

Linguistic Concordance and Discordance: Understanding the Francophone Patient Experience during a visit to their Family Physicians’ Office in Northern Ontario

This edition of *Research in FOCUS on Research* presents the Franco-Ontarian patient experience during a visit to their family physicians’ office and the effects of the linguistic concordance or discordance on this experience.

Francophones in Northern Ontario are a linguistic minority who experience poorer health outcomes than the general population. Improving health and health care for this population requires a better understanding of the services offered by family physicians, as well as the communication challenges between patients and family physicians.

A series of focus groups were conducted in the northern Ontario communities of Sudbury, Timmins, Kapuskasing and Hearst. We asked participants to describe chronologically their visit at their family physician’s office by asking the questions "Where does your visit with your family physician start?" and "What happens next?".

To help participants describe emotions during a visit to their family physician’s office, we also provided them with a list of emotions as a reference tool during the focus group.

At the time of the discussion, each participant had a family physician who provided services either in French (linguistic concordance) or English (linguistic discordance).

A total of 29 Francophones participated in the study, 19 of whom had a family physician who offered French-language services (Table 1).

Table 1 : Research Participants

Focus Groups	Communities Visited	Language spoken with Physician	
1	Sudbury	French	3
		English	2
2	Sudbury	French	4
		English	3
3	Kapusking	French	1
		English	2
4	Hearst	French	5
		English	0
5	Timmins	French	4
		English	2
6	Timmins	French	2
		English	1
Total participants			29

This edition of *Research in FOCUS on Research* is written by Chloé F. Jutras. This FOCUS is based on the research project “L’expérience chez le médecin de famille pour des francophones de 35 ans et plus résidents du nord de l’Ontario” from her Master’s in the Interdisciplinary Health Program at Laurentian University through the Centre for Rural and Northern Health Research (CRaNHR) and under the supervision of Alain P. Gauthier, Georges Kpazai and Daniel Côté. This research was funded by the Ontario Ministry of Health and Long Term Care, Health Systems Research Fund (2013-2016). Opinions expressed in this FOCUS are those of the author and do not necessarily reflect those of the funding agencies or organisational bodies.

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The Patient Experience During a Visit at their Family Physicians' office

Patient experience is defined as the series of emotions experienced by participants at specific moments over the course of a visit to their family physicians' office.

Identifying emotions (**positive or negative emotional words or a group of words**) allows us to **capture and understand** the experience of a visit to a family physicians' office. Figure 1 illustrates the various moments which elicited an emotional response from participants.

