

## Riverdale's Own Interpreters

### Abstract

Community economic development is one of the four main program areas for the South Riverdale Community Health Centre, a health centre located in a neighbourhood of Toronto with a high percentage of people who do not have English as a first language. The regular demand for interpreters at the Centre and the recognition that trained interpreters are required at other local health care institutions led to the creation of a unique interpreter service called "Riverdale Interpreters". Partnership, planning, training and business operations are the key areas covered in this article.

### Résumé

Le développement économique communautaire est l'un des quatre secteurs de programmes du South Riverdale Community Health Centre, un centre de santé situé dans un quartier de Toronto dont nombreuses personnes parlent une langue première autre que l'anglais. Constatant que le centre avait fréquemment besoin de services d'interprètes et que d'autres établissements de santé locaux avaient aussi besoin d'interprètes qualifiés, on a créé un service d'interprétation unique en son genre, « Riverdale Interpreters ». Cet article porte principalement sur les questions suivantes : le partenariat, la planification, la formation et la gestion d'entreprise.

## Riverdale's Own Interpreters

The goal of the Riverdale's Own Interpreters project is to create a local pool of trained health care interpreters who would improve access to health services for several linguistic groups and to help these interpreters to start a local business under a community economic development model.

### Background

This project was initiated by South Riverdale Community Health Centre with a one-time project grant from the United Way of Greater Toronto, the greatest fundraising body in Toronto that supports more than 200 health and social service organizations. South Riverdale Community Health Centre was opened in November, 1976, arising out of community action in response to

lead pollution caused by a local smelter. It has grown into an active, accessible health centre, specifically targeting low-income individuals and families, homeless people, abused women, Chinese and other immigrant populations, frail seniors and injection drug users. Services provided include primary health care, social work, and health promotion. Enhancement of access to health and community development are two of our program areas.

The need for professional interpretation in the delivery of South Riverdale Community Health Centre's services and other local organizations has grown dramatically due to the changing demographics within Toronto, the largest city in Canada which attracts almost 40% of immigrants and refugees coming into the country. According to statistics, 45% of newcomers to Ontario have no official language abilities (English or French). At present more than 40% of the population of Toronto have neither English nor French as their first language. South Riverdale is located in the south-east corner of Toronto. Because of the relatively low rental rates and the availability of more community services for newcomers, it has a higher percentage of the immigrant population than the rest of Toronto. At least 50% of the local population do not have English or French as a first language. Thus, many residents do not have appropriate access to health services because of linguistic barriers.

Currently, interpreter services are generally being provided through the use of family or friends, volunteers and, if fortunate, by staff who can speak the language. It has been documented that the use of family and friends as interpreters is not a good practice as it threatens issues of confidentiality, objectivity and neutrality. It is also essential that interpreters receive proper training so that they have the appropriate skills and are aware of the code of ethics and proper role and responsibilities of a health care interpreter.

The recognition of access as a determinant of health and the desire to create local employment formed the basis for starting this project. South Riverdale Community Health Centre sees the strong need to create a local pool of trained health care interpreters whose services would be easily accessible to the neighbourhood health institutions such as clinics, hospitals and health centres. In order to make the service more affordable and enhance the sense of ownership and involvement of the interpreters, we also came up with the concept of having these interpreters start a local business under a community economic development model.

## **Partnership**

In December 1999, an Advisory Committee was formed consisting of representatives from the Ministry of Citizenship, Riverdale Community Business Centre and four neighbourhood hospitals – namely, Toronto East General Hospital, Providence Centre, St. Michael's Hospital and The Riverdale Hospital. The Ministry of Citizenship and Riverdale Community Business Centre became the main partners in this project as they donated an immense amount of their staff time to help us with the interpreter training as well as the business training.

Through the Violence Against Women Prevention Initiatives, the Ontario Ministry of Citizenship has been the pioneer in interpretation training and advocacy work since an initial pilot project with the Cambodian, Vietnamese and Laotian communities in 1985. Under the Ministry's leadership, the Hospital/health Care Cultural Interpreter Core Competency Curriculum was developed in 1996 by a group of hospitals in the Toronto area. Ministry program consultants are well experienced in facilitating interpreter training.

The Riverdale Community Business Centre (RCBC) was invited to participate in this project at the time of the grant application submission in order to provide business expertise and support. RCBC is a non-profit organization which was established in 1997 in response to a local needs assessment in an endeavour to revitalize the business sector of the South Riverdale area. The centre facilitates initiatives that support existing businesses, and create new jobs and employment opportunities for budding entrepreneurs. The Centre provides expert business information, loans, research and planning services so as to help people and organizations to build thriving small businesses.

Other members of the Advisory Committee are all representatives from the users' end, i.e. health care providers working directly with interpreters. The role was to assess the needs of the community as well as health care providers and to provide guidance to the project co-ordinator through the process. Some of the training actually took place in these hospitals in order to enhance interpreters' understanding of different settings. Involvement of these service users at the planning stage would help to ensure the success of the future business.

