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**Identification of Medical Interpreter Services in Primary Care in
Atlanta Metropolitan Area**

by

Huong Tran

B.A. Furman University

**A Capstone Submitted to the Graduate Faculty of Georgia State University in Partial
Fulfillment of the Requirements for the Degree**

MASTER OF PUBLIC HEALTH

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Abstract

Background: Over 73,000 refugees entered the U.S. in 2010. The majority of the refugee population has limited English proficiency (LEP), which is a challenge for those seeking healthcare. People with LEP are often deterred by language barriers from seeking healthcare. Interpreter services are available in some healthcare settings to help improve the communication between physicians and these patients. The availability of interpreters at primary care offices could help encourage the utilization of health services among patients with LEP.

Objectives: To identify primary care offices that provide medical interpreter services in areas around the city of Clarkston, GA. To produce a reference sheet that identifies primary care doctors and the languages available for interpretation at those offices.

Methods: Data on the availability of medical interpreter services was collected through the phone. Google Map was used to identify public transit routes (bus/train) and time to travel from the center of Clarkston to the medical offices.

Results: Less than 50% of family practice, internal medicine, and pediatric offices provide medical interpreter services. It was found that the most common languages available for interpretation are Vietnamese, Spanish, and Mandarin. Interestingly, the current refugee populations arrive from various regions in Africa and Asia. The common languages among these groups are Bhutanese, Burmese dialects, and Farsi. The offices that provide interpreter services with languages relevant to the current refugee population are located more than 30 minutes of travel time by public transit from the center of Clarkston.

Keywords: refugee health, medical interpreter services, geographical information system (GIS), limited English proficiency (LEP), health literacy

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Chapter I

Introduction

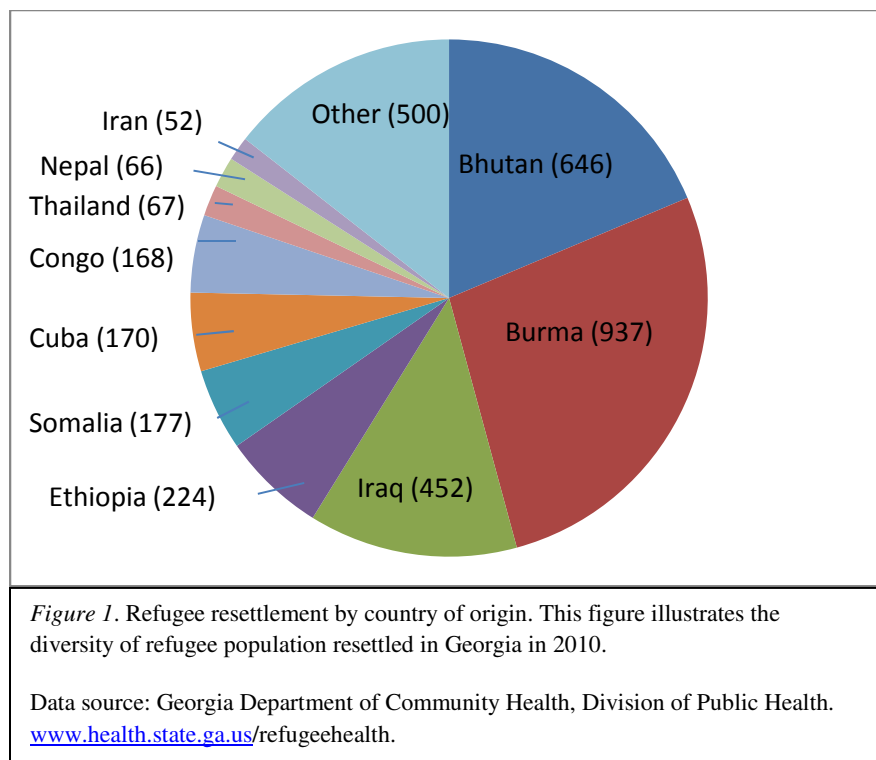
In 2010, more than 73,000 refugees entered the country (United States Office of Refugee Resettlement, 2012). According to the Office of Refugee Resettlement, Georgia received over 4% of newly arrived refugees in 2010, making it one of the top five states to receive one of the largest shares of incoming refugees. Overtime, the U.S. has seen a continual change in refugee demographics that reflects contemporary regional, political, and economic events. The changes in the makeup of the refugee population over the years have contributed to the growing population diversity in a number of cities and states across the country.

Noticeable changes in the refugee demographics were observed in the 1990s and early 2000s when the largest share of refugees were made up of people from countries in Southeast Asia and Eastern Africa. Prior to the 1990s there was a large influx of refugees from Eastern Europe (Singer & Wilson, 2007). Today, the refugee demographics have changed again and refugees from South Asia and the Middle East constitute the largest share of the refugee population in the country (Barnett, 2006). Once resettled in the U.S. health care becomes a priority for refugees and immigrants.

Refugees can have significant health problems that require treatment after resettling in the host country. Today refugees entering the U.S. carry a greater burden of non-communicable diseases and chronic conditions that require extensive treatment and

care (Ward, 2012). From a public health perspective, primary care should be the first point of contact for ill individuals seeking healthcare. Primary care physicians provide diagnosis and can refer patients to the appropriate health care specialists for treatment. However, accessing primary care is a problem for many refugees due to limiting factors such as differences in language and cultural beliefs and low health literacy (Eckstein, 2011). Miscommunication between patients and healthcare providers can lead to misdiagnosis and discourage them from seeking care.

The purpose of this project is to create a reference guide that can help refugees with limited English proficiency (LEP) to easily identify primary care services that provide medical interpreter services. The city of Clarkston was chosen for this study because it has been a resettlement site for some of the largest groups of refugees entering Georgia since the 1980s. The city claims that over 60 languages are spoken by its diverse group of resettled habitants, which makes up approximately 31% of the city population (City of Clarkston, 2012). While having access to healthcare is particularly important for newly arrived refugees who need immediate care, many of the arriving refugees and immigrants experience difficulty in accessing health services due to the limitation in English proficiency. The current incoming groups of refugees originate from countries in South Asia, East Africa, and the Middle East (Figure 1).



Chapter II

Literature Review

Health Literacy

Health literacy plays a major role in influencing the health of every person. The ability to comprehend health information and communicate with health care providers is essential in helping patients make well-informed decisions on the care of their health. It is important that patients understand health information such as medical instructions, the content of consent forms, and basic health care materials. This understanding is an indicator of an individual's proficiency in health literacy. Recent focus on health promotion has identified health literacy as an important factor in influencing individual health behavior.

