



Interpreter Training

Educational Partnerships for Interpreter Training: An Hablamos Juntos Initiative

One of the most significant barriers to high quality interpreting in health care settings is the lack of formal training programs for this newly rising profession. Even though government regulations call for the use of trained or qualified interpreters, these standards are not defined. Further, standards for health care interpreters do not exist, criteria established by leader states such as Massachusetts and California frequently serve as guidance to those interested in health interpreter training. None of the Hablamos Juntos demonstrations, except one, had formal educational programs for interpreters when the implementation phase began. Typical of most communities, demonstrations that had health interpreters training provided intensive workshops, typically running 20 to 48 hours, or individualized training conducted by their employer health organization. Existing training programs rarely test for language proficiency, and tend to cram too much information to be effective. When such workshops are not available, health care organizations provide interpreter instruction through in-service training or on the job training with supervision. Those efforts often result in short lived programs with varying degrees of breadth and depth.

With the goal of raising the level of training offered to health interpreters, Hablamos Juntos demonstration sites were encouraged to partner with universities and community colleges to establish local programs. An education based approach was selected as a way to involve academically oriented educators in the development of curriculum for health care interpreting. Educators familiar with pedagogical principles are important to the development of curriculum which can lead to competencies and skills required of health care professionals. This is especially important because training guidelines and standards for medical interpreting do not now exist.

Hablamos Juntos partnered with Kaiser Permanente's National Linguistic and Cultural Program to offer a week long seminar to introduce the demonstration sites to a training program developed at the City College of San Francisco. The seminar was specifically designed for the Hablamos Juntos' demonstration sites and partnering educational institutions to prepare college instructors to successfully develop and conduct a health care interpreter training program at the college level. The City College program is accredited for 18 units of college credit.

The April 2004 Health Care Interpreter Instructor Training (HCIT) seminar was conducted by Kaiser Permanente's National Linguistic and Cultural Programs and included others from Kaiser Permanente regions also interested in replicating the City College program. An overview of the core competencies required of a health care interpreter as well as program implementation strategies were the main focus of the seminar. Participants learned about the importance of a strong partnership between colleges and health care agencies, the need for committed instructors and language coaches and how to develop *skilled* health care interpreting teachers and coaches through the program. Kaiser Permanente's National Linguistic and Cultural Program offered a second seminar June 2005 and now make teaching material available to others through their website <http://kphci.org/curriculum/>.

Participants not only learned the Health Care Interpreter Certificate Program (HCICP) Curriculum, but also received training materials developed by Kaiser Permanente staff based on seven years of training experience. Participants received instructor's tools and templates necessary to provide a solid foundation for course instruction. The seminar included the pedagogy underlying the courses such as curriculum design, classroom management and adult education, and included the following learning objectives:

1. To understand the need for trained health care interpreters and their role in providing linguistic and culturally appropriate services to the LEP population.
2. To understand program content so that they can effectively facilitate learning of the content by the students.
3. To understand and implement program curriculum including program design, tools and templates.

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4. To understand possible challenges in implementing the Health Care Interpreter Certificate Training Program (classroom management, error correction, etc.) and practical alternatives to overcome those.

Building the Business Case

The first step to engage educational partners is the business case; the prospects of how these programs can be viable and sustainable need to be demonstrated. Educational institutions operate within fixed budgets; any new program must either usurp resources from existing programs or bring in new revenues. The short-term business case for interpreter training programs is hampered by a lack of successful programs and the need to develop program content from scratch. The business case is also dependent on the ability to attract students to the program, which is, in turn, dependent on convenience, and the potential for employment and professional advancement. Students need assurance that investment in training will lead to gainful employment after graduation. In today's environment, some consider interpreter training programs to be unnecessary investments because of the current practice of employing interpreters without any formal training. The crux of the business case rests in the conundrum of creating a trained workforce to enable health organizations to hire qualified interpreters before employment opportunities are available.

With grant funding and creative problem solving, several demonstrations were able to build a business case for their local educational partners. This involved a variety of strategies such as offering classroom space in health facilities; paying for or reimbursing tuition costs; adapting work schedules to enable employed staff to attend classes; providing trained medical interpreters to work as faculty or language coaches. Some students were also given financial incentives to attend class. For instance, as employees of affiliated health care organizations, Alabama students in the Samford and Central Community College programs were offered a tuition subsidy.

