

Development and Evaluation of a Novel Education Method for Training for Healthcare Interpreters

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ABSTRACT

Medical interpreting training is urgently needed in response to language problems resulting from the rapid increase in the number of foreign workers in Japan over recent decades. The goal of this thesis is to determine core competencies by means of a systematic literature review and to design and test the interpreter training program.

Firstly, core competencies in medical interpreting were searched by means of a systematic literature review. Then an intervention program was developed to improve core competencies. Before and after implementing the program, tests of knowledge and interpreting skills in participants aged 22–62 years ($n=43$) were conducted. Results of the tests were compared. The outcome measures were quality of interpretation, scores of a medical knowledge test, and nonverbal communication skills. Since a significant difference was seen in the TOEIC scores of the intervention and control groups, results adjusted for the TOEIC score were analyzed.

Results of the systematic review indicated five core competencies for medical interpreters: (1) maintaining accuracy and completeness; (2) medical terminology and the human body; (3) behaving ethically and making ethical decisions; (4) nonverbal communication skills; and (5) cross-cultural communication skills. With regard to omissions, the error rate decreased (i.e., improved) both in the intervention group and in the control group. That improvement was greater in the control group than in the intervention group (adjusted $p = 0.02$). With regard to substitutions, the error rate decreased in both groups, and the difference between groups was not statistically significant (adjusted $p = 0.10$). With regard to additions, the error rate decreased in the intervention group and it did not change in the control group. That difference between groups was statistically significant (adjusted $p = 0.02$). With regard to number of phrases interpreted, the number increased in both groups. That improvement was greater in the intervention group than in the control group. That difference between groups was statistically significant (adjusted $p = 0.03$).

Post-test assessment showed that the developed training system can be useful in improving knowledge and the quality in medical interpreting. A three-day training program for medical interpreters has promise for bridging the gap between medical professionals and patients with limited English proficiency by influencing interpreters' knowledge and interpreting skills while being amenable to integration into clinical flow.

KEYWORDS: doctor-patient communication, healthcare interpreting, medical interpreting, training program.

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