The Advisory Committee proved indispensable in the identification of language needs for the interpreter service – Cantonese, Mandarin, Tamil, Italian and Greek were identified as priorities. Based on these needs, the first group of interpreters was recruited. The Committee met frequently at the beginning of the project in order to plan the different stages and discuss important aspects of running an interpreter service. Customer service suggestions were particularly welcomed.

## **Recruitment**

Advertising was done mainly in the South Riverdale area in the hopes that employing local interpreters would not only add to the local economy but would also mean that interpreters would be able to arrive more quickly to emergency assignments. This plan was not entirely successful and the decision was made to accept people who lived further away. Sixty-seven resumes were received and screened on paper. Surprisingly, given the number of Italian and Greek seniors in the neighbourhood, it proved extremely difficult to recruit Italian and Greek interpreters. Two Greek interpreters attended the training; however, no Italian speaker did.

Thirty-one personal interviews were conducted, mainly by South Riverdale Community Health Centre staff. Each candidate was asked the same questions – questions that were designed not only to elicit interpretation experience but also entrepreneurial drive and business skills – a tough combination! The interview also allowed for an initial assessment of English language ability. The interviewers soon learned that translation experience overseas did not automatically “translate” into an ability to communicate effectively in an English-speaking environment and were sorry to refuse candidates who looked highly skilled on paper. Suggestions on ways to improve English-language skills were given out if appropriate.

Of the 31 candidates, 15 were more formally tested in their interpreting and language skills. We administered the Cultural Interpreting Language and Interpreting Skills Assessment Tool (CILISAT) and sent it to CISOC (Cultural Interpreter Services of Ottawa-Carleton) in Ottawa for grading. The test requires the candidate to do two sight translations and to interpret consecutively a short dialogue between an English speaker and a speaker of the other language. The candidate's voice is tape-recorded. Eleven people passed the test and were accepted into the

training. The other trainees had previously passed the test elsewhere. We were pleased to have Sunder pass the Punjabi test and attend the interpreter training as a trainee.

### **Interpreting Training**

Five days of interpreting training and five days of business training were held over two weeks in July of 2000 at no charge to the participants who were not paid to attend. Phyllis and Dorene co-facilitated the training. Phyllis is a skilled interpreter who had attended a similar training a few years earlier at a Toronto hospital.

The approximately 35 hours of interpreter training touched upon these main topics: role and responsibilities; code of ethics; values and attitudes; skills exercises; medical terminology and role plays. Content focused on interpreting in a health care setting. The existing health care interpreter training curriculum was used as a guide. The expectation was that this short training would provide the interpreters with a sound foundation on which to further develop their short consecutive and sight translation skills for interpreting in the health care setting.

### **Business Training**

The focus of the business training was to prepare the interpreters to provide quality service for the health sector. Sunder facilitated the training. That she is bilingual, has interpreted and attended the interpreter training was key to the success of the curriculum design and delivery.

The tailor-made curriculum included such topics as:

- Reasons for Business Success and Failure
- What is involved in starting a business
- Marketing Plan
- Market Research
- Identifying your customers
- Pricing of the service
- Promotions and advertising
- Competitive Analyses
- Business Organization and Operation
- Decision Making and Problem Solving
- Customer Service
- All aspects of financial planning in business operation
- Time Management / Stress Management

Business training expectations were that trainees would understand: how to run the business and what each interpreter's responsibilities would be. Their main preoccupations were how much work they could expect to get and how soon the business would be up and running.

Participant evaluations were positive at the end of both training sessions and the group was enthusiastic about the next step.

After the training, interpreters met with the business trainer on their own time to plan the best business structure for this unique service. The interpreters were not paid for the time spent for

planning. Advantages and disadvantages of partnership, incorporation, co-ops were discussed and as well as the costs involved in starting the business.

This unique group was made up of people from various countries such as China, Greece, Sri Lanka, and India, each bringing their own language, culture and values and together. Together they learned about Canadian culture and values and how to operate a business in this country.

### **Start-up costs**

There were costs involved in starting the business, such as: insurance; legal fees - to draw up a legal agreement, and the cost of hiring a dispatcher. The interpreters felt that there was too much risk involved in investing over a \$1,000 each for business start-up and paying the wages of the dispatcher. So they requested Riverdale Community Business Centre to operate and manage the business. We agreed. The first batch of interpreters was now working as freelancers but still involved in the decision making.

A business plan was completed and presented to the Board of Riverdale Community Business Centre. After review and approval by the Board, the marketing section of the business plan was presented to the hospitals. They took a keen interest in our service. Two hospitals started to send us orders.

### **Business Start-up**

South Riverdale Health Centre provided access to the office space, computer, photocopying machine and a phone line. Riverdale Community Business Centre now looked to Human Resources Department of Canada (HRDC) for support in funding the wages of a dispatcher for the year. HRDC provides support for those who are unemployed and who want to improve their skills to become more marketable for higher paying jobs. HRDC gave Riverdale Interpreters financial support and the Business was registered in October, 2000.

The business was officially launched on January 10, 2001 under the name Riverdale Interpreters, as chosen by the group.