Building Capacity for Training

Beginning with the common base of training provided at the HCIIT sessions, *Hablamos Juntos* demonstrations are showing better ways exist to train medical interpreters. Several demonstration sites successfully established educational partnerships to support training and increase local capacity for interpreter services through a variety of programs. These programs include:

- Samford University a partner with *En Español* in Alabama offers a ten month certificate program through Samford After Sundown, an adult education program.
- University of Tennessee in Memphis Tennessee offers a Certificate of Continuing Education for a 14 week program.
- Central Nebraska-AHEC's Medical Interpreter Certificate Program at Central Community College is integrated into other health professions training programs.
- George Mason University in Virginia offers a three course program culminating with certificate of completion.
- University of North Texas Health Sciences Center developed the Health Interpreting and Health Applied Linguistics program as an option towards a Master's degree through the School of Public Health.
- Clemson University in South Carolina used the curriculum to develop a Bachelor of Science degree in Language and International Health with two concentrations: Community Development and Health Systems.

Two additional programs at Greenville Technical College in South Carolina and Community College of Rhode Island are planned for 2006. In addition, George Mason University is considering offering a certificate program in "health communication and interpretation" building on the existing three course program and requiring additional coursework.

The Health Care Interpreter Training Institute sessions were meant to provide a program model that grantees could adapt for their settings. Now that many of these training programs are in place, grantees have made efforts to improve the convenience of the programs to attract students. Samford University, for instance, offers night classes, while Central Community College in Nebraska offers DVDs and web-based classes that allow students, who might not otherwise be able to take courses due to schedule or geographic considerations, to participate in the interpreter training course.

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Recruitment and Marketing

Recruitment involved a range of activities. Word of mouth was reported as the most effective (and cost effective) tool used. Some courses/programs were advertised through traditional sources such as course catalogues and other less traditional ways like advertising on the radio as well. Once launched, the unique nature of the classes caused the press to take notice of these programs; adding to their credibility and visibility. Several programs featured twice in local television newscasts and newspapers.

Program designers also capitalized on recruitment and marketing opportunities offered by local partnerships. The majority of students in the first classes were those already working as interpreters when they enrolled as students in these programs. This is one way health care organizations directly benefited from partnering with local educational institutions to develop sustainable training programs.

Demonstration sites and health organization partners also helped to promote the training programs by collecting statistics about the difference trained interpreters make to raise awareness about the use and importance of interpreters in health care settings.

Partnership Development

In addition to joint efforts at recruitment and marketing, one notable aspect of most partnerships was the development of internship or practicum components to training. Demonstration sites hosted events bringing together experts in pedagogy from the academic arena and those experienced in health care interpreting. From the perspective of educational partners, internships serve the dual purpose of giving student interpreters the opportunity to work under the tutelage of experienced mentors while giving maturing interpreters the opportunity to hone their skills; increasing self awareness as they serve as models to emulate. For health care partners, particularly hospitals and clinics, internship programs demonstrate the difference of working with formally trained professional interpreters at low cost or free of charge. Additionally, as Samford University reported, "Internships also introduce the candidates to health care institutions and providers in the area, creating relationships fertile with employment potential."

Program Features

Even though the genesis for these programs provided common ground, each of the programs developed differently. Overall, the training programs retained similar features. Minimum requirements in all programs include a high school diploma from a U.S. high school or the equivalent from an abroad institution and bilingual fluently in Spanish and English. However, beyond this, there was a wide range of entrance criteria for admission to these programs. Samford University, for instance, asked for three essays from their applicants, one in their native language and two in their second language. The University of Tennessee, on the other hand, used only the Language & Interpreters Skills Assessment (see L&ISA description) as an entrance criterion. Once the classes began, the differences between programs came into further focus. Tennessee offers the shortest program, which is about five month long, and approximately half the length of time of Samford's program. Details about these programs will be available through a web based resource guide through the Hablamos Juntos website.

About Hablamos Juntos

Hablamos Juntos (Spanish for "We Speak Together") is a *project funded by The Robert Wood Johnson Foundation*, administered by UCSF Fresno, Center for Medical Education & Research, to develop affordable models for language access. The ten demonstration sites funded under Hablamos Juntos included health plans, hospital systems, nonprofit community organizations and educational institutions.

To learn more visit: <http://www.hablamosjuntos.org>

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