REPORT: Learning review research for TWB trained community based interpreters in Nigeria.

To understand the learning points and possible impact of the training on participants.

Overview: what you absolutely need to know

This report evaluates community based interpreter training undertaken as part of the PROSPINE+ partners programme. Sixty-four community based interpreters of minority language attended 7 separate 2-day training sessions in Maiduguri, Bama (Borno state) and Damaturu (Yobe state) between August and November 2021. The key goals of the activity were to:

- Identify linguistic minorities and train community members to be interpreters as part of our drawdown strategy.
- Build on the volunteer community, with a focus on the targeted communities ProSPINE+ partners will work with.

The training objectives were to:

- Identify basic interpretation concepts and skills
- Describe humanitarian principles and how they relate to interpreting
- Develop an awareness of interpreting and humanitarian ethics
- Practice interpretation with vulnerable groups

The training topics covered:

- Introduction to humanitarian interpreting
- Interpreting context, concepts and skills
- Ethical principles and dilemmas
- Intercultural communication
- Preparing for interpretation session
- Language and terminology
- Working with vulnerable Groups
- Interpreting for children and persons with disabilities
- Self-care
- Gender Awareness

The evaluation and results are based on monitoring carried out during the programme via pre- and post training assessments and evaluations from participants, plus follow-up interviews with a sample of training participants between 1 and 3 months after the training to assess the longer-term impacts.

**Methodology**

Research for the impact assessment was carried out through 25 interviews with training participants up to 3 months after the training. Interviewees were selected to achieve a broadly representative sample across training participants. The interviews were conducted face-to-face for 15 participants and 10 via phone call by Ahmed Ali Saleh, Capacity Building officer, and Usman Ali Monguno, Project Officer. Thirteen respondents were women; 12 were men.

Interviews were conducted in Hausa and Kanuri language, with responses recorded in English by the interviewer.

This methodology is likely to have resulted in some bias towards higher results, as responses were not anonymous and were given directly to those involved in the training. However given the scope of the research this was considered to be an appropriate methodology.

**Key Results**

- **92% of those interviewed reported a language gap between humanitarian actors and their language community**
- **100% of participants were satisfied** with the training
- **Between 30% and 40% average increase in knowledge** and skills immediately following training
- **80% of those interviewed retained key knowledge** and learnings up to 3 months after the training
- **92% of those interviewed applied knowledge** and methods from the training in their work or day-to-day lives
● 100% of those interviewed reported improved confidence and improvements in their work as a result of the training
● 100% of participants would recommend the training to others

More detail on these results can be found here (interactive) and here.

Findings

Language Barriers

Most of those interviewed stated that they directly or indirectly face communication barriers due to their minority language status in their respective communities, either during focus group discussions, community sensitization, awareness or in the hospital with medical personnel. Some said they feel equally affected when some of their tribesmen or women cannot understand a crucial message being conveyed.

In addition, the majority (92%) report a communication gap between people who speak their language and humanitarian actors, which directly results in a lack of accurate information to those communities and exclusion from key feedback mechanisms. For example:

“A lot of people from my tribe cannot speak good Hausa or Kanuri, so mostly they reluctantly participate in FGDs or community activities.”

“My tribe’s people usually miss out on contributing in meetings and important gatherings and I do miss it too when the focus is on Kanuri or English.”

“The Kanumbu people who [speak] a minority Kanuri dialect in the camp always find it difficult to participate in awareness or FGD sessions.”

“It was when my organisation first came to inform us about what they do and the support they needed. As they’re speaking in English and Hausa I only got confused instead of understanding what they’re saying.”
Improved Skills and Confidence

The training was able to help participants break down those language barriers, by providing important techniques and methods which participants were then able to apply to resolve disputes, assist in providing accurate information to their communities and facilitate access to medical care, distribution and feedback mechanisms.

In addition to an improvement in self-assessed skills ratings immediately following the training sessions, of between 30% and 40% for each of the sessions, these skills and knowledge endured well beyond the training sessions themselves and were actively applied by the participants in their work with affected populations.