Health promotion requires people to not only know where to seek health services but also to understand health information that includes health risks and treatment options. However, it has been found that many Americans are struggling with low health literacy. Health literacy is defined as “the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions” (United States Department of Health and Human Services, 2013). Being proficient in health literacy means that patients are more equipped to navigate and search for health information that can help them select the appropriate treatment (Cho, Lee, Arozullah, & Crittenden, 2008). In addition to being able to find the right health care providers and health services

needed, patients also need to be able to communicate with those providers and understand instructions for home care. The National Center for Education Statistics (NCES) began assessing the nation's health literacy for the first time in 2003 by including questions on various health topics into the National Assessment of Adult Literacy (NAAL). The NAAL assesses three kinds of health literacy among American adults 16 and older: prose, document, and quantitative. The assessment determines an individual's ability to read and understand printed materials (prose), whether individuals have a clear understanding of consent forms for medical treatment (document), and whether individuals understand instructions given for medication (quantitative), such as one tablet twice a day for 30 days. The assessment is categorized into four levels: below basic, basic, intermediate, and proficient. The 2003 NAAL results show that approximately 14% of American adults had below basic health literacy, 22% had basic health literacy, 53% had intermediate health literacy, and 12% had proficient health literacy (U.S. NCES, 2006). In addition, while the findings show that high levels of educational attainment are associated with proficiency in health literacy, it is indicated that adults who did not learn English before starting school had lower health literacy than adults whose first learned language was English.

Low health literacy affects the health behaviors and outcomes of patients in many ways. People who have low health literacy are less likely to seek preventative screenings (Nielsen-Bohlman, Panzer, & Kandig, 2004) and adhere to treatment plans if they do not understand the importance in maintaining their health (Weiss, 1999). In fact, people with low health literacy have poorer health than people with high literacy (Cho et al., 2008;

DeWalt, Berkman, Sheridan, Lohr, & Pignone, 2004). Low health literacy also influences people's ability to make decisions. In order to choose the right treatment for them, people must understand the risks of diseases and their treatment options. People who do not understand the risk of diseases may not seek proper treatment in a timely manner. Individuals with low health literacy are at risk for having poor health because they do not understand the risk of diseases and when under physician's care have trouble following instructions for treatment.

Low health literacy, which affects various segments of the population within the U.S., is commonly found among the elderly, people of lower socio-economic status, people without a high school education, and people with LEP (Rudd, 2007; Sentell & Braun, 2012). Individuals with LEP are burdened by the fact that they cannot communicate effectively with their physicians. Not being able to search for the right information or understand information that is given either in print or online is a disadvantage that many immigrants and refugees have in addition to not being able to communicate with physicians. People with LEP have little general knowledge of health or how to access health care and information (Sentell & Braun, 2012). With limited English proficiency, patients have a difficult time asking questions to explore treatment options. Working with the LEP population that has low health literacy requires health care professionals to take into consideration the cultural context (background) of their patients and engage the help of medical interpreters.

Limited English Proficiency as Language Barriers

An individual with LEP is identified as a person who speaks a language other than English at home and has limited ability to speak, write, and read English (Rosenbaum, 2004). The U.S. Census (2003) found that in the year 2000 approximately 47 million people, or 18% of the American population, reported they spoke a language other than English at home. This number consisted of individuals who spoke English “very well” and those who were limited in English proficiency. The census further identified 11.9 million linguistically isolated people who were not proficient in English and had no household member over the age of 14 who could speak English “very well.” Limited English proficiency creates language barriers in the communication between an individual and people in his/her environments. The problem of language barriers is a prevalent problem with newly arrived refugee and immigrant populations.

Language barriers have a profound effect on vulnerable populations that could lead to poor health outcomes (Derose & Baker, 2000). Language barriers are a limiting factor for patients with LEP seeking healthcare and contribute to disparities in refugee health because they restrict the health behavior of these individuals (Derose & Baker, 2000). Challenges in the communication between physicians and patients with LEP can discourage these patients from seeking healthcare, thus leading to low utilization of health services (Shi, Lebrun, & Tsai, 2009). In addition, the barriers may also lead to poor quality and outcome of care (Smith, 2010).

Patients with LEP are protected from discrimination under Title VI of the Civil Rights Act of 1964. This legislation extends to protect patients with LEP from being denied health care. Healthcare agencies or programs that receive federal funding assistance through programs such as Medicare and Medicaid are required by law to provide language assistance for patients with LEP (“Title VI, Prohibition Against National Origin Discrimination,” 2004).

Medical Interpreter Services

Language barriers can be overcome with the help of interpreters. Interpreter services in healthcare settings come in two forms: trained and ad hoc. While trained interpreters obtain formal training on medical terminology and professional ethics and standards to help individuals with LEP communicate with their doctors, ad hoc interpreters serve without any training. People with LEP often rely on family members and friends who are more advanced at speaking and understanding English to be ad hoc interpreters at medical appointments. Bilingual staff members at medical offices, including nurses and office assistants, can also serve as interpreters for patients and doctors. Often times, these staff members are ad hoc interpreters. Interestingly, a study by Moreno, Otero-Sabogal, and Newman (2007) found that only 1 in 5 bilingual staff members did not have the necessary skills to provide accurate interpreter services, while citing that bilingual staff interpreters’ lack of training on medical interpretation can contribute to medical errors. Even so, this may allow bilingual staff to be the preferred choice over family and friends for interpreter services.

Aside from the availability of interpreters, the quality of interpretation is a major concern. Given that the quality of interpretation depends mostly on the training of the interpreter, services by ad hoc interpreters may be suboptimal compared to trained interpreters. Undesired consequences may include compromised quality of the interpretation that would eventually impact the medical diagnosis of patients with LEP (Flores et al., 2003; Derosé & Baker, 2000). Mistakes due to misinterpretation can contribute to medical errors and misunderstanding between physicians and patients with LEP. Despite the need to have language interpreters in the healthcare setting, currently there are no federal standards to regulate certification of medical interpreters (Chen, Youdelman, & Brooks, 2007).

Impact of Medical Interpreter Services on Health Care

The use of trained medical interpreters has been shown to increase the utilization of health services among persons with LEP. Jacobs et al. (2001) found that there is a positive association between care-seeking and the use of interpreter services among patients with LEP. Similarly, Morrison, Wieland, Cha, Rahman, and Chaudhry (2012) found that with the help of trained medical interpreters, Somali immigrants and refugees were more likely to seek preventive health services and follow-up to complete medical treatment. Trained interpreters help improve clinical care for patients by providing accurate interpretation of the patients' symptoms to allow physicians to provide correct diagnosis and treatment options (Karliner, Jacobs, Chen, & Mutha, 2007). On the other hand, the use of ad hoc interpreters, i.e. family members and bilingual office employees,

has been found to have mixed results. While issues such as language proficiency and professional ethics (confidentiality and privacy) are major concerns in using ad hoc interpreters, Gray, Hilder, and Donaldson (2011) found that physicians were generally satisfied with the help of family members at office visits for minor problems such as cough or cold. However, when compared to trained interpreters, ad hoc interpreters are more likely to contribute to physicians' medical errors due to their unfamiliarity with medical terminology (Flores et al., 2003).

