Making medical communication accessible to all: A translator's perspective

Ana Sofia Correia
Freelance medical translator and writer
Lousã, Portugal

Correspondence to:
Ana Sofia Correia
ana@anasofiacorreia.com

Abstract

Language barriers in healthcare can put patients at risk, leading to misdiagnoses, delays in treatment, and exclusion from clinical trials. Clear communication requires cultural adaptation to ensure patients understand and trust the information they receive. Professional medical translation plays a key role in preventing errors. A smart approach to language access can make healthcare more inclusive and efficient. Investing in better communication helps patients follow treatment plans, reduces health disparities, and builds trust. By making language access a priority, healthcare providers can ensure that every patient, no matter their native language, gets the care they need.

Imagine the panic of rushing your child to the hospital during a medical emergency – perhaps they have a dangerously high fever, severe breathing difficulties, or a sudden allergic reaction. You expect immediate, life-saving care. But upon arrival, you face an unexpected and overwhelming obstacle: no one at the hospital speaks your language.

You try to explain your child's symptoms, medical history, and any allergies, but the doctors and nurses don't understand you. They attempt to communicate using gestures, fragmented phrases, or even a translation app that struggles with medical terminology. The stress of the emergency is compounded by the fear that something critical will be lost in translation – and that fear quickly becomes reality.

Now, imagine you have been diagnosed with a severe, life-threatening condition. Standard treatments have failed, and your best hope is an experimental therapy in a clinical trial. The study offers a promising, cutting-edge treatment. However, when you try to enrol, you are excluded – not due to medical ineligibility, but because the trial's materials, including informed consent forms, patient instructions, and follow-up assessments, are only available in the local language. There are no translation services, no multi-lingual support, and no accommodations for non-native speakers.

Consider a global crisis, such as a pandemic, where clear and timely communication is crucial. Governments, health organisations, and companies rush to release safety guidelines, prevention measures, and testing instructions to the public. However, when this life-saving information is translated using unsupervised AI translation without human oversight, the consequences become dangerously clear – misinterpretations, misinformation, and preventable harm.

These are not hypothetical scenarios. These are real risks faced by patients worldwide due to inadequate language support in healthcare settings. The need for professional language services is critical to ensuring accurate communication between healthcare providers and patients, safeguarding health and well-being.

Language barriers in healthcare can lead to life-threatening consequences, making professional translation services essential for patient safety and effective treatment.

> Language barriers in healthcare can lead to life-threatening consequences, making professional translation services essential for patient safety and effective treatment.

Why should healthcare speak your language?

Effective communication in healthcare empowers patients to engage actively in their treatment, leading to improved health outcomes and higher satisfaction with care. When patients understand medical instructions – facilitated by materials in their native language – they are more likely to adhere to prescribed treatments and communicate openly with healthcare providers, fostering a trusting relationship that benefits both parties.[1]

Beyond individual patient care, ensuring language accessibility enhances healthcare efficiency. However, despite the growing recognition of the need for quality patient information in native languages, health disparities persist among populations with limited access to translated materials. Many patients encounter barriers that lead to poorer health outcomes, underscoring the urgency for inclusive strategies that bridge these gaps. Without accessible language support, patients may rely on family members or online tools, increasing the risk of misinterpretation and medical errors.[2]

Patients who do not speak the local language often face delays in care, misunderstand diagnoses, and struggle to follow treatment plans. Implementing targeted language access strategies can help healthcare systems bridge these gaps, creating a more equitable patient experience.

By prioritising accessible, high-quality healthcare communication, we can improve patient outcomes, reduce disparities, and foster trust between patients and healthcare providers.[3]

How do we make healthcare information culturally relevant, not just translated?

Health beliefs, perceptions of illness, and attitudes toward medical interventions vary widely across cultures, shaping how patients interpret symptoms, treatments, and preventive care.[4] Direct translation alone is often insufficient – without proper cultural adaptation, even well intended health messages can lead to misunderstanding, distrust, or non-adherence to treatment plans.

By prioritising cultural adaptation in medical translation, healthcare providers can improve patient education, support treatment adherence, and build trust in medical interventions. Aligning translated materials with local expectations and healthcare realities significantly enhances the effectiveness of health communication.[5]

Cultural adaptation involves understanding health perceptions, using appropriate tone and language, adapting medical terminology, and incorporating culturally relevant visuals. This ensures that information is not only accurate but also meaningful and actionable for diverse patient populations. By prioritising multilingual health resources, organisations can bridge language gaps, improve patient engagement, and ultimately enhance global health equity.[6] (Table 1).

How do we make sure medical translations are accurate every time?

