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International pharmacy students' role in translating an HIV and Aging survey from English to French, Spanish, and Vietnamese

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ABSTRACT

International pharmacy students enhance the healthcare landscape through unique vantage points and diverse communication abilities. Their impact actualizes beyond pharmacy settings into community service arenas. This paper describes a collaboration between international pharmacy students and a statewide human immunodeficiency virus (HIV) needs assessment project in the United States (South Carolina). By translating a survey designed for people living with HIV from English to French, Spanish, and Vietnamese, the international pharmacy students reported greater familiarity with HIV nomenclature and treatment parameters. They also shared their paths to the United States and the importance of frequent use of non-English languages to their survey translations. The international pharmacy students viewed the survey's lengthiness as a possible barrier to participation. Articulating these experiences may heighten awareness of the value international students embody along with motivate other international students to embrace moments that center their linguistic latitudes.

Keywords: Aging, HIV, needs assessment, pharmacy students, survey

The Accreditation Council for Pharmacy Education has encouraged students' willingness to address community needs (Accreditation Council for Pharmacy Education, 2015; Medina et al., 2013). This same accreditation body emphasizes pharmacy students' abilities to tailor communications to each patient's experience (Medina et al., 2013). Pharmacy students are compelled to assist with constructing printed materials that are relevant to respective organizational goals (Medina et al., 2013). Embarking upon projects that foster critical thinking and innovation allows pharmacy students to identify barriers and work towards solutions (Accreditation Council for Pharmacy Education, 2015). Furthermore, advances that pharmacy students make towards community priorities should be long lasting

and address aspects not explored previously (Accreditation Council for Pharmacy Education, 2015).

National and international pharmacy students' quest to expand their impact beyond classrooms into communities can leverage partnerships between pharmacy programs and community organizations (Accreditation Council for Pharmacy Education, 2015; Medina et al., 2013). International pharmacy students may particularly appeal to community groups as volunteers that can help diversify service offerings. For instance, international pharmacy students often have keen insights into traditional holistic remedies uncommonly understood among contemporary medical practices. In addition, international pharmacy students may be able to comment on cultural hesitations towards healthcare systems either through personal or communal accounts.

Nevertheless, examples of roles for international pharmacy students to assume that extend the reach of community affiliations are uncommon in the literature. Contextualized to this narrative, the definition of an international pharmacy student is one who attends a pharmacy program in a country different from the country of birth.

Hypotheses

The following hypotheses were proposed:

H₁: The involvement of three international pharmacy students with a local HIV Planning Council in the form of translating an HIV and Aging survey from English to their respective languages of French, Spanish, and Vietnamese would be mutually beneficial.

H₂: The three international pharmacy students would develop a better appreciation for the landscape of the HIV care continuum through their translation efforts.

LITERATURE REVIEW

Human immunodeficiency virus (HIV) is a global challenge that people understand to varying degrees (Gellert et al., 1995; Harris et al., 2016). Therefore, opinions about the plights of persons living with HIV (PLWH) may vary among cultures and nationalities (Bayon-Perez et al., 2016; Carrier et al., 1992; Carrieri et al., 1999). For example, Vietnamese-speaking persons might view HIV differently by gender and subsequently be impacted by stigmatizing beliefs (Carrier et al., 1992; Dinh et al., 2020; Elliott et al., 2003; Esposito et al., 2009; Gellert et al., 1995; Harris et al., 2016; Hershov et al., 2018; Kaljee et al., 2005; Mizushima et al., 2014; Quan et al., 2010; Reilly et al., 2013; Thai et al., 2016; Tran et al., 2014). French-speaking individuals may associate HIV acquisition with financial constraints, unsatisfactory employment facilities, and inconsistent sexual health messaging (Boyer, 2009; Carrieri et al., 2003; Carrieri et al., 1999; Carrieri et al., 2017; Greacen et al., 2012; Kalamar et al., 2011; Peretti-Watel et al., 2006; Rey et al., 2007; Tantchou, 2014; Tonen-Wolyec et al., 2018). In addition, Spanish-speaking populations might equate an HIV diagnosis to negative self-perceptions, often leading to higher depression rates, along with lower socioeconomic statuses (Bayon-Perez et al., 2016; Fuster-Ruiz de Apodaca et al., 2019; Morales et al., 2019; Ranjit et al., 2021).