Theoretical Approach

The Structural Model of Health Behavior is the appropriate theoretical approach to be used in studying factors that affect access to healthcare. According to the model, health behaviors are influenced by environmental factors that belong to four categories: physical structures, social structures and policy, media and cultural influences, and accessibility/availability (DiClemente, Salazar, & Crosby, 2013). Physical structures play an important role in influencing health behaviors, such as physical activity. The existence and types of structures in the environment can encourage behaviors that promote good health or contribute to health problems. Furthermore, health behaviors can be encouraged or discouraged by public policies that are supported by local organizations and communities. With the fast dissemination of information and images through the media nowadays, people's perception of health can be easily influenced and reinforced by what is reported on social media in addition to the news. The Structural Model of Health Behavior explains that, in the case of refugees' health, accessibility and availability of

medical interpreter services are two factors that influence healthcare utilization of refugees. In theory, having more access to health services encourages the positive behavior of utilizing those available services. For refugees who have low general and health literacy, seeking health care depends mainly on the availability of interpreter services at medical offices. Without the help of interpreters, communication between refugees and physicians can be challenging. As a result, refugees with LEP will most likely be discouraged to seek care.

The utilization of health services by refugees is affected by the accessibility of primary care offices that offer medical interpreter services. Accessing healthcare can be challenging for refugees due to distance and travel time. Transportation is a major factor in care-seeking for refugees, because many people rely on public transportation to move around. Primary care offices with interpreter services may not always be conveniently accessible by public transit due to the location or travel time of the offices.

Medical interpreters play an important role in helping patients with LEP to have equal access to healthcare and help reduce health disparities for this population. Studies (references) have shown that medical interpreter services reduce the language barriers between individuals with LEP and physicians and encourage patients to continue to seek healthcare. While using bilingual employees and family members as interpreters is a more convenient option, the quality of interpretation in healthcare settings can only be ensured with trained medical interpreters. Nonetheless, the availability of any form of

interpreter services helps lessen the language barriers between physicians and patients with LEP.

Chapter III

Methodology

Introduction

Geographical information system (GIS) is used widely in the study of health to capture, store, analyze, and manage data in order to identify relationships among health factors in the environment (Boulos, 2004). There are abundant tools and techniques in GIS that allow for it to be applied in public health research in various ways. Through research, GIS has been used to visualize patterns of health conditions across geographical locations at even the county level. Health studies have used GIS to examine access to health care for vulnerable populations such as seniors, refugees, and people with chronic health conditions (Ben-Harush, Carroll, & Marsh, 2012; Shaikh, 2008; Ganapati, Ganapati, Rosa, & Rojas, 2010). Additionally, GIS could be used to study health-related situations such as the analysis of traffic accidents and route planning for public transportation. GIS was an integral part of this capstone project.

Participants

This capstone focuses on identifying reliable routes refugees can use to travel to primary care offices that provide interpreter services. The refugees are centrally located in the city of Clarkston. A list of medical offices located in the Atlanta metropolitan area was obtained from Reference USA website (<http://www.referenceusa.com/>). The list was cleaned to exclude any offices that were not primary care. Offices that identified as

internal medicine, family practice, pediatrics, and OB/Gyn were included as primary care providers. Phone contact was made with the following providers: family practice (N=121), internal medicine (N=62), pediatrics (N=83), and OB/GYN (N=76) offices.

Data Collection

Data was collected through the phone. Information on the reference USA website for some offices was outdated and Google search was used to obtain the current address and phone number. In some cases no current contact information could be found, and those offices were excluded as the result. Hospitals and private primary care offices were also included. Offices that identified as specialty where patients needed physician's referral to schedule an appointment were excluded. The questions that were asked of the providers are included in the Appendix.

Data Analysis

In the next step, Google Map was used to identify the bus and/or train routes that travel to the target offices. Directions to primary care offices were routed from the center of the city of Clarkston. Specific information such as refugees' addresses was not used due to concern of privacy. Next, ArcGIS, a GIS software used for analyzing data, was used to map the location of primary care practices providing medical interpreter services. The distance based on travel times between the center of Clarkston and the primary care offices were visualized using ArcGIS. Different symbols were used to represent each

type of primary care offices. Offices were categorized according to the travel time intervals: less than 15 minutes, 16-30 minutes, 31-45 minutes, and more than 45 minutes.

Limitations

Several challenges were met when contacting the medical offices. First, the list of offices did not contain the most updated contact information for some; some practices either relocated or had closed. A Google search using the name of the practices was included to obtain the current contact information. Second, some offices refused to participate while others were not aware of the policy on interpreter services for their office. Third, residential addresses were not used when mapping public transit routes from Clarkston to medical offices. This could potentially influence the travel time and distance results for individuals living in large cities. However, this was not a major factor for the residents of Clarkston due to the city's small size (1.1 square mile).

Chapter IV

Results

A total of 342 primary care offices accessible by public transit were contacted through the phone survey. Of this number 161 offices provide interpreter services. Nearly 39% of family practice offices, 40% of internal medicine offices, 41% of pediatrics offices, and 51% of OB/GYN offices offer interpreter services. The remaining 181 primary care offices do not provide interpreter service and suggest that patients bring personal interpreters.

Even though nearly half of the offices in each category of primary care provide interpreter services, only 22% of this number was able to provide interpreters fluent in the languages of the current refugee groups. The most common languages among the current refugees are Bhutanese, Burmese dialects, and Farsi. However, the survey found that only two hospitals working with language agencies could provide interpreters for these languages. The majority of private primary care practices have bilingual employees who speak mainly Vietnamese, Spanish, Chinese, or Korean. While the bilingual employees may be professionals in their work fields, they are not adequately trained to provide interpretation with the same standards and quality as trained medical interpreters. In addition, it is difficult to determine whether bilingual employees are proficient to provide accurate interpretation of the medical terminology. The availability of

interpreters at these offices depends on the diversity of the office staff. Patients are also welcome to bring family members or friends as interpreters.