Riverdale Community Business Centre manages the business with the objective that Riverdale Interpreters will become self-sufficient by the end of the year, i.e. completely independent of any government assistance. Service providers are charged an hourly fee. Interpreters are paid the bulk of this amount and a small percentage is set aside by Riverdale Interpreters for future use when government assistance is no longer available.

### **Surprises**

Like any other business, Riverdale Interpreters has not been short of surprises. We discovered that the business dynamics were much larger than we expected. We listened to the needs of the hospitals and realized that a web-site was necessary so clients could send assignment requests on line. We partnered with Kent Systems who designed the Riverdale Interpreters logo "RivInt.ca". The logo is in blue and green. Both colours imply stability and healing, showing compatibility with the hospital environment. A web-site was created and is now used by the hospitals to place assignment requests on line.

As the orders increased, the demand for additional languages increased with it. Now there was a need to add Vietnamese, Spanish, Russian, Italian, Korean and more Chinese, Tamil and Greek language interpreters to our existing list.

Our training built a great deal of confidence in our interpreters, some of whom were newcomers to Canada. Shortly after the training, they were able to find full-time employment. Out of the 18 interpreters trained in the first round, seven found full-time jobs. HRDC viewed this as a major positive achievement, but now we needed more interpreters. We also realized that there was a market for translators to provide service to the hospitals.

### **Second training**

In the month of March and April more interpreter and translators were recruited. About forty people were interviewed and screened. Our second round of Riverdale Interpreters training started on April 30, 2001. We were not able to recruit enough people in all of these languages but are pleased with the most recent training group. These interpreters came on board as freelancers but are not involved in the business decisions.

Marketing and advertising of RivInt.ca required more time than anticipated. Another full-time position was needed to meet this need. HRDC again showed their support in providing funding for a full-time Promoter of RivInt.ca. Currently, we are in the process of hiring for this position.

As more interpreters are trained and made ready for interpretation service, there is a very good chance that almost 50% will find full-time jobs elsewhere and will not be available to fill the job orders. We will continue to face this challenge until a very large interpreter base is established.

### **Rough spots**

Right now over 80% of the business orders are coming from one hospital. Average monthly gross income is at 60% of the amount anticipated in the business plan. The low average figure reflects the slow month of March when we were busy recruiting new interpreters and translators. Very little time was spent on marketing and advertising in March and April due to recruitment and training.

### **Other issues**

The initial Advisory Committee dissolved at the start of the business. A number of the original members will stay on in an advisory capacity to help guide the running of the business. Three interpreters sit on the Committee and all interpreters are accountable to it. If there are any concerns and issues regarding interpretation service, they will be channelled through to the Advisory Committee.

Riverdale Interpreters' management staff is constantly in touch with the hospitals and we receive quick feedback about our service from them. We also listen to the needs of our interpreters and respond as quickly as possible. For example, parking is a problem at Toronto hospitals. We have requested a parking spot for the interpreters.

Interpreters are also concerned about contagious and infectious diseases when they are in the hospital environment. A person from St. Michael's Hospital came to speak to the interpreters on this particular matter.

Currently, Riverdale Interpreters is serving three hospitals and is the first choice for two hospitals. We have expanded to provide interpretations for the Legal Service in the Riverdale area, also as their first choice. Recently, Toronto Public Health has shown interest in our service. We have done interpretations for the City of Toronto when service was needed in the Riverdale Community.

It has just been five months since the business start-up and we are prepared to expand further. In January we had 13 interpreters. Now we have a total of 46 interpreters on board and 27 translators. We are now beginning to identify other needs of the hospitals to provide quality service for their patients, such as language dubbing or subtitles for their pre-surgery videos that are in English but must be viewed by all, including those who speak languages other than English. One of the hospitals has indicated that it will require translation and simultaneous interpreting services.

### **Future Plans**

Now that the service is up and running, the Advisory Committee will focus more of its efforts on ways to ensure consistent, high-quality service. Sales are expected to double with the advent of the new marketing staff person this fall. Riverdale Community Business Centre plans to hand the business over to the interpreters in December of 2001. In preparation for this event, monthly financial information (including the value of in-kind donations) will be shared with the interpreters and efforts will be made to ensure that there is money set aside to pay a service coordinator for another year.

This valuable project has enabled a wide range of participants, from interpreters to Advisory Committee members, to learn more about serving the needs of those members of the local immigrant and refugee population for whom language is a barrier to effective health care.

Phyllis Lam  
Community Health Worker  
South Riverdale Community Health Centre  
955 Queen Street East  
Toronto, Ontario, Canada M4M 3P3  
[plam@srhc.com](mailto:plam@srhc.com)

Sunder Singh  
Business Consultant  
Riverdale Community Business Centre  
1007 Gerrard Street East  
Toronto, Ontario, Canada M4M 1Z4  
[sunder@riverdale.org](mailto:sunder@riverdale.org)

Dorene Weston  
Program Consultant  
Ontario Ministry of Citizenship  
400 University Avenue, 3<sup>rd</sup> Floor  
Toronto, Ontario, Canada M7A 2S9  
[dorene.weston@mczcr.gov.on.ca](mailto:dorene.weston@mczcr.gov.on.ca)