



To: Board of Directors and Past Presidents
From: Helen Eby, Administrator: helen@gauchatranslations.com
Lorena Ortiz Schneider, Assistant Administrator: lorena@ortizschneider.com
Date: April 3, 2020
Re: Interpreters Division Report

Leadership Council Members:

- Natalia Abarca
- Andreea Boscor
- Milena Calderari-Waldron
- Maha El-Metwally
- Christina Green
- Cristina Helmerichs
- Paula Irisity
- Flávia Lima
- Daniela Obregon
- Gabriela Penrod
- Carol Shaw

SUMMARY OF ACTIVITIES

BLOG:

<http://www.ata-divisions.org/ID/blog/>

We have blog posts in process for the next couple of months. We have been responding to the needs of our members and the conversations we see in our midst as we prioritize content in our blog. Our list of topics is flexible and responsive to our members' needs.

WEBSITE:

ATA updated the interpreter profile to match ASTM standards. The ID is preparing a blog post and article to describe the profession from that perspective. We thank ATA for having a profile that covers all the work interpreters do so we can meet the needs of our members comprehensively.

COVID-19:

Until now, 80% of interpreting was being provided on-site and in-person. Coronavirus has affected the on-site work our members do. A quick email to members in the discussion group revealed:

- 1) Conference interpreters have had conferences cancelled
- 2) Medical interpreters are being asked to report to work regardless of their health and to work without PPE (personal protection equipment). They are being reminded of the terms they agreed on, which sometimes include penalties for no-shows
- 3) The financial situation of interpreters is being seriously affected
- 4) The LEP population's access to services is being compromised, and they are often some of the most vulnerable to this pandemic (due to age and socio-economic status)

We are working as a Division to respond and support our members by keeping the communication channels open, sharing educational resources for the move to remote interpreting delivery of services, and by sharing terminology resources.

Helen Eby posted a link to the CDC that defines healthcare provider as anyone who participates in the medical care of the patient, paid or unpaid, and is within breathing range of a patient. This definition was in the page on the CDC describing protective measures for healthcare providers regarding COVID-19, and she recommended that medical interpreters take these precautions. This should be extended to court interpreters, who are in a similar situation.

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

COMMUNICATIONS COMMITTEE:

Our Communications Committee continues to coordinate the distribution of messages from the ID to its members via:

- Twitter.
- Facebook.
- Linked In:
- Google Group.

Our communications committee keeps us abreast of the issues interpreters are interested in so we can respond with timely blog posts and study issues that are pertinent to our members' needs. Therefore, we do not submit a count of tweets and posts, as much as we engage with members.

We are planning to have at least one meeting with our members online, as we did last year, to engage our members in a live teleconference conversation and discuss their perspective on current issues and their needs. We will report on those issues in a blog post and in our next report.

REQUESTS OF THE BOARD:

COVID-19 has thrown the entire interpreter community, world-wide, into chaos. Interpreting had been provided mostly in person, and by necessity is, at least temporarily moving to remote interpreting. The demand for on-site interpreting services has plummeted while remote has seen an increase but it has not completely covered it. People are just simply cancelling appointments. Therefore, interpreters have seen their livelihoods demolished for the near future. The rush to provide remote interpreting services, be it pre-scheduled and on demand, over-the-phone (OPI) or via video (VRI) including remote simultaneous interpreting (RSI) has led to much fear about fees and working conditions. The fear of lower rates is because most remote interpreting is paid per minute as opposed to per hour in cents instead of dollars. In some hospitals, interpreters have been interpreting remotely but from the hallways. In courts, interpreters have been asked to use wireless equipment to maintain the distance. These modalities should be explored.

The Oregon Health Authority recently released guidelines for infection control for in-person interpreters, which the ID is publicizing.

<https://sharesystems.dhsoha.state.or.us/DHSForms/Served/1e2288L.pdf>

We ask ATA to continue supporting messaging around:

1. Maintaining professional standards, including compensation for interpreters, as more and more end-users move to remote.
2. Educating consumers and the public about interpreting.
3. Ensuring lawmakers take freelancers and small to medium-sized business into account in any federal, state, county or municipal economic relief legislation.
 - a. In Oregon, there is unemployment assistance for the self-employed. We need to make our members aware of these resources across the country.
<https://www.oregon.gov/employ/unemployment/pages/default.aspx>
 - b. This resource is for disaster loan assistance for small businesses and homeowners, from the SBA. <https://www.sba.gov/funding-programs/disaster-assistance>

We also ask ATA to continue being the home for all interpreters by creating a space for conversation, sharing ideas, offering continuing education/professional development. We understand that a paper on remote interpreting is in the works.

Lastly, whether the COVID-19-induced social distancing is over or not, many who would normally attend the ATA annual conference may not be able to for financial reasons, especially those hardest hit economically, i.e., members of our division. Therefore, we ask the Board to keep us abreast of any plans for holding a virtual conference.

Yours, serving our colleagues,

Helen Eby

Lorena Ortiz Schneider