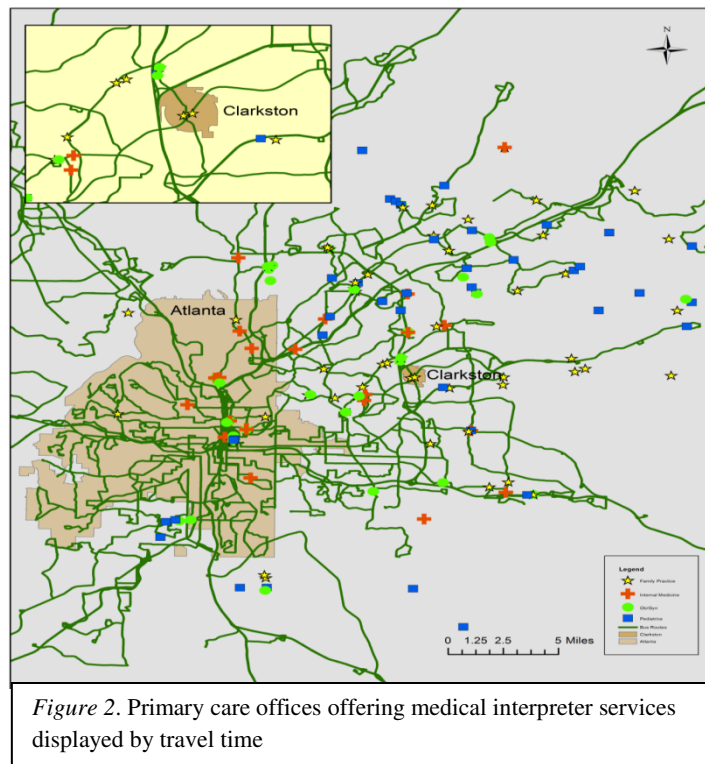
Table 1

Description of Availability of Medical Interpreter Services (MIS) in Family Practice, Internal Medicine, Pediatrics, and OB/Gyn Offices

Type of Practice (Total)	Offices providing MIS & accessible by public transportation	Languages available (# of providers)
Family Practice (121)		
<15 travel minutes	5	Spanish (4), Vietnamese (2), French (2), Ethiopian (2), Eritrean (2), Hindi (2), Punjabi (2), Gujarati (2), Farsi (2), All (2)
16-30 travel minutes	3	Korean (1), Mandarin (1), Vietnamese (1), Farsi (1)
31-45 travel minutes	10	Spanish (7), Burmese dialect (1), Farsi (1), Arabic (1), Bosnian (1), Polish (1)
>45 travel minutes	29	Spanish (21), Mandarin (11), Vietnamese (11), Hindi (10), Farsi (9), Cantonese (9), French (7), Portuguese (7), Persian (7), Punjabi (8), Gujarati (7), Arabic (7), Urdu (7), Russian (7), Korean (7), All (6)
Internal Medicine (62)		
<15 travel minutes	1	All
16-30 travel minutes	3	Spanish (3), Burmese dialect (1), Hindi (1), Arabic (1), Urdu (1)
31-45 travel minutes	2	Hindi (2), Persian(1), Punjabi (1), Hmong (1)
>45 travel minutes	19	Spanish (18), Vietnamese (10), Burmese dialect (10), Arabic (10), Portuguese (10), French (10), Creole (10), Laotian (10), Ethiopian (10), Mandarin (10), All (9),
Pediatrics (83)		
<15 travel minutes	1	All
16-30 travel minutes	0	None
31-45 travel minutes	4	Spanish (3), French (2), Creole (2), Vietnamese (2), Mandarin (2), All (1)
>45 travel minutes	29	Spanish (29), Vietnamese (6), Urdu (5), Portuguese (5), Thai (5), Mandarin (5), French (5), All(4)
OB/Gyn (76)		
<15 travel minutes	1	All
16-30 travel minutes	5	Spanish (4), Hindi (3), Arabic (3), Punjabi (3), Urdu (3), All (2)
31-45 travel minutes	2	Spanish (2), All (1)
>45 travel minutes	31	Spanish (30), Portuguese (7), Hindi (7), Vietnamese (7), Mandarin (7), French (6), Korean (6), Gujarati (6), Urdu (6), All (5)

*MIS= medical interpreter services

It was found that hospitals and big healthcare practices work with language agencies that can provide trained interpreters for almost any languages at no additional charge for the patients. Smaller private primary care practices rely on untrained bilingual office employees to help interpret for patients with LEP. It was observed that these offices are scattered throughout the eastern Metro-Atlanta area, and the pattern of each type of offices differs from each other (Figure 2). Internal medicine offices are mainly located closer to the center of Atlanta, whereas pediatric and family practices are concentrated in the north and eastern areas outside of Clarkston. There is a more balanced dispersal of OB/Gyn practices in areas surrounding Clarkston.



Subsequently, the travel times to the medical offices are divided into four time intervals (Figure 3): less than 15 minutes, 16-30 minutes, 31-45 minutes, and more than 45 minutes. Approximately 1% of each type of primary care offices is located within 30 minutes of travel time. While there is no pediatric office located within 30 minutes of travel time from Clarkston, approximately 91% of the offices require more than 45 minutes of travel time. Approximately 75%, 64%, and 88% of internal medicine, family practice, and OB/Gyn offices, respectively, can be reached with more than 45 minutes of travel.

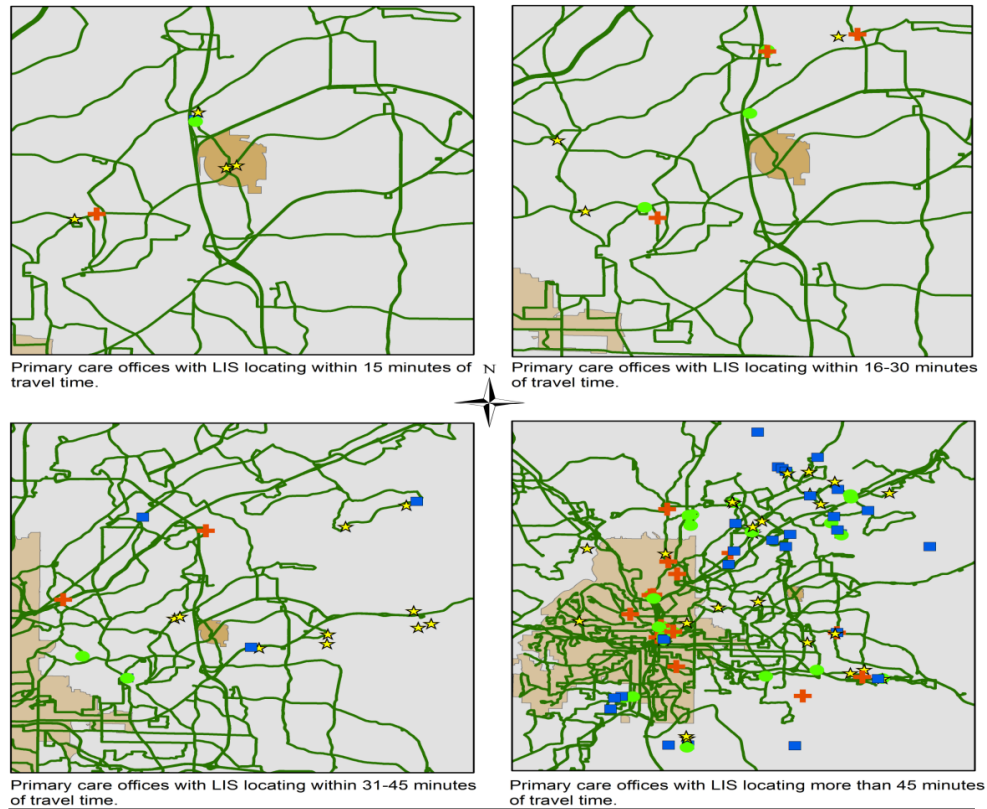


Figure 3. Primary care offices offering medical interpreter services displayed by travel time

A reference sheet was created to include doctors or practice names, office number, address, languages available for interpretation. The medical offices are categorized according to their specialty, i.e. family practice, internal medicine, OB/Gyn, and pediatrics.