Ensuring accuracy in medical translations requires a structured, multistep review process. A well-defined workflow minimises errors, enhances clarity, and improves the overall effectiveness of patient communication. The Translation, Editing, and Proofreading (TEP) model is a widely accepted best practice that ensures quality at every stage of translation.[7]

By implementing a robust, multistep review process, organisations can safeguard accuracy, clarity, consistency, as well as compliance with local regulations and ethical standards. Whenever possible, usability testing with native speakers helps validate patient-facing materials before distribution.

> By prioritising accessible, high-quality healthcare communication, we can improve patient outcomes, reduce disparities, and foster trust between patients and healthcare providers

Photo: freepik

How do we make language access affordable without cutting corners?

Implementing language services requires a strategic balance between quality, cost, and efficiency. While comprehensive multilingual support is ideal, budget and time constraints often limit what can be immediately achieved. However, a well-planned translation strategy ensures that essential language services remain sustainable, efficient, and impactful.

> A well-planned translation strategy ensures that essential language services remain sustainable, efficient, and impactful.

1. **Prioritise high-impact materials**
   - Focus on translating documents that directly affect patient care and compliance, such as informed consent forms, discharge instructions, emergency department signage, and medication guides.
   - If full translation is not feasible, start with core materials and expand based on patient needs, risk factors, and available funding.

2. **Optimise translation workflows for efficiency**
   - Plan translation workflows in advance to allow sufficient time for review, quality assurance, and regulatory compliance checks.
   - Standardise processes across departments to streamline translation efforts and prevent duplicated work.
   - Assign dedicated project managers to oversee translation requests, standardise terminology, and ensure timely execution.

Table 1. Making medical information culturally relevant: Key considerations and approaches

Key consideration	Approach
Understand cultural perceptions of health and illness	Messaging should be crafted in a sensitive and unbiased way to encourage patient engagement without reinforcing stigma or fear.
Ensure culturally appropriate language and tone	Some cultures favour a direct, authoritative tone from medical professionals, while others prefer a more collaborative, patient-centred approach. Content should be adapted accordingly to build trust and engagement. Certain idiomatic expressions, metaphors, or humour used in health education materials need careful adaptation and localisation to maintain clarity and relevance
Adapt medical terminology to local use	Even when a language is shared across multiple regions (e.g., Portuguese in Portugal vs. Brazil), medical terminology and common usage can differ. Additionally, some medical terms have direct translations that are technically correct but may not be commonly understood. Ensuring local adaptations avoids confusion and enhances patient understanding.
Use visuals that reflect the target audience	Including diverse representations in patient education materials helps foster inclusivity. Patients are more likely to trust information that visually reflects their community and lifestyle. Imagery, colours, and symbols should align with cultural expectations. For example, white represents mourning in some Asian cultures, while it symbolises cleanliness in Western contexts.
Adapt educational materials to different literacy levels	Many patients, even in developed countries, have low health literacy. Using plain language principles ensures that materials are clear, concise, and actionable. Instead of long paragraphs, use bullet points, numbered steps, and infographics to present critical health information. Visual adaptations should also consider literacy levels, ensuring that pictograms, icons, and step-by-step illustrations are intuitive and support comprehension.
Align with local healthcare policies and medical practices	Healthcare protocols, treatment guidelines, and healthcare systems vary between countries. Translated materials should accurately reflect the medical landscape of the target region. Consent forms, prescription instructions, and discharge summaries should comply with both legal requirements and patient expectations in each country. Materials should reflect these norms to ensure patients feel comfortable engaging with their care.
Provide digital and print accessibility	Not all patients have reliable internet access or the ability to navigate digital health portals. Providing printed versions of translated materials ensures accessibility for older patients, rural populations, and those without digital literacy. For digital formats, ensuring text-to-speech compatibility and mobile-friendly design enhances usability for diverse populations.
Train healthcare providers on cultural sensitivity	Even the best-translated materials cannot replace culturally competent healthcare providers. Training programmes that teach providers how to use these materials effectively and communicate across cultural boundaries improve overall patient care.
Gather feedback from native speakers and patients	The most effective way to ensure cultural appropriateness is to involve local healthcare professionals, patient advocates, and community representatives. Conducting usability tests and gathering real-world patient feedback can reveal hidden barriers and provide insights for continuous improvement.

Table 2. Best practices for medical translation

Key strategy	Best practice
Prioritise clarity over literal accuracy	Use plain language principles to make medical information more digestible, avoiding complex jargon where possible. A technically correct translation may not always be understandable to patients. Instead, messages should be clear, simple, and patient-friendly. Provide alternative phrasing or explanatory footnotes for medical terms that may not have a widely recognised equivalent in the target language.
Advocate for early involvement in content development	Engage translators from the outset rather than at the final stage of content production. This minimises the need for extensive revisions later. Implement a collaborative workflow where all stakeholders work together to ensure the content is structured in a way that facilitates translation.
Emphasise contextual and cultural understanding	Consider literacy levels, medical practices, and attitudes toward healthcare in the target audience's community. Localise examples, recommendations, and treatment references to align with regional norms and accessibility.
Encourage continuous improvement and feedback loops	Engage with healthcare providers and patient advocacy groups to gather feedback on translated materials. Identify terms or phrases that may be confusing and refine accordingly. Regularly update translations to align with evolving guidelines and advancements in healthcare and communication.
Monitor and continuously improve AI outputs	Perform regular audits of AI-translated content to identify common errors and areas for improvement. Evaluate AI performance using feedback from healthcare professionals, patients, and linguists to refine translation quality.

