Meeting language barriers in doctor-patient-communication: Interpreter assignments to children in Switzerland

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Background

Effective communication between displaced persons and healthcare professionals is fundamental to deliver equitable high-quality care. Interpretation by minors, family members or acquaintances are in general not acceptable. Especially children may not have sufficient language proficiency (in either language) to act as interpreters.

400 secondary schools in **Methods** Switzerland contacted Very low response rate due to non-cooperation of local Survey school authorities Pupils: Anonymous, self-administered questionnaire on interpreter assignment and experience 230 participants Teachers: self-reported total number of pupils and estimated number with migration background and language barrier No consent n = 11No migration background n = 103Characteristics: No language barrier n = 11 Age: 12-17 years Gender: Male 48%, Female 52% 105 met inclusion From 10 classes in German-speaking criteria schools in suburban areas in 2021

Aim

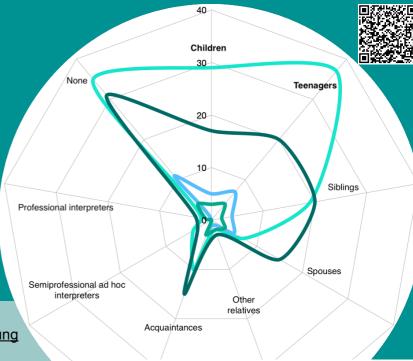
 identify, characterise and critically appraise evidence on children acting as informal interpreters for their parents when accessing health care services in Switzerland.

Table and chart: reported interpreter experience

Interpreter experience	For mothers: n = 92	For fathers: n = 84
As child (< 10 years old)	34 (37%)	20 (24%)
As teenagers (> 10 years old)	44 (48%)	24 (28.5%)
with family members	31 (34%)	36 (43%)
with acquaintance	13 (14%)	18 (21%)
with ad hoc interpreter	4	3
with professional interpreter	2	4

Results

- Teenage interpreter assignment was more common than assignment to children.
- Spouses were reported to act as interpreters in 28.6% (30/105), notably 55 case reports involved siblings as interpreters.
- Common setting: outpatient visits to general practitioners, followed by paediatricians and "hospital visits".
- Only about 35% (37/105) of subjects had no experience with intercultural communication, 65% of their parents were bi- or multilingual (24/37).
- (Semi-) Professional interpreter use was poor across all areas.



Conclusion

There is evidence of interpreter assignments to young family members. Limitations included recall and desirability bias, suggesting a high estimated number of unreported cases and signalling a disparity between patient perception and actual existing circumstances.

- Fathers (only) with migration background, n = 13
- Mothers (only) with migration background n = 21
- Parents with migration background, fathers n = 71
- Parents with migration background, mothers n = 71

<u>Conflict of interest:</u> none...since the survey was conducted by PICTOMED, a Swiss non-profit and volunteer-based association, committed to finding solutions to overcome language barriers in doctor-patient-communication.