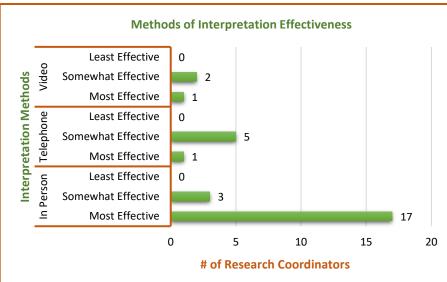


Perceived Barriers with Interpreting Services in Research Subjects with Limited English Proficiency

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Background

When enrolling or conducting study related visits for the Limited English Proficiency (LEP) participants, research coordinators must request an interpreter. The purpose of this study was to determine which interpreting service was most effective, limitations of requesting these services, and perceived barriers related to LEP participants while completing research visits.



Conclusion

Patient facing coordinators that enroll LEP participants encounter barriers related to availability of interpretation/translation tools and services. Lack of properly translated materials or interpreter availability limits thorough understanding of the study. These limitations could be related to decreased treatment compliance and show rate for research visits. Implementing suggestions for improvement could decrease the barriers coordinators face when requesting a translator and completing study related visits with LEP participants. In addition, further studies to understand the barriers perceived by LEP research participants may be useful in addressing their needs.

Methods

A survey was created in a Research Electronic Data Capture system (RedCap©) and emailed to research coordinators at our center. The survey remained open for four weeks. Survey participants were asked what method they used to request an interpreter. Response options included in-person, telephone or video call, and were rated Most, Somewhat, or Least effective. Survey participants were asked if they encountered barriers during or after the request for interpreter was made, as well as their preferred method for communication using interpretive services.

Results

The survey was sent to 191 research coordinators and 35% (67/191) responded. Of these, 34% (23/67) were patient facing, actively using interpreting services, and enrolling LEP participants. The most effective option (86%, 20/23) for interpreter request was in-person. Respondents that used interpretive services reported encountering barriers (39%, 9/23). The most reported issue (50%, 6/12) was slow response time. Patient facing coordinators reported study participant related issues including decrease in treatment compliance 50% (2/4) and a high rate of no show 50% (2/4). Suggestions to reduce these barriers included reaching out to translation services further in advance of appointments, having translated materials readily available, and a translated, detailed explanation of the study given to the participants.