Chapter V

Discussion and Conclusion

Discussion of Results

The final product of this capstone is a compilation of primary care practices that offer interpreter services. A reference sheet was produced to be distributed to resettlement agencies and their clients. The reference sheet serves as a resource that helps individuals with LEP to quickly identify primary care offices that can provide MIS. As discussed in earlier sections, language barriers can lead to lower quality of care and poorer health outcome for patients with LEP. Reducing language barriers makes it easier for patients with LEP to seek care and treatment from their primary care doctors when needed.

The data shows that approximately 47% of primary care offices surrounding the city of Clarkston provide medical interpreter services through either trained or ad hoc interpreters, which indicates that there is a shortage of medical interpreter services within primary care to serve a growing community of refugees in Clarkston and possibly the surrounding cities. In addition, less than half of the medical offices providing interpreter services have languages available for interpretation relevant to the current incoming groups of refugees.

Many of the small private offices from the survey rely on ad hoc interpreters, which is a concern of professional ethics and language proficiency. As discussed earlier,

more medical errors are committed with the use of ad hoc interpreters. While ad hoc interpreters help reduce the language barriers between physicians and patients with LEP, medical providers should not be complacent in relying too much on the interpretation of bilingual office employees and family members. Findings of underutilization of interpreter services at private primary care offices and an under-representation of languages of the current refugee groups arriving in the U.S. in this study correspond with similar findings made by Kale and Syed (2010). In fact, Ramirez, Engel, & Tang (2008) have found that even medical interpreter services in health settings such as the emergency department are underused. It is possible that this trend of underutilization of interpreter services is also common in other U.S. cities where refugees are resettling.

The location of primary care offices that provide language assistance is a concern that has also been observed. The majority of practices offering interpreter services are located more than 45 minutes of travel time from the center of Clarkston. In fact, a few offices are located outside of MARTA's bus and train networks, making it impossible for people without cars to reach them. Overall, there is a shortage in the number of primary care practices that offer interpreter services within 30 minutes of travel distance and the number of trained interpreters who can serve the incoming populations of refugees from various countries in South Asia and the Middle East.

Conclusion and Recommendations

There is a need to link primary care practices with medical interpreter services to provide effective care for the refugee population. Having interpreter services available at primary care level is critical in the effort to prevent and treat minor illnesses within a vulnerable population such as the refugees. In addition to making interpreter services available in more medical practices, having certified medical interpreters could improve the quality of the interpretation. Finally, recruiting and training interpreters who speak the languages of the current refugee populations is also critical in meeting the linguistics needs of the groups. While it has been shown that interpreter services are positively associated with the increase in utilization of health services, there is not a clear understanding whether the availability of this type of service has any impact on the health status of refugees. Future research should aim to track and compare the changes in health in those who use interpreter services. For instance, researchers can replicate studies on primary health care by using GIS to assess access to healthcare and identify patterns of health outcomes in relation to the utilization of interpreter services to better inform policies on language assistance programs (Samarasundera et al., 2012).

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APPENDIX

Appendix A

Questions for participating primary care offices

1. Is this a primary care office?
2. Does this office provide interpreter services?
3. If yes, what languages are available for interpretation?
4. Is there a fee for interpretation services?
5. Is the interpreter an office employee or a trained interpreter?

Appendix B

Reference of Primary Care Doctors with Interpreter Services

This reference serves the purpose of helping individuals with limited English proficiency to find physicians with medical interpreter services. This reference sheet includes only primary care practices that provide medical interpreter services nearby the city of Clarkston. It contains information such as name of practice, address, telephone, time travel by MARTA, and the languages available for interpretation. Users should make sure the chosen office has interpreter services available in their language before scheduling an appointment.

The list of doctors is color-coded and divided into four types of primary care:

Family practice- **Orange**

Internal medicine- **Blue**

Pediatrics- **Green**

OB/Gyn- **Red**

This reference is available for use by resettlement agencies and limited English proficient individuals.

Hướng Dẫn Tiềm Kiểm Bác Sĩ Có Phục Vụ Thông Dịch

Tờ hướng dẫn này đáp ứng mục đích tiềm kiểm văn phòng bác sĩ có thông dịch viên để giúp cho những người không nói được tiếng Anh ở gần thành phố Clarkston. Tờ hướng dẫn này không bao gồm những văn phòng bác sĩ không có phục vụ thông dịch. Tờ hướng dẫn gồm có tên của văn phòng bác sĩ, số điện thoại, thời gian cần để đi xe buýt MARTA tới văn phòng, và những thứ tiếng có thể thông dịch ở tại văn phòng. Quý vị nên làm hẹn với những văn phòng có thông dịch viên nói tiếng của quý vị.

Danh sách có tên văn phòng bác sĩ đã được chia ra bốn loại và màu:

Bác sĩ gia đình- **Màu cam**

Bác sĩ nội khoa- **Màu xanh**

Bác sĩ khoa trẻ em- **Màu lục**

Bác sĩ phụ khoa- **Màu đỏ**

Family Practice with Medical Interpreter Services

NAME	PHONE	ADDRESS	CITY	STATE	ZIP	TRAVEL TIME (Min)	LANGUAGE
Greater Atlanta Family Health	404-298-9333	3700 Market St # C	Clarkston	GA	30021	1	Spanish, Ethiopian, Eritrean
Clarkston Family Medical Center	404-299-7534	3603 W Hill St	Clarkston	GA	30021	4	Vietnamese, Spanish, French
Northlake Family Medicine	770-493-1800	1462 Montreal Rd # 107	Tucker	GA	30084	13	Spanish, Hindi, Punjabi, Gujarati, Farsi
Decatur Clinic	404-501-2900	2665 N Decatur Rd	Decatur	GA	30033	15	Any
La Vista Primary Care	770-270-0290	4865 Lavista Rd	Tucker	GA	30084	25	Vietnamese
First Medical Care	770-934-6832	2536 Lawrenceville Hwy	Decatur	GA	30033	35	Farsi, Arabic
Oakhurst Medical Center	404-298-8998	770 Village Square Dr	Stone Mountain	GA	30083	37	Spanish
Dharmaraj Patil PC	404-292-8335	1829 Lawrenceville Hwy	Decatur	GA	30033	47	Any
Acupuncture Clinic	404-325-1023	2199 N Decatur Rd # 3	Decatur	GA	30033	28	Mandarin, Korean
La Vista Family Medicine	404-320-6050	2910 N Druid Hills Rd NE # A	Atlanta	GA	30329	29	Farsi
Jafar Tabatabai MD	770-469-8874	1037 Third St	Stone Mountain	GA	30083	34	Bosnian
Stone Mountain Medical Ctr	770-469-4131	809 Main St	Stone Mountain	GA	30083	39	Spanish
Stone Mountain Family Medicine	404-296-8858	1183 S Hairston Rd # A	Stone Mountain	GA	30088	52	Spanish, Hindi
Lbe Inc Living Better Every	404-288-5700	4319 Covington Hwy # 115	Decatur	GA	30035	71	Any
Emory Clinic	404-778-8600	4153 Flat Shoals Pkwy	Atlanta	GA	30322	121	Any
William C Dedo DO	770-925-1515	5354 Highway 29 NW	Lilburn	GA	30047	34	Spanish
Aaron J Hupman MD	770-925-4200	354 Arcado Rd NW # 1	Lilburn	GA	30047	34	Spanish
Georgia Clinic	770-469-2208	2300 W Park Place Blvd # 122	Stone Mountain	GA	30087	36	Spanish
Stone Mountain Family Practice	770-469-7000	1805 Parke Plaza Cir # 101	Stone Mountain	GA	30087	36	Spanish
Rockbridge West Park Med Assoc	770-413-1300	2256 Rockbridge Rd	Stone Mountain	GA	30087	38	Spanish
Fulton County Health (Grady)	404-616-4307	99 Jesse Hill Jr Dr SE	Atlanta	GA	30303	46	Any
Anne Lang Dunlop MD	404-778-6920	69 Jesse Hill Jr Dr SE # 402	Atlanta	GA	30303	47	Any