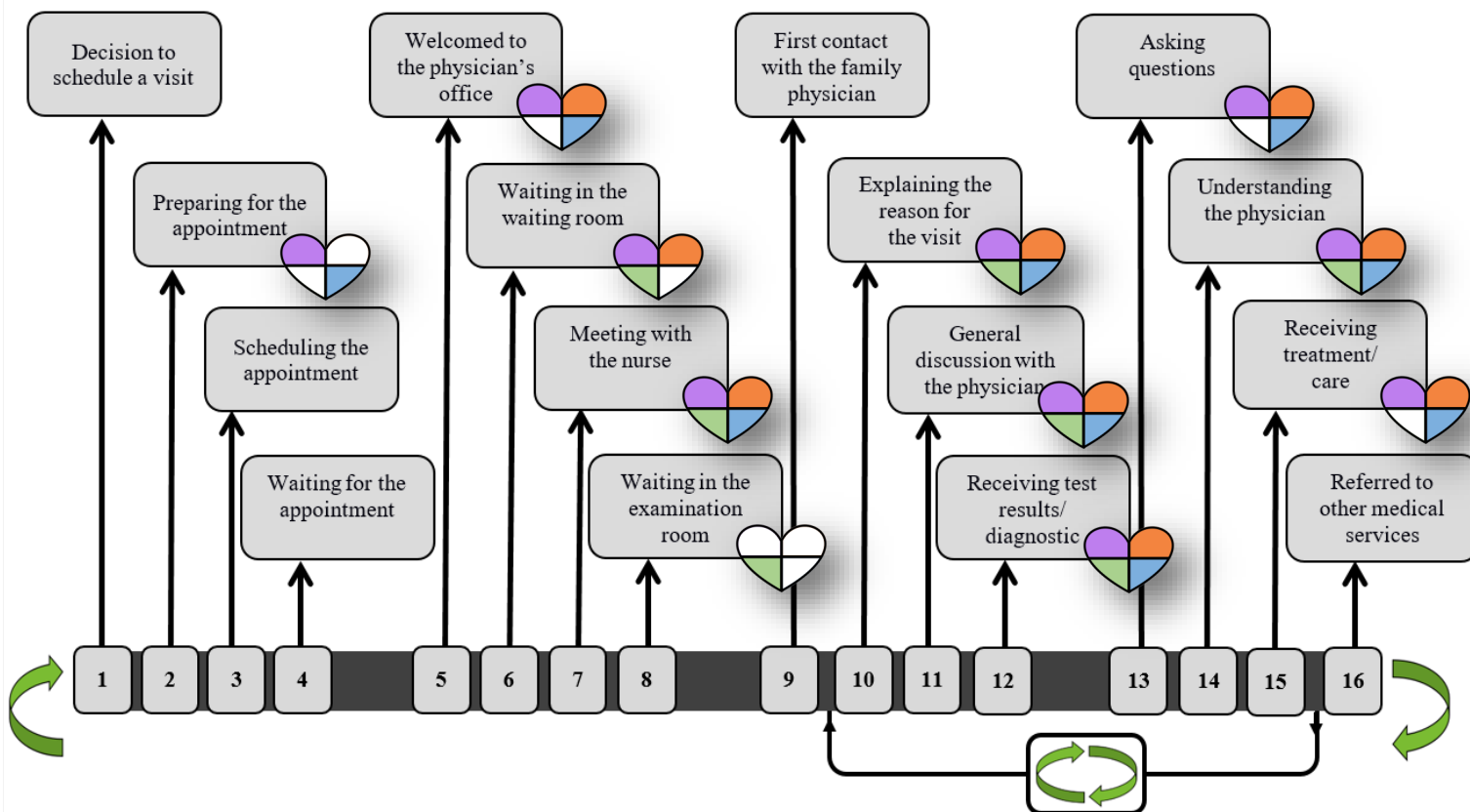
As we can see in Figure 1, a visit begins before the patient even arrives at the family physicians' office and continues until they are referred to other services.

After the initial contact with the family physician (moment 9), a series of events (moments 10 through 15) characterise the time spent with the family physician. The order of moments 10 through 15 are interchangeable until the end of the visit. In turn, the visit ends when the patient:

- ◇ receives a treatment;
- ◇ schedules a follow-up appointment and/or
- ◇ is referred to another medical service, for example: going for a blood test or going to see a specialist.

Once the visit ends, it is very common to eventually return to the family physicians' office, even if it is not until the next annual check-up. The continuity of the patient's primary health care journey is demonstrated by the use of the indicative arrows in Figure 1.

Figure 1 – The Patient Experience During a Visit at their Family Physicians' office



The Patient Experience During a Visit at their Family Physicians' office, as a Function of Linguistic Concordance and Discordance

Studying the emotions felt by participants revealed that the Francophone patient experience depends on many aspects, one of which is the impact of linguistic concordance or discordance between the patient and the physician.

As a general rule: When talking about the effects of linguistically concordant interactions, participants expressed positive emotions.

Conversely, when discussing the effects of linguistically discordant interactions, participants described their experience with negative emotions.

Emergence of Emotional themes

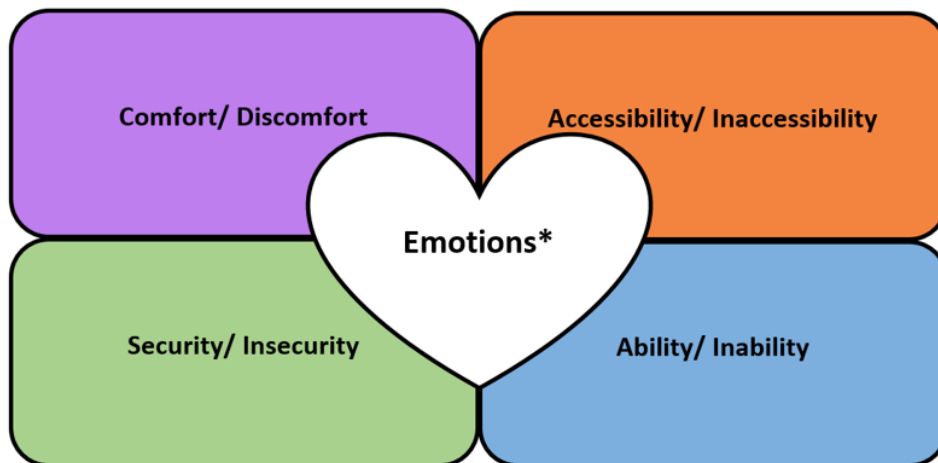
Exploring the emotions felt by participants revealed that patients in linguistically concordant set-

tings feel at ease, well, comfortable, and natural when speaking with their family physician. They feel reassured and capable. Such emotions were grouped in terms of feeling comfort, accessibility (ease of engaging the service), as well as feeling secure and self-confident in one's own abilities.

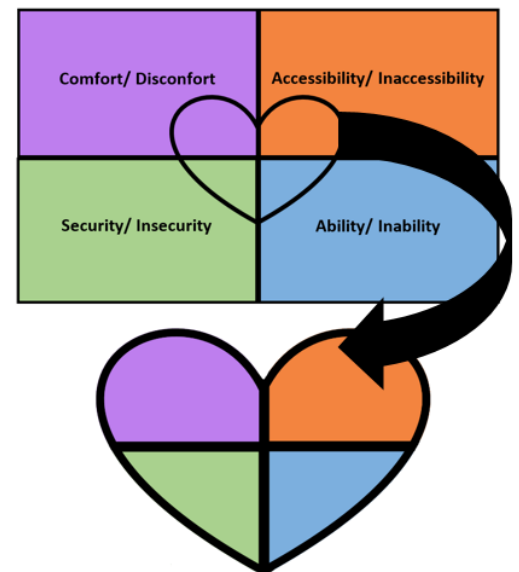
On the other hand, patients in linguistically discordant situations expressed feeling stress, worry and nervousness. They feel challenged, insecure, inferior, uncertainty and embarrassment. Such emotions were grouped in terms of feeling discomfort, inaccessibility, insecurity and personal inabilities.

In light of our thematic analysis, we are proposing the following conceptual model which represents the 4 emotional themes that characterise the Francophone patient experience during a visit to their family physicians' office as a function of patient-physician linguistic concordance and discordance (Figure 2).

Figure 2 – Emotional Themes

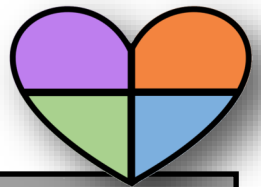


*Felt by patients as a result of linguistic concordance or discordance with their family physicians



We are using the “**heart model**” in Figure 1 to represent the moments in which patient-physician linguistic concordance or discordance influenced the patient experience. Each colored quadrant of the heart model represents the category or categories of emotions felt by participants during each moment identified.

Table 2 (bellow) provides examples of the Francophone patient experience during a visit to their family physicians' office. During the visit, emotions felt by participants will vary depending on patient-physician linguistic concordance or discordance.



Concordance	Emotional Theme	Discordance
Arriving at your family physicians' office, you feel a lot better and comfortable with a French receptionist. We appreciate that a lot, and we feel good.	Comfort/ Discomfort 	Arriving at your doctor's office is frustrating when they do not welcome you in French, especially when there is a lack of active offer of French language services by the staff.
During the general discussion, speaking in French with the family doctor is a priority and it makes the experience a lot easier. It is important and essential, and it is less of a problem when we do not have to worry about our spoken language.	Accessibility/ Inaccessibility 	Conversing in English is a challenge. It is more difficult to feel at ease, and it is an obstacle in the communication process
We feel understood, more secure and better listened too. We get reassurance, and that is important. We are way more reassured when we go back home when we got to explain the reason of the visit in French.	Security/ Insecurity 	We do not feel secure and we feel vulnerable when we always have to search for our words when we are trying to explain the reason of the visit in English to our family doctor.
When it is time to ask the family doctor a question, we feel able to, and we are certain that we can ask our questions.	Ability/ Inability 	We feel stupid, and we question ourselves. We question our ability to understand and we are uncertain, timid, and we refrain from asking questions. We accept information and we back away for the situation.

Conclusion

For Francophones in Northern Ontario, the experience of a visit to their family physicians' office evokes many emotions, several of which are experienced as a result of patient-physician linguistic concordance or discordance. Linguistic concordance in primary health care settings promotes a more favorable patient experience in terms of comfort, accessibility, security and a sense of personal ability.

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