Improvements in perceptions towards PLWH can likely arise through presenting health information in multiple languages (Dong et al., 2019; Kao et al., 2013; Searight &

Searight, 2009; Stavrakaki et al., 2012). Inabilities to decipher a questionnaire or other types of information-gathering documents, due in large part to language barriers, can precipitate detachment from and dismissal of data collection tools. Moreover, such disconnect could jeopardize opportunities to enhance health outcomes among impacted populations, specifically PLWH. Efforts to connect communicators fluent in non-English languages with people who speak those languages have been beneficial (Kunzli, 2004). Embedding healthcare students with multilingual abilities into interpretive and possibly translational spaces can generate meaningful learning experiences and augment interactions with historically underrepresented communities (Ryan et al., 2019; Yang & Gray, 2008).

METHOD

During pharmacy school, all students completed a course entitled “Communications” in their first academic year. This course comprised 2.5 credit hours, convening twice a week. An aim of the course was to expose students to facilitating patient interviews while utilizing conversational tenets discussed within the course. Furthermore, students learned about employing motivational interviewing skills to help patients change behavior, where appropriate. An additional aspect of this course included practicing optimal interactions with practitioners, peers, and prospective employers, in verbal and written formats.

Curricular Foundation

There were key components of the “Communications” course that likely benefited the international pharmacy students in their approaches to translating the HIV & Aging survey: completion of a cultural competency worksheet and construction of a patient flyer. The cultural competency worksheet addressed recognition of cross-cultural communication barriers. There were several identification of scenarios where professional interpreters are preferred over acquaintances/family member interpretations, and self-assessments of readiness to collaborate with interpreters. Students also developed patient education flyers that addressed specific public health priorities. The international pharmacy student translators along with other students in their cohort maintained access to the course content for future references. The international pharmacy student translators did not receive any additional formal preparation for their tasks beyond the Communications course.

Aside from the “Communications” course, which was administered roughly two years prior to the international pharmacy student survey translations, there is no other concentrated emphasis in the current school of pharmacy curriculum on verbal or written interpersonal skills. All national and international students present to pharmacy school with varying educational backgrounds, employment histories, and levels of community involvement, each of which may contribute to verbal or written acuties. The interview process for pharmacy school admission assesses candidates’ communication skills. However, the school of pharmacy does not require the Test of English as a Foreign Language (TOEFL) as a prerequisite to enrollment for incoming international pharmacy students.

Students' Background

Hailing from different parts of the world, a commonality shared among the international pharmacy students is their arrival in the United States as teenagers. All of the students attested to continual communications with family, friends, and acquaintances in their native languages while academic instruction and assessments proceeded in English. Considering the university that houses the pharmacy school where matriculation occurred does not offer formalized language support for English as Second Language students, being fluent in English prior to enrollment is critical for international students. The three international pharmacy students also commented on the benefits of being bilingual in community pharmacy settings. Having the acumen to explain key medication points to patients with limited to no English comprehension ostensibly works to optimize health outcomes and avoid adverse drug events.

One of the students, who speaks English and French fluently, journeyed to the United States approximately a decade ago, residing in largely French-speaking Cameroon until the age of 15 years old. She attended a francophone school in Cameroon beginning at the age of four years old, which reflected predominant usage of the French language countrywide. After arriving in the United States, her connection to French persisted in the form of daily communications at home; enrollment in advance French courses during high school; serving as a French tutor throughout undergraduate studies; and receipt of a minor degree in French through the Department of Modern Languages.

Another international pharmacy student, with fluency in English and Spanish, exited Puerto Rico roughly 15 years ago for the United States. With a mother who solely speaks Spanish, this student learned English after arriving in the United States; although she maintains her Spanish communications through daily exchanges in her home and employment settings. Notably, her Spanish acumen is beneficial to customers she serves in the pharmacy setting; interpreting key medication points for patients with limited to no English capabilities.

An additional international pharmacy student was born and raised in Vietnam where she began learning English in an extracurricular class at the age of five years old. Fluent in English and Vietnamese, she relocated to the United States over 10 years ago. At 16 years old, entering the United States as an exchange student, she subsequently completed her undergraduate and graduate studies in three states. Regular interactions with family and friends in Vietnamese has aided her enduring comfort with the language.

A standardized method to gauge fluency among the international pharmacy students in their native languages was not used. However, not conducting this type of assessment may have prevented the pharmacy students from feeling incapable of making translational contributions based primarily upon their lived experiences with the languages.

Survey Considerations

The South Carolina HIV Planning Council (SC HPC) consists of Centers for Disease Control and Prevention (CDC) – funded HIV prevention and treatment organizations that tackle barriers to healthcare such as unreliable transportation, housing instabilities, food insecurities, and inadequate access to medication therapies. Instituted over a decade ago,

the SC HPC meets quarterly either in-person or virtually. Approximately 20% of SC HPC voting members are people living with HIV. Two-year term limits are in place for SC HPC voting members, with an option for reappointment available. Four featured SC HPC workgroups are: 1) Adolescent Sexual Health 2) High Risk Priority Populations 3) Hispanic/Latinx 4) Women. Four of the standing committees of the SC HPC include Care and Support, Needs Assessment, Positive Advocacy, and Prevention.

Each standing committee routinely identifies annual priorities related to HIV care. The Needs Assessment Committee has been working with people living with HIV who are 50 years old and above for approximately two years. This resulted in a survey developed over roughly three months to assess the concerns of individuals within this population; physicians, nurses, pharmacists, researchers, social workers, case managers, and HIV peer navigators contributed to the survey content. A local university's institutional review board (IRB) approved the survey. The survey consisted of approximately 90 questions, with a blend of multiple choice and free text responses. Questions fell in to subsections that included Demographics, Needs relating to Aging, Barriers to HIV Care, Experiences with HIV-related Stigma, Quality of Life, Comorbid Health Conditions, and HIV information (Appendix). There was no requirement for participants to answer all survey questions. A Flesch-Kincaid Grade level of 4.1 populated for the survey, equating to a fourth grader being able to understand the document in context of a United States grade school level (Jindal & MacDermid, 2017). An estimated amount of time for participants to complete the survey ranged from 30 – 45 minutes.

RESULTS

At the time of survey translation, all three international pharmacy students were concurrently enrolled in an experiential rotation during their final academic year at an organization recognized for addressing needs of PLWH. The timeframe for completing survey translations was five weeks, coinciding with the duration of the learning experience. The SC HPC's Needs Assessment Committee chairperson approved the international pharmacy students to work on translating the surveys into their native languages. The pharmacy students were informed that the SC HPC would review their translations internally and consult with external entities for review as well. Survey translations took each student between 8 and 72 hours to finalize. Students collectively expressed the importance of their translational work as an acknowledgement of HIV prevalence in *all* communities, an effort to reach more people, and a reflection of the “melting pot” of many cultures residing in the United States.

A consistent concern among the student translators was the lengthiness of the survey deterring participation. A challenge that the pharmacy students faced was not having previous experience translating a health-care related document created for a specialized population. Moreover, an additional hurdle that the pharmacy students had to overcome was their nascent knowledge of HIV care and its associated social determinants of health. Practically, the pharmacy students also had competing interests from other academic and employment-related responsibilities.

The pharmacy students overtly expressed apprehension about the SC HPC's available personnel to explain the non-English survey contents and answer participants' questions in

their native languages. The students also anticipated stigmatized cultural views toward HIV that would affect community willingness to open up about the topic. Lastly, the pharmacy students were disappointed in not being able to see their translations implemented as they were nearing graduation.

Opportunities in the pharmacy curriculum for international students to display their bilingual abilities reportedly did not exist prior to this involvement. Due to their translational efforts, students remarked of an enhanced appreciation for and understanding of the survey content. Students were unrestricted in their use of translational assistance. As levels of fluency among participating students were not standardized, coupled with each language having its unique nuances, it is feasible that there were varying degrees of reliance upon translational aids. Hence, the SC HPC's Needs Assessment chairperson asked the pharmacy students to quantify how much they depended on external guides in their translation processes. Each pharmacy student attested to using supportive resources to translate less than 5% of the survey content on a scale of 0% to 100%.