Evergreen Primary Care Pc	770-216-8668	2505 Chamblee Tucker Rd # 110	Atlanta	GA	30341	51	Cantonese
Dae Sung Health Clinic	678-547-3810	2505 Chamblee Tucker Rd # 104	Chamblee	GA	30341	51	Korean
Buford-Norcross Primary Care	770-246-6100	777 W Peachtree St	Norcross	GA	30071	52	Vietnamese, Mandarin, Cantonese
Atlanta Prime Med	770-451-1146	5008 Buford Hwy # A	Chamblee	GA	30341	56	Mandarin, Spanish
Kimberly Nguyen MD	770-248-9345	5955 Jimmy Carter Blvd	Norcross	GA	30071	58	Vietnamese, Spanish
Truc T Pham MD	678-367-0390	3985 Steve Reynolds Blvd #K102	Norcross	GA	30093	58	Vietnamese, Spanish
Dr. Li's Family Care	770-451-9940	3576 Shallowford Rd NE # A	Chamblee	GA	30341	61	Mandarin, Spanish
Prompt Medical Care	770-457-5556	5461 Buford Hwy NE	Atlanta	GA	30340	62	Mandarin, Spanish, Cantonese
Isioma T Okobah MD	770-323-6458	2505 Panola Rd # A	Lithonia	GA	30058	65	French
Snapfinger Woods Family Practice	770-981-0600	5040 Snapfinger Woods Dr # 108	Decatur	GA	30035	70	Spanish
Highland Urgent Care & Family	404-815-1957	920 Ponce De Leon Ave NE	Atlanta	GA	30306	72	Spanish, Farsi
Moin Kazi MD	770-455-8285	4480 N Shallowford Rd # 200	Dunwoody	GA	30338	76	Punjabi, Farsi, Russian
Lawrence Lutz MD (Emory Family Medicine)	404-727-8868	4555 N Shallowford Rd # 100	Dunwoody	GA	30338	77	Any
Georgia Family Care	678-205-4999	5900 Hillandale Dr # B	Lithonia	GA	30058	78	Spanish, Hindi
Perimeter Clinic	678-904-5611	3867 Roswell Rd	Atlanta	GA	30342	79	Spanish, Farsi
Sharmila Ramprasad MD	770-447-5551	5261 Buford Hwy # 130	Norcross	GA	30071	89	Spanish, Hindi, Portugese
Raymond D Ho MD	678-966-9886	5696 Peachtree Pkwy	Norcross	GA	30092	89	Mandarin
Physicians Immediate Med	770-263-1000	3720 Holcomb Bridge Rd	Norcross	GA	30092	102	Spanish
Family Practice Center	404-256-1727	993 Johnson Ferry Rd NE # 210	Atlanta	GA	30342	108	Spanish
Gwinnett Family Medical Care	770-979-1818	3725 Zoar Rd	Snellville	GA	30039	0	Spanish
Perisseia Physicians LLC	770-682-2024	1655 Lebanon Rd	Lawrenceville	GA	30043	0	Spanish
Gwinnett Clinic	770-995-5695	1740 Lawrenceville Hwy	Lawrenceville	GA	30044	0	Spanish
Mahon Family Medicine	770-925-2526	1786 Oak Rd	Snellville	GA	30078	0	Vietnamese
Duluth Family Medical Clinic	678-417-1588	4855 River Green Pkwy	Duluth	GA	30096	0	Mandarin, Spanish

Parkview Family Medicine	770-622-1730	2550 Pleasant Hill Rd	Duluth	GA	30096	0	Korean
Hightower Medical & Dental	404-794-0014	2645 Bankhead Hwy NW	Atlanta	GA	30318	76	Hindi, Punjabi, Gujarati
Uni Medical	404-477-0849	4575 Jonesboro Rd	Forest Park	GA	30297	101	Vietnamese, Spanish
Piedmont Physicians Group	770-437-4200	3020 Paces Mill Rd SE	Atlanta	GA	30339	124	Any
Vina Healthcare Corp	404-366-8824	4487 Jonesboro Rd	Forest Park	GA	30297	125	Vietnamese, Spanish