3. **Develop reusable translation assets**
- Create pre-approved, frequently used multi-lingual templates for common patient materials, such as appointment reminders, discharge instructions, and medication guides.
- Structure content in modular, reusable segments to minimise redundant translation work.
- Maintain an updated glossary of standardised medical terminology to ensure consistency across translations.

4. **Leverage AI-assisted translation with human oversight**
- AI-powered translation tools can assist with handling large volumes of content, thus accelerating workflows and reducing costs. However, human editing remains essential to ensure medical accuracy and cultural appropriateness.
- Consider using a tiered approach:
  High-priority materials: Invest in full professional human translation for critical medical documents like patient safety materials, informed consent forms, and emergency guidelines.

Moderate priority materials: Use AI-assisted translation with human post-editing for patient education materials and general healthcare guidance.

Low-priority materials: For internal use or administrative documents, AI translation with minimal human review may be sufficient, helping scale efforts while keeping costs down.

5. **Monitor performance and adjust strategies**
- Track key metrics such as patient satisfaction, reduced miscommunication incidents, and compliance improvements to evaluate the effectiveness of translation efforts.
- Identify which translated materials are most frequently used and address existing language gaps to refine future translation priorities.
- Regularly revisit translation strategies to maintain cost-efficiency while ensuring accessibility.

A translator's perspective: Some final recommendations

As a freelance medical translator, I have witnessed first-hand the challenges of making patient information technically accurate and accessible to diverse audiences. (Table 2).

> Engaging skilled medical translators ensures that patient materials are not only linguistically accurate but also culturally appropriate and patient-friendly.

Quality patient information in native languages is not a convenience – it is a fundamental component of patient safety, empowerment, and equitable healthcare access. Prioritising language accessibility is essential for a more inclusive and effective healthcare system. Engaging skilled medical translators ensures that patient materials are not only linguistically accurate but also culturally appropriate and patient-friendly.

To conclude, I invite you to read the March 2024 issue of this journal on Translation [https://journal.emwa. org/translation/] which explores the transformative role of translation in advancing medical communications and improving access to healthcare. Lastly, I leave you with a reflection: Medical translation is essentially medical writing, but in another language.

Cirsten Verleger/ EMWA Creative Team.

Disclosures and conflicts of interest

The author declares no conflicts of interest.

References

1. Geyer C. Empathy and language in the clinician–patient relationship: improving the translation of evidence to practice. Am J Health Promot. 2021;35(4):590–2. doi:10.1177/ 08901171211002328b

2. Ellahham S. Communication in health care: impact of language and accent on health care safety, quality, and patient experience. Am J Med Qual. 2021;36(5):355–64. doi:10.1097/01.JMQ. 0000735476.37189.90

3. Squires A. Strategies for overcoming language barriers in healthcare. Nurs Manage. 2018;49(4):20–7. doi:10.1097/01. NUMA.0000531166.24481.15

4. Institute of Medicine (US) Committee on Health Literacy. Culture and society. In: Nielsen-Bohlman L, Panzer AM, Kindig DA, editors. Health literacy: a prescription to end confusion. Washington (DC): National Academies Press (US); 2004 [cited 2025 Apr 18].

5. European Centre for Disease Prevention and Control. Translation is not enough – Cultural adaptation of health communication materials: A five-step guide. Stockholm: ECDC; 2016. doi:10.2900/40099

6. Bombard Y, Baker GR, Orlando E, et al. Engaging patients to improve quality of care: a systematic review. Implement Sci. 2018;13:98. doi:10.1186/s13012-018-0784-z

7. International Organization for Standardization. ISO 17100:2015 – Translation services – Requirements for translation services. Geneva: ISO; 2015. Available from: https://www.iso.org/standard/59149.html

Author information

Ana Sofia Correia is a medical translator and writer with 18 years of experience. She collaborates with life sciences companies and medical communication agencies, writes the *Perspectives on Medical Translation & Writing* newsletter, co-authors the *Med & Mark* blog, and runs the Medical Translation Mentoring programme. She currently serves as Vice-President of the Portuguese Medical Writers Association (APMW) and Marketing Manager of Women in Localisation Portugal Chapter. Within EMWA, she leads the Translation Enthusiasts' subgroup of the MedComms Special Interest Group while editing the Gained in Translation section of *Medical Writing*.

iD 0009-0003-8213-4108