As previously indicated, the SC HPC implemented an internal review of the pharmacy students' translations as a quality assurance measure, which has prevented their iterations from reaching community members as of yet. As a result, while the impact on SC citizens has not actualized, refined versions of these surveys should eventually add value to statewide HIV outreach efforts.

DISCUSSION

There are foreseeable limitations on the translation capabilities of the international pharmacy students described here. Considering these students have not practiced as licensed practitioners, it would seem advisable that they refrain from translating clinical documents such as those referencing diagnostic, prognostic, or surgical procedures. Additionally, their translation efforts should likely avoid content associated with considerations such as childbirth or end-of-life care. Alternatively, communications that aim to promote awareness and gauge perceptions of community residents should reasonably fall within the international pharmacy students' translational purviews.

A priority moving forward is consulting an organization with multilingual expertise for assistance with reviewing and refining student survey iterations. There is evidence that some international students tend to take more liberties in their interpretation efforts in comparison to seasoned interpreters (Kunzli, 2004). Furthermore, there are accounts of medical students who were thrust into serving as interpreters despite self-perceived feelings of inadequacy or unfavorable receptions of their role by professional interpreters and practitioners (Ryan et al., 2019; Yang & Gray, 2008). The pharmacy students completing this work may have experienced similar reservations about their preparedness to translate an HIV & Aging survey accurately. Therefore, identification and utilization of a third party entity with experience in language translations may be reassuring to the pharmacy student translators, SC HPC and corresponding survey recipients (Searight & Searight, 2009; Stavrakaki et al., 2012).

An additional ask of a multilingual consulting agency would be guidance towards identifying other languages ideal for HIV & Aging survey translation. Examples from the literature reveal strategies to maintain internal survey consistency of HIV-related content when moving from one non-English language to another (Morales et al., 2019).

Subsequently, efforts will shift to inviting more students and other members of diverse nationalities to engage community entry points appropriate for survey distribution. As healthcare students are currently entrusted with interpreting and likely translating information (Ryan et al., 2019; Yang & Gray, 2008), their potential awareness of methods to expand outreach efforts into even more international communities could be invaluable. Implementation of informed next steps post-survey translations should strengthen culturally relevant healthcare interventions.

Implications

All three international pharmacy students responded dutifully to the HIV survey translation request. Considering this opportunity was the first of its kind, gratitude and apprehension understandably coexisted. As the HIV epidemic has different effects on diverse populations, student translators tangibly addressed inclusion of French, Spanish, and Vietnamese-speaking communities often overlooked. Specifically, pharmacy student translators equipped the SC HPC to engage people living with HIV in languages familiar and fluent to them. Simultaneously, they interacted with HIV terminology and vernacular in their own ways, paralleling an evolving HIV drug therapy knowledge base. Unfortunately, their pharmacy school tenures would conclude prior to SC HPC implementations. However, each student was encouraged to mobilize their survey translation into settings that could benefit from it the most. As an example, they could appeal to their current pharmacy employers to embed refined versions of the survey translations into existing workflow processes, with support from subject matter expertise available through the SC HPC.

Recounting the journeys of three international pharmacy students' translations of an HIV and Aging survey into their native languages may inspire other international students to pursue endeavors that display their multilingual abilities. International healthcare students continually accept responsibility for bridging communication gaps between practitioners and patients (Ryan et al., 2019; Yang & Gray, 2008). As a result, additional trust is bound to develop towards healthcare systems, as international patients often view international healthcare students as advocates. Healthcare institutions may choose to feature community causes championed by international students to highlight diversity within their midst. In turn, international healthcare students, particularly relating to the three pharmacy student translators described here, may mentor other international students with academic, cultural, and social acclimations. International pharmacy students could also offer guidance to administrators about realistic routes to generate more linguistic development opportunities for multilingual students. Lastly, creation of ongoing roles for international students within bodies such as the SC HPC could facilitate access to invaluable insights on a perpetual basis.

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