Overall, 80% of those interviewed reported retaining knowledge from the training up to 3 months later, and were able to cite skills, techniques and topics they had learned. This was consistent across most different demographic and language groups, however those who report speaking the majority languages as their main language at home (Kanuri, Shuwa or Hausa) show slightly lower results in both recall (71%) and application of knowledge (86%). This demonstrates that, although the training was still very useful to those participants, people whose main language is a minority language make even better use of the knowledge gained.

Some specific examples of the methods being used by minority language speakers include:

“I went together to the hospital with one woman from my language who cannot speak Kanuri or Hausa at all and my presence made it easy for the Doctor and her.”

“...in the Market between a Hausa and a Bolewa speaker. Is like a joke how I found it smooth and easy unlike before that I will be stammering between words.”

While there was a very strong improvement in skills and knowledge, most significant is the increase in people’s confidence and a corresponding improvement in their work. All participants in the interviews strongly agreed that the training has improved your confidence in the day-to-day tasks and improved your work or the way you work with the affected population. Interviewees reported:

“Now I interpret with authority unlike before that I interpret with no assurance of accuracy.”
“In the hospital I felt like I am more important than everyone and I was very happy.”

“It has improved my method of communication, I now use different approaches so that they don’t misunderstand us”

This confidence improves communications and relations with humanitarian actors:

“Normally i used to be timid, but with the skills, I can talk to them better and they understand me better”

“I used to be shy when I meet humanitarian workers because they didn’t understand my language, but now I have understood the principles of humanitarian which shows me such things as tribalism and religious sentiments don’t exist”

And also, confidence when dealing with large or diverse groups:

“During the awareness normally when there are elderly women and men, I used to feel a bit down but now I feel I can address congregations irrespective of their diversity”

“I have boosted my confidence while talking to large group of people and also how to confront people”

Training Topics

The majority of those interviewed recalled content covered in the training, including specific topics and issues. Key topics recalled include difference between translation and interpreting, interpreting skills, ethics, consecutive, relay, whispered and sight interpreting, communication, humanitarian principles, interpreting in different languages, GBV and languages skills training.

There were also important learnings around ethics and humanitarian principles. The ethics issue was also highlighted as challenging to practice by one participant. Other feedback suggested that there was a lot to learn and some participants felt a little rushed in certain topics.
Learnings

- Late communication about the training by their supervisors - There should be an early communication about the training so participants would prepare earlier
- Please let there be training allowance, because we are mostly unpaid community scribes
- Participants complaint of lack of transport allowance
- Some participants reiterated coming from far to the training venue
- Participants complaint of short notification about the training by their supervisors
- Lack of frequent training of this nature
- Lack of inclusion of persons with disabilities as community volunteers
- Participants complaint of lack of choice of meal from the Bama hub

Very few of those interviewed reported that they found the methods challenging to practice. However two raised issues relating to recalling the training content:

"Is just the feelings that can’t do this work at first but the moment I start I can recall all the demonstrations we had in the training reflecting in reality."

"I am just gradually using all I have learned and sometimes I get confused whether I am doing it the way you taught us"

And, one reported:

"Ethical dilemmas - I find it a little bit confusing especially when choosing which ethics to follow and which to compromise."

Conclusions & Recommendations

Community based interpreter training delivers excellent results for its participants and the communities they work in. It directly and indirectly breaks down language barriers, with those attending reporting significant improvements in knowledge, practice and confidence. Many reported specific incidents where the training enabled them to provide assistance and resolve situations that would not have been possible without the training. And many also reported transferring knowledge to others in their communities.

Training content/topics:
Introduction to humanitarian interpreting
Interpreting context, types and skills
Ethical principles and dilemmas
Intercultural communication
Preparing for interpretation session
Language and terminology
Working with vulnerable Groups
Interpreting for children and persons with disabilities
Self-care
Gender Awareness

...and high satisfaction scores demonstrate that methodology of delivery, logistics, event planning and skills of the facilitator are of a high standard.

Recommendations for future trainings:

- Training works well and the methodology, content and logistics should be retained for future trainings
- Topics were generally useful and well received, but more time should be given overall so that certain topics are not rushed
- Better communications about the training, particularly more notice given
- An allowance for those attending, in particular due to distances travelled to attend training
Interview with prospine+ community based interpreters
Community Based Interpreters: Impact assessment

Participant Overview

Age
- 18-24: 5%
- 25-34: 9%
- 35-44: 7%
- 45-54: 2%

Gender
- Female: 13%
- Male: 12%

Location Type
- Host Community: 14%
- Camp: 11%

Training Location
- Maiduguri: 18%
- Demshu: 4%
- Bama: 3%

Training Date (within the last...)
- 1 month: 8%
- 2 months: 8%
- 3 months: 9%

Main Language
- Kanuri: 3
- Mandara: 3
- Shuwa: 3
- Margi: 3
- Mafa: 3
- KareKare: 3
- Glavda: 3
- Ngizm: 3
- Manga: 3
- Kanurubu: 3
- Gamaru: 3
- Hausa: 3
- Kanuri badawi: 3
- Bolowa: 3
- BaburBurq: 3

Dominant Languages Proficiency

- English - Speaking: 4
- English - Reading: 4
- English - Writing: 5
- Kanuri - Speaking: 7
- Kanuri - Reading: 4
- Kanuri - Writing: 3
- Hausa - Speaking: 9
- Hausa - Reading: 3
- Hausa - Writing: 3

Click [here](#) to access an interactive version of the reports below. The interactive report can be filtered by key dimensions using the filter drop-down menus on the top right, and also by clicking on elements within the visualisations to highlight relevant data on the same page.
# Community Based Interpreters: Impact assessment

## Impact

<table>
<thead>
<tr>
<th>Recall</th>
<th>% Retained Knowledge</th>
<th>Application of Knowledge</th>
<th>% Applied Knowledge</th>
<th>Challenging</th>
<th>% Found Challenging</th>
<th>Improved Confidence</th>
<th>% Improved Confidence</th>
<th>Improved Work</th>
<th>% Improved Work</th>
<th>Recommend</th>
<th>% Would Recommend</th>
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<tr>
<td>4.12</td>
<td>80%</td>
<td>4.72</td>
<td>92%</td>
<td>1.56</td>
<td>8%</td>
<td>5</td>
<td>100%</td>
<td>5</td>
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<td>5</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Examples

**Interpretation skills and technique**
- **Main:** Yes, I went together to the hospital with one woman from my language who cannot speak Hausa or Haussa at all and my presence made it easy for the Doctor and her.
- **Gender:** Yes, during awareness raising.
- **Age:** I recently went to a place and the two of them were not talking. I used the communication skills learned and was able to help them resolve their disputes.
- **Training:** Yes, I applied the method of consecutive and relay interpreting.
- **Location:** Yes, I used my friends and family wherever we have someone that doesn't understand Hausa daily.
- **LGA:** Yes, difference between translation and interpretation.

**Communication with affected population**
- **Main:** Yes, my ability to interact with people from different diversity has improved.
- **Gender:** My communication has improved and I was able to resolve a dispute.
- **Age:** Like I did interpret in the hospital.
- **Training:** I was taught some people whom I believe are better than me to interpret some certain terms from English to Hausa and vice versa.
- **Location:** Yes, I learned better ways to communicate and interpret between humanitarian workers and 100%.
- **LGA:** Yes, due to my improved interpretation and translation skills, I now converse better with affected communities and I have reduced misunderstandings...

**Working in the hospital**
- **Main:** During the awareness normally when there are elderly women and men, I used to feel a bit down, but now I feel a lot more confident and can address congregations irrespective of their diversity.
- **Gender:** My communication has improved and I was able to resolve a dispute.
- **Age:** Yes, when I don't know meaning of specific word I ask people commonly it's not translating.
- **Training:** I have boosted my confidence while taking to large group of people and also how to confront people...
- **Location:** Yes, due to my improved interpretation and translation skills, I now converse better with affected communities and I have reduced misunderstandings...
- **LGA:** Yes, communication is better because I can speak English and interpret it to the community.

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