Internal Medicine Offices with Medical Interpreter Services

NAME	PHONE	ADDRESS	CITY	STATE	ZIP	TRAVEL TIME (min)	LANGUAGE
Emory Clinic Northlake	404-778-6400	2801 N Decatur Rd # 295	Decatur	GA	30033	12	Any
Izabella Verbitsky MD	678-495-2100	2179 Northlake Pkwy # 101	Tucker	GA	30084	22	Spanish
Richardson Health Center	404-294-3731	445 Winn Way	Decatur	GA	30030	25	Spanish, Burmese, Hindi, Arabic, Urdu
Community Care	678-720-0422	5019 Lavista Rd	Tucker	GA	30084	26	Spanish
Montreal Internal Medicine	770-938-9761	1462 Montreal Rd	Tucker	GA	30084	14	Any
Georgia Clinic at Corp Square	404-634-1556	3 Corporate Blvd NE # 130	Atlanta	GA	30329	40	Hindi, Farsi
Premier Family Clinic	770-493-6767	3646 Chamblee Tucker Rd	Atlanta	GA	30341	43	Spanish, Hindi, Punjabi, Hmong
Yohannes A Belachew MD	404-477-1218	3490 Clairmont Rd NE	Atlanta	GA	30319	61	Spanish, Ethiopian
Redan Hairston Internal Medicine	404-297-1818	4850 Redan Rd	Stone Mountain	GA	30088	66	Spanish
Linda C Couture MD	404-686-8181	50 Peachtree St NW # 7	Atlanta	GA	30303	46	Any
James K Van Buren MD	404-686-8182	550 Peachtree St NE # 7 Mot	Atlanta	GA	30308	57	Any
Ronald C Bookhart MD	770-322-2716	5440 Hillandale Dr	Lithonia	GA	30058	60	Any
Faye Moye B Riley MD	770-322-3211	5440 Hillandale Dr	Lithonia	GA	30058	60	Any
Kaufmann Clinic	404-881-9727	550 Peachtree St NE # 1700	Atlanta	GA	30308	60	Spanish
Joseph Smiddy MD	404-265-4922	285 Boulevard NE # 545	Atlanta	GA	30312	63	Spanish
Lonnie C Jenkins MD	404-265-1235	315 Boulevard NE # 516	Atlanta	GA	30312	67	Spanish
Jean J Philippe MD	404-748-9006	315 Boulevard NE # 528	Atlanta	GA	30312	67	Spanish, French, Creole
Atlanta Institute of Medicine	404-365-0160	2911 Piedmont Rd NE # E	Atlanta	GA	30305	73	Vietnamese, Spanish, Burmese, Arabic, Portuguese
Carole S Gardner MD	404-364-7000	3495 Piedmont Rd NE	Atlanta	GA	30305	77	Any
Douglas T Gurly MD	404-888-0228	957 W Marietta St NW # C	Atlanta	GA	30318	80	Spanish, Laotian
Piedmont Physicians Group	404-605-4935	2001 Peachtree Rd NE # 400	Atlanta	GA	30309	83	Any
Suzanne M Blausner MD	404-350-7171	105 Collier Rd NW # 5040	Atlanta	GA	30309	86	Any
Piedmont Physicians Group	404-350-3860	105 Collier Rd NW # 1030	Atlanta	GA	30309	86	Any
Grant Park Family Health Center	404-627-4259	1340 Boulevard SE	Atlanta	GA	30315	98	Spanish
Dekalb Medical Physicians Group/ Flat Shoals Internal	404-858-5049	4826 Flat Shoals Pkwy	Decatur	GA	30034	136	Any

Quick Relief Clinic	404-497-9739	275 Carpenter Dr NE # 100	Atlanta	GA	30328	105	Mandarin
River Parc Internal Medicine	678-417-0077	4855 River Green Pkwy	Duluth	GA	30096	0	Korean

Pediatrics Offices with Medical Interpreter Services

NAME	PHONE	ADDRESS	CITY	STATE	ZIP	TRAVEL TIME (min)	LANGUAGE
Dekalb Pediatric Assoc Pc	404-446-4600	1390 Montreal Rd	Tucker	GA	30084	8	Any
Pediatrics Center	404-296-3800	5405 Memorial Dr # D	Stone Mountain	GA	30083	44	Any
Milestone Pediatrics Pc	770-414-0337	1438 Mclendon Dr	Decatur	GA	30033	36	Spanish, Burmese
Rainbow Kids Pediatrics	404-378-1998	755 Commerce Dr # 503	Decatur	GA	30030	31	French, Creole
Briarcliff Pediatrics	770-939-7676	2849 Henderson Mill Rd	Atlanta	GA	30341	48	Spanish
Elma Mera Steves MD	770-938-9401	3624 Chamblee Tucker Rd	Chamblee	GA	30341	51	Spanish
Pediatric Clinic	770-458-3383	3020 Mercer University Dr #100	Chamblee	GA	30341	52	Mandarin, Spanish, French
Children's Medical Group	404-633-4595	1875 Century Blvd NE # 150	Atlanta	GA	30345	60	Spanish
Children's Healthcare at North	404-785-8160	4166 Buford Hwy NE # 1102	Atlanta	GA	30345	67	Any
Redan Hairston Pediatrics	404-297-1818	4850 Redan Rd	Stone Mountain	GA	30088	69	Spanish
Rose Rahman MD	770-935-1515	PO Box 369	Lilburn	GA	30048	0	Spanish
Shinte Liu Pc	770-454-9199	5150 Buford Hwy NE # C200	Doraville	GA	30340	44	Vietnamese, Mandarin, Spanish
Medilag Pediatrics Pc	770-935-0880	3997 Lawrenceville Hwy NW	Lilburn	GA	30047	45	Spanish
Wallace Wilcox MD	404-616-3190	69 Jesse Hill Jr Dr SE	Atlanta	GA	30303	47	Any
David C Kwee MD	404-785-9850	35 Jesse Hill Jr Dr SE	Atlanta	GA	30303	48	Any
Norcross Pediatrics Clinic PC	770-938-6966	4608 Jimmy Carter Blvd	Norcross	GA	30093	49	Vietnamese, Spanish
United Pediatrics	770-717-0033	4775 Jimmy Carter Blvd # 102	Norcross	GA	30093	49	Spanish
Emory University	404-778-1450	49 Jesse Hill Jr Dr SE	Atlanta	GA	30303	49	Any
Bi-County Gwinnett Pediatrics	770-923-6400	976 Killian Hill Rd SW	Lilburn	GA	30047	50	Spanish, Russian
Y H Parikh MD	770-248-0200	6010 Singleton Rd # 209	Norcross	GA	30093	50	Spanish
Magnolia Medical Clinic-Norcross	770-931-1333	1211 Indian Trail Rd	Norcross	GA	30093	55	Spanish
Sai Medical Center	678-421-9700	6185 Buford Hwy	Norcross	GA	30071	59	Spanish
Chamblee's Children's	770-457-3303	3652 Chamblee Dunwoody Rd	Atlanta	GA	30341	71	Spanish

