



# Communication in Medical Institutions Accepting Foreign Patients

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## Abstract

While the number of foreign patients in Japan is increasing, Japanese medical institutions are not prepared to accept foreign patients. Are the medical institutions that are accredited to accept foreign patients, or those that are indicated on the website of the Japanese tourist bureau as being able to accept foreigners, able to communicate with foreigners without problems? We conducted a survey in the metropolitan area of Japan on medical institutions that can accept foreigners and the breakdown of foreigners living in the metropolitan area, and discussed the communication problems of foreign patients. The results showed that many foreigners living in the metropolitan area of Japan could not speak English. In many of the medical institutions that were able to accept foreign patients, the medical staff could only speak English. The communication problem for foreign patients must be solved so that foreigners living in Japan can receive equal access to medical care.

**Keywords:** Foreign patients; Communication; Medical institutions; Medical care for foreigners in Japan

## Introduction

According to the statistics of the Cabinet Office, the number of foreign residents in Japan as of June 2020 is over 2.5 million. Some of them live in Japan, while others are here only for a short period of time for tourism, study or technical training. The number of foreign visitors to Japan exceeds 13 million a year and is expected to increase further. The Japanese government has launched an inbound policy and is focusing on services for foreigners in Japan. These services include healthcare for foreigners. At present, due to the effects of the coronavirus, very few foreigners come to Japan for tourism, but many foreigners live in Japan for study or training purposes. Foreigners living in Japan face language problems when they visit medical institutions. For this reason, there is a growing number of medical institutions that accept foreigners and initiatives for medical interpretation. Medical institutions that are open to foreigners have multilingual displays and signs in their hospitals, not only in English. Many hospitals also provide medical questionnaires in different languages so that foreign patients do not have to worry about language. Language support" is the most common medical

information that foreigners feel they need when visiting a medical institution in Japan (Bureau of Social Welfare and Public Health, Tokyo Metropolitan Government, 2016) [1]. In medical institutions, not only are more and more medical professionals confused about how to deal with foreign patients, but also more and more foreign patients can hardly understand the explanations given by medical professionals [2]. When many foreigners visit Japan, there is a possibility that they may be involved in unexpected accidents or disasters. How should healthcare professionals communicate with foreign patients who visit medical institutions with anxiety because they cannot communicate in their own language?

## Purpose of the Study

The purpose of this study is to clarify the actual situation of medical institutions that can accept foreign patients, and to consider the communication with foreign patients.

## Research Method

Since there is likely to be a temporary increase in the number of foreign patients to medical institutions in the metropolitan area of

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Japan, the target of this study is the six prefectures of Tokyo, Kanagawa, Chiba, Saitama, Gunma, Tochigi, and Ibaraki in the Tokyo metropolitan area to identify the current status of medical institutions in the metropolitan area accepting foreign visitors. We surveyed the nationalities of foreigners living in the Tokyo metropolitan area from the Statistics 2020 (STAT) of the Cabinet Office, and from the Japan National Tourism Organization (JNTO) website, "List of Medical Institutions Accepting Foreign Visitors to Japan," we determined the number of medical institutions that accept foreigners in the Tokyo metropolitan area and the languages they speak. The number of medical institutions that can accept foreign visitors in the Tokyo metropolitan area and the languages they speak will be surveyed. The number of medical institutions in the Tokyo metropolitan area that can accept foreign visitors and the languages they speak will be surveyed from the "List of Medical Institutions Accepting Foreign Visitors to Japan" on the website of the Japan Medical Service Accreditation for International Patients (JMIP). In addition, each medical institution's language capability will be limited to "Japan Medical Service Accreditation for International Patients". In addition, we will survey the job titles of the language-supporters at each medical institution and investigate how many medical institutions have nurses who provide multilingual services. All surveys are available on the Internet, so there are no ethical issues [3-5].

### Results

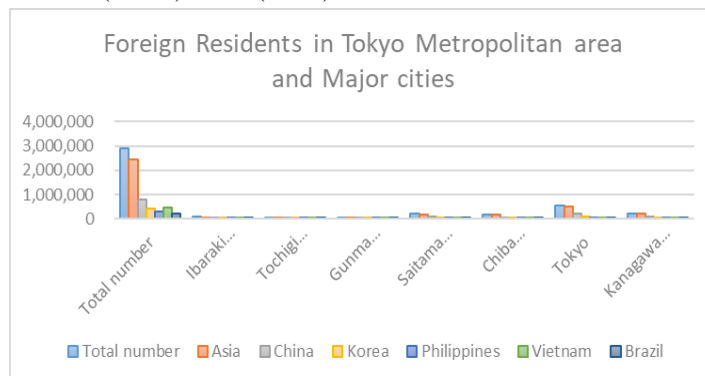
The total number of foreign residents in Japan is about 2.9 million, of which about 560,000 are in Tokyo, 230,000 in Kanagawa, 170,000 in Chiba, 200,000 in Saitama, 60,000 in Gunma, 40,000 in Tochigi, and 70,000 in Ibaraki. By nationality of each prefecture, Tokyo ranked first with 220,000 Chinese and second with 90,000 South Koreans, Kanagawa ranked first with 70,000 Chinese and 27,000 South Koreans, Chiba ranked first with 54,000 Chinese and second with 26,000 Vietnamese, Saitama ranked first with 74,000 Chinese and second with 30,000 Vietnamese, and Ibaraki ranked first with 13,000 Chinese and second with 11,000 Vietnamese. Saitama Prefecture ranked first with 74,000 Chinese and second with 30,000 Vietnamese, and Ibaraki Prefecture ranked first with 13,000 Chinese and second with 11,000 Vietnamese. Gunma Prefecture was another first with about 13,000 Brazilians and second with about 11,000 Vietnamese, and Tochigi Prefecture was first with about 8,000 Vietnamese and second with about 6,000 Chinese. The following are the results of languages (JNTO) at medical institutions that can accept them. In Tokyo, the languages accepted were English, Chinese, Korean, French, Spanish, Portuguese, and others. Kanagawa Prefecture: English, Chinese, Korean, Portuguese, and others. Saitama Prefecture: English, Chinese, Korean, and others. Chiba Prefecture: English, Chinese, Korean, and others. Ibaraki

Prefecture: English, Chinese, Korean, and others. Gunma Prefecture: English, Chinese, Korean, Portuguese, and others. Tochigi Prefecture: English, Chinese, Korean, and others. In each prefecture, most of the medical institutions that were able to accept patients were doctors (most of them spoke English), and a few of them had nurses who spoke English, Chinese, and Korean.

**Table 1:** Number of medical institutions that can accept foreigners (JNTO) and (JMIP).

	JNTO	JMIP
Ibaraki Prefecture	69	1
Tochigi Prefecture	25	1
Gunma Prefecture	61	0
Saitama Prefecture	46	2
Chiba Prefecture	20	4
Tokyo	267	26
Kanagawa Prefecture	57	6

Some of the medical institutions had Chinese and Korean nurses. In addition, some of them had medical interpreters available, but not all of them had medical interpreters. Next is the number of medical institutions in the Tokyo metropolitan area that can accept foreigners (JNTO) and (JMIP). In Tokyo, there were 267 JNTO and 12 JMIP facilities. In Kanagawa Prefecture, there were 57 (JNTO) and 3 (JMIP) facilities. Saitama Prefecture had 46 (JNTO) and 2 (JMIP) facilities. Chiba Prefecture had 20 facilities (JNTO) and 3 facilities (JMIP). In Ibaraki Prefecture, there were 69 (JNTO) and 0 (JMIP) facilities. In Gunma Prefecture, there were 61 (JNTO) and 0 (JMIP) facilities.



**Figure 1:** Foreign residents in Tokyo metropolitan area and major cities.

In Tochigi Prefecture, there were 25 (JNTO) and 0 (JMIP) facilities. English was the most commonly supported language in each prefecture. There were also many facilities that spoke Chinese, and some that spoke Korean, Portuguese, and Spanish. Doctors were the most common linguists, and in most of the medical institutions, only doctors were available to foreigners. In addition, many general hospitals and national university hospitals located in urban areas had medical interpreters, medical coordinators, and telephone medical interpreters available. As for



nurses, there were nurses who could speak English, Chinese, and Korean, but few other languages (Figure 1) (Table 1).

## Discussion

In terms of medical institutions that can accept foreigners in JNTO and JMIP, the number of facilities in JNTO was higher in all prefectures; the language support of most medical institutions listed in JNTO is English, suggesting that no medical institution can cover all languages of foreigners living in Japan. (JMIP), which is accredited as a medical institution that can accept foreigners in the Tokyo metropolitan area, had many medical institutions that could accept foreigners in English. Although there are many foreigners of Brazilian nationality in Gunma Prefecture, there were few medical institutions that provide Portuguese services. In some cases, there are doctors who can speak multiple languages but only a few nurses, and in other cases, there are English-speaking medical personnel but the foreign patients do not speak English. Therefore, multilingualism in medical institutions will be an important issue for the future development of medical care in Japan. Since few medical institutions have medical interpreters intervening, they may not be able to deal with foreign patients. This is an issue that needs to be considered in the field of medical care for foreigners in Japan, how to position medical care for foreign patients, and in what direction to proceed. Most of the time, doctors are the ones who communicate with foreign patients, while other medical professionals are not able to communicate with foreign patients. How should medical professionals communicate with foreign patients? It is difficult to train nurses who can speak all languages and place them in each medical institution for a multilingual and multicultural society. Although it is necessary to learn medical English, we may have to consider training nurses to understand the culture of the patients and to learn how to treat them, not only that. When it comes to the issue of language support, it is necessary for the medical field to take the initiative in making changes, such as deploying medical interpreters and spreading the use of telephone interpretation. However, even if the language problem can be solved, in order for foreign patients to receive equal access to medical care, it will be necessary not only to learn medical English, but also to understand the culture and religion of foreign patients and get involved with them.

## Conclusion

Japanese medical institutions have communication problems with foreign patients who cannot speak English. Japanese medical institutions urgently need to establish a system to ensure that foreign patients do not have difficulties in communication.

## References

1. Bureau of Social Welfare and Public Health, Tokyo Metropolitan Government. Questionnaire survey of foreign visitors to Japan. 2016; 79-89.
2. Keiko Y. Factors of cultural barriers suggested by the actual situation of foreign residents' access to medical care: From a pilot survey of Filipino community in Japan. *Kobe College J.* 2016; 63: 142-160.
3. <http://www.jme.or.jp/jmip/>
4. <https://www.stat.go.jp/>
5. <https://www.jnto.go.jp/jpn/>