+) the candidate is a fluent or near fluent speaker and would not lose the skills even if the language is not used very often.

At a level 8-9 (general level) the candidate needs to use the language often to be able to stay at the level expected.

Aside from developing the skillset of professional interpreters, continued education is required to be recognized as a certified medical interpreter. Recertification is required every 5 years for medical interpreters, as stated by the National Board of Certification for Medical Interpreters.

## Terms & Definitions

### Interpretation

### Translation

Spoken or sign language in real time.

Is focused on written materials.

### Language Access

### Limited English Proficiency (LEP)

Means that people who don't speak English very well or at all, are able to use and benefit from a wide range of services. Is important because it allows people to access services like education, legal services, and health care. For example, members need to be able to communicate with their care team(s) in a language they prefer and understand to avoid confusion about their diagnosis, treatment, or prescription.

Is a term used to describe people who have a limited ability to speak, read, write, or understand English, and who do not speak English as their primary language. LEP can be due to a person's culture or place of birth.

<sup>3</sup> American Association for Applied Linguistics, 2025