Clinic							
William H Cox DO	770-446-2820	2450 Beaver Ruin Rd # B	Norcross	GA	30071	72	Spanish
Jeralyn S Smith MD	770-670-6100	5700 Hillandale Dr # 150	Lithonia	GA	30058	73	Spanish
La Clinical Del Nino	770-263-9101	3780 Holcomb Bridge Rd	Norcross	GA	30092	126	Spanish, Portuguese
Sugarloaf Pediatrics	678-377-1113	3525 Sugarloaf Pkwy	Lawrenceville	GA	30044	0	Vietnamese, Spanish, Hindi
Kids Doc Pediatrics	770-978-7701	3100 Five Forks Trickum # 204	Lilburn	GA	30047	0	Spanish
Eastside Pediatrics	770-982-0255	2311 Henry Clower Blvd # D	Snellville	GA	30078	0	Spanish
Saturn Pediatrics	770-979-3989	1700 Tree Lane Rd # 160	Snellville	GA	30078	0	Hindi, Russian
Andrew B Adam MD	404-365-0966	3650 Steve Reynolds Blvd	Duluth	GA	30096	0	Any
KIDS First Pediatric Group	770-507-2212	1045 Southcrest Dr # 110	Stockbridge	GA	30281	0	Spanish
We Care Pediatrics	404-766-3337	1422 Cleveland Ave	Atlanta	GA	30344	61	Spanish
Pediatric Place	770-640-8119	9570 Nesbit Ferry Rd	Alpharetta	GA	30022	70	Spanish
Parkway Medical Clinic	404-361-3100	406 Forest Pkwy # A	Forest Park	GA	30297	74	Spanish
M O Tomeh Inc	404-768-3043	1203 Cleveland Ave # 2a	East Point	GA	30344	74	Spanish
Suapsan Singa-Pakdi MD	770-471-4442	3296 Madison St	College Park	GA	30337	83	Spanish, Thai
Julian M Gorvy MD	770-476-9885	5185 Peachtree Pkwy # 330	Norcross	GA	30092	98	Spanish
Southern Crescent Pediatrics	770-389-5500	191 Fairview Rd	Ellenwood	GA	30294	100	Spanish
Children's & Adolescent Med	404-366-3636	4905 Courtney Dr	Forest Park	GA	30297	104	Vietnamese
Jeffrey Abrams MD	770-209-0741	6460 Spalding Dr # D	Norcross	GA	30092	113	Spanish
Holcomb Bridge Pediatrics	770-449-9334	3957 Holcomb Bridge Rd # 100	Norcross	GA	30092	123	Spanish
Kids Choice Pediatrics	678-380-9199	2775 Cruse Rd	Lawrenceville	GA	30044	0	Spanish

OB/GYN Office with Medical Interpreter Services

NAME	PHONE	ADDRESS	CITY	STATE	ZIP	TRAVEL TIME (min)	LANGUAGE
Georgia Multinational Women's	770-621-0870	1370 Montreal Rd	Tucker	GA	30084	7	Any
Southeastern Gynecologic	678-420-4191	1462 Montreal Rd	Tucker	GA	30084	16	Any
Northlake Ob Gyn	770-939-5102	2181 Northlake Pkwy # 120	Tucker	GA	30084	22	Spanish
Atlanta Women's Cancer Care	404-501-7100	2675 N Decatur Rd # 408	Decatur	GA	30033	24	Any
Maria Dourron MD	404-294-4388	2675 N Decatur Rd # 301	Decatur	GA	30033	24	Spanish
Beenal Naik MD	678-904-1150	2675 N Decatur Rd # 604	Decatur	GA	30033	24	Hindi, Gujarati, Arabic, Urdu
Total Women's Health & Wellness	404-593-2739	755 Commerce Dr # 300	Decatur	GA	30030	31	Spanish
Caleb B Kallen MD	404-778-3401	1639 Pierce Dr # 4217	Atlanta	GA	30322	40	Any
Nora M Doyle MD	404-778-3401	69 Jesse Hill Jr Dr SE # 402	Atlanta	GA	30303	46	Any
Fetal Medical Management	770-734-0999	2078 Beaver Ruin Rd	Norcross	GA	30071	47	Spanish
Grace Towns Hamiltons Women's	404-616-4646	80 Jesse Hill Jr Dr SE	Atlanta	GA	30303	47	Any
Raja & Assoc	770-414-4661	4554 Jimmy Carter Blvd	Norcross	GA	30093	49	Spanish, Hindi, Gujarati, Urdu
Clinica De La Mama	770-613-0070	5127 Jimmy Carter Blvd	Norcross	GA	30093	50	Korean, Spanish
Andrea Johnson MD	404-756-1400	75 Piedmont Ave NE # 700	Atlanta	GA	30303	53	Spanish
Dourron Ob/Gyn Assoc	770-458-7074	4961 Buford Hwy # 202	Atlanta	GA	30341	53	Spanish
Jessica C Arluck MD	404-686-8121	550 Peachtree St NE # 900	Atlanta	GA	30308	60	Any
Comprehensive Women's Health Care	404-577-8180	550 Peachtree St NE # 1615	Atlanta	GA	30308	60	Spanish
Beenal Naik MD	404-581-0307	550 Peachtree St NE # 1060	Atlanta	GA	30308	60	Hindi
Women for Women	404-733-6334	1 Baltimore Pl NW # 350	Atlanta	GA	30308	60	Spanish
Ariel Inc	404-584-8428	285 Boulevard NE # 240	Atlanta	GA	30312	64	Spanish
Gerald M Rehert MD	404-681-4300	285 Boulevard NE # 520	Atlanta	GA	30312	64	Spanish
Dekalb Gynecology Assoc	404-288-0746	4229 Snapfinger Woods Dr	Decatur	GA	30035	65	Spanish
Legacy Obstetrics & Gynecology	404-284-3200	4229 Snapfinger Woods Dr	Decatur	GA	30035	65	Spanish
International Women's Health	678-672-4645	5161 Brook Hollow Pkwy # 200	Norcross	GA	30071	68	Spanish, Portuguese
Georgia Center for Female	404-243-7777	2855 Candler Rd # 14	Decatur	GA	30034	71	Spanish
East Atlanta Gynecology Assoc	770-860-8868	5900 Hillandale Dr # 255	Lithonia	GA	30058	72	Spanish, French
Alliance Ob Gyn	404-303-1167	5670 Peachtree Dnwdy Rd #	Atlanta	GA	30342	76	Mandarin, Spanish

1240							
Obstetrics & Gynecology	404-252-1137	975 Johnson Ferry Rd NE # 400	Atlanta	GA	30342	82	Spanish
Sandy Springs Ob Gyn	404-851-9909	980 Johnson Ferry Rd NE # 800	Atlanta	GA	30342	82	Spanish
Jennifer Grace MD	404-355-1285	105 Collier Rd NW # 1080	Atlanta	GA	30309	84	Spanish
Castillo Walters Ob/Gyn	770-730-0451	4488 N Shallowford Rd # 210	Atlanta	GA	30338	87	Spanish
Sharon Bent Harley Pc	678-904-5999	1800 Peachtree St NW # 450	Atlanta	GA	30309	90	Spanish
Heath Ross Graham MD	404-255-3633	295 Peachtree Dunwoody Cir NE	Atlanta	GA	30342	90	Any
Atlanta Women's Specialists	404-252-5196	5445 Meridian Marks Rd NE #350	Atlanta	GA	30342	97	Mandarin, Spanish
Cima	770-246-4446	3780 Holcomb Bridge Rd # D	Norcross	GA	30092	121	Spanish, Portuguese
Life Cycle OBGYN	404-766-8371	2739 Felton Dr	East Point	GA	30344	86	Vietnamese, Spanish
Comprehensive Women's Health	404-767-2536	809 Cleveland Ave SW # 101	Atlanta	GA	30315	97	Spanish
Life Cycle Ob/Gyn	404-766-8373	4990 Phillips Dr	Forest Park	GA	30297	105	Vietnamese, Spanish
Stephen Sudler MD	770-982-4077	1608 Tree Ln	Snellville	GA	30078	0	Any