

Comparing the Impacts of Virtual vs. In Person Interpreting Modalities: Interpreter Perspectives

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Context

- 12.2% Minnesota residents speak a language other than English at home
- Healthcare gaps exist for patients with Non-English Language Preference (NELP)
- Opportunity to ↑ equity with high-quality professional medical interpreters
- Covid-19 → more virtual interpretation (V) vs in person interpretation (I)

How do interpreter modalities impact patient care, from the medical interpreter viewpoint?

Objectives

1. **Engage professional medical interpreters** in Minnesota in virtual focus groups
2. **Identify strengths and limitations** of different interpretation modalities
3. **Define situations** where the interpreter modality is particularly important and why
4. **Disseminate findings** to the interpreter and health system community



Methods

- Five Zoom focus groups with 24 professional medical interpreters
- Tools: semi-structured guide, chat-storm, and demographics survey
- Focus group transcripts, video, and chat were reviewed and coded for thematic analysis using grounded theory and an inductive approach
- NVivo 14

“It's actually a question of **equity of care**... And so **patients do not get the same amount of service** per appointment if we're tying them to a remote interpreter than they would if they were actually English speakers, or at least had an in person interpreter.”

“...It's super great for ... quick **yes or no question[s]**. So little things like that where in person interpreter it takes much more time for you to even put in the request than it might take to ask a question. So like **very simple, quick questions**, I think **remote interpreting is super useful**.”

“When you are in person you have a **better relationship** with the provider and the patient have more confidence. They feel more comfortable versus being on the phone you don't see what is in there you don't have the advantage of body language. So **communication is more easier, clear, and better understanding**.”

“[If] there is a phone call, then I'm on the phone with them. If there's a zoom visit with the parent and the provider, then I can jump on zoom with them. So it makes sense that **I would be in the same modality that the provider is in**.”

Results: Themes

Human connection

- Importance of human connection during medical visit (I)
- Impact on patient willingness, trust, and ability to access care (I)
- Limits vicarious trauma (V)

Fulfilling interpreter role

- Ensure accuracy (I)
- Check for understanding (I)
- Incorporate health literacy and cultural nuances (I)

Logistics

- Easier coordination of personnel, technology, transportation, and cost (V)

Accessibility and Flexibility

- Increased options for unplanned situations (V)

Facilitation/Physical and Culture Context

- Nonverbal communication is pivotal to interpretation (I)
- Emotions, confusion, gestures, and additional subtleties add to context (I)

Both modalities are essential, but have important considerations and should be utilized intentionally

Next Steps

- Share back information to interpreters, community, and health systems
- Focus groups with patients and clinicians
- Impactful changes to interpreter services

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