



KŌKUA MAU
Continuous Care

A Movement to
Improve Care

Report for the Hawai'i Community Foundation

January 2026 Palliative Care – Medical Interpreter Training for COFA Nation Interpreters in Hawai'i

Summary

In January 2026, we conducted a successful two-day, in-person training to help people from the Compact of Free Association (COFA) nations increase their medical interpreting skills. Eighteen people attended each day, and attendees were engaged and participated throughout the training. Many of them stayed on after the eight hours to talk to each other and continue networking.

Participants spoke Chuukese, Marshallese, Kosraean, Pohnpeian and Palauan. The first day introduced people to the basics of medical interpreting. For most participants, this was their first training in the basics of interpreting. The second day focused on Palliative Care and medical interpretation. Twelve participants returned for the second day, while six new attendees had more experience as interpreters and positively added to the group dynamic. Palliative Care was a new topic for all. They were especially interested in how the new Med-QUEST palliative care benefit could help their respective communities.

Our evaluations show that participants found the training useful, appreciated the training materials provided, and benefitted from the strong interactive approach. They felt that the trainer did a good job and would recommend the training to others. The only complaint was: “*there wasn't enough time*”! People appreciated being together with others from the COFA nations, being specifically invited and supported to attend (including travel stipends from neighbor islands), and increasing their medical knowledge. Dedicated materials created for the trainings in four COFA languages were well-received and will be made available in the future through the Kōkua Mau website so everyone can access and use them free of charge. People shared that they attended to increase their own skills but also to be able to help their communities.

This was a unique training and the first of its kind. We hope that it will lead to further engagement and activities with these communities. **Participants had a variety of suggestions for further engagement** including working through churches or community groups, providing worksite training for professionals or supporting additional interpreter training. Starting on Page 6 in this report, we include “Lessons Learned” and suggest “Possible Next Steps.” We look forward to helping with next steps and possible pilot projects.

Participant Feedback – From a follow-up call in February 2026

Taylor attended the Zoom training in December and the in-person session in January. He preferred the in-person session because he was able to sit with his fellow Pohnpeians and talk through some of the medical phrases in the glossary. During a follow-up call with Taylor, he mentioned that while he hasn't used his new knowledge in



a professional setting, he visited Maui and met with other Pohnpeians and shared what he learned with someone who was facing a serious illness, and how Palliative Care can support that individual and their loved ones. He was very excited that he could share his new knowledge and how it could support his community. He suggested in-person community education for the Maui Pohnpei community.

Need for the training

Kōkua Mau identified the need to provide training to (all medical) interpreters in Hawai'i to help them be more proficient with palliative care terminology and facilitate serious illness conversations. The request comes from palliative care doctors and other providers who use interpreters but find that the interpreters are often unprepared for the complex terminology and the stressful situations that are usually a part of palliative care conversations and decisions. The training should help the interpreters to be a part of the care team and be able to support patients, family and providers in creating high quality care plans and conducting meaningful conversations.

Additionally, Kōkua Mau has learned that there is a need for more medical interpreters and for community members to understand more about serious illness care, including palliative care and hospice. People from the COFA nations may be unfamiliar with the American medical system and therefore unfamiliar with concepts, terms and laws. It is important to say that many Americans who speak English are also not clear on these concepts, terms and laws. Kōkua Mau strives to address these misconceptions around the state in communities and with professionals through training and workshops.

Workshop Basics

We held a two-part COFA languages training course on January 23 and 24, 2026 to help build the skills of people who would like to improve their interpretation skills and to help their communities understand serious illness terminology and concepts. Participants included a wide array of people like those who interpret informally for family and friends as well as those who are already working as medical interpreters. Additionally, three Chuukese interpreters who work with the Department of Education (DOE) attended a day-long training the day before on January 22, for medical interpreters in palliative care, as they were unable to attend the Saturday session. These three interpreters were able to use the newly created materials, and their experiences are included in the evaluations. Their tuition was covered by the grant.

This training had participants from the Republic of the Marshall Islands, Federated States of Micronesia and Republic of Palau. Federated States of Micronesia has participants from Chuuk, Pohnpei, and Kosrae. (The main COFA languages needed in Hawai'i are Marshallese, Chuukese, Kosraean and Pohnpeian, according to the medical interpreter providers.)

Workshop Staff

In consultation with palliative care colleagues in California and Washington state, **Cindy Roat** was identified as a trainer with years of experience in training interpreters in



palliative care, a specialty that does not exist in Hawai'i. She is well-respected by professionals here in Hawai'i. Her biography is at the end of the report. Cindy has worked with the Marshallese Community in Iowa and is experienced in working with people whose languages do not have English equivalents, known as languages of lesser diffusion. Additionally, Kōkua Mau staff participated in both days, providing content expertise and logistical support. Jeannette Koiijane, MPH, is the Executive Director, and has worked in palliative care for over 30 years. She has also conducted in-person training in the Marshalls, Micronesia and Palau on palliative care. Hope Young is the Advance Care Planning Coordinator and has done in-person training in Hawai'i for COFA migrants, especially with Community Health Workers.

COFA Day 1: January 23, 2026, 9am - 5pm

The intended audience were speakers of COFA languages interested in taking the first steps toward becoming a professional interpreter. With the acute shortage of qualified COFA interpreters in Hawai'i encouraging people to consider this line of work is crucial. We had 18 participants on Day 1 including two from neighbor islands.

Day 1 of this in-person, interactive training was tailored to the audience and covered:

- The role of the COFA languages interpreter in health care settings in Hawai'i
- Ethics and standards of practice for interpreters
- What to do when "there is no word for that" in your language?
- Message analysis and conversion
- Next steps to becoming a professional interpreter and get paid for your skills
- Participants will receive a certificate of attendance

Requirements:

- Speak English and one (or more) of the following languages fluently: Marshallese, Kosraean, Pohnpeian, Chuukese.
- Be available to participate on-site at the training venue for 8 hours
- Have an interest in serving as an interpreter for their communities in health care settings.

COFA Day 2: January 24, 2026, 9am - 5pm

This interactive seven-hour workshop was designed to prepare experienced, **trained medical interpreters** of **COFA languages** to work in palliative care settings in Hawai'i or those participants who completed the January 23 training the day before. We had 18 participants on Day 2 including five from Neighbor Islands.

Content on Palliative Care and Interpretation

This workshop was designed by a team of interpreters and palliative care specialists to prepare experienced medical interpreters to work in palliative care settings. It was updated in 2025 by Hawai'i-based palliative care experts to assure that the content is current. (The training was delivered via Zoom to Hawai'i participants in December



2025 with good feedback and results) The training has been used in a variety of states and settings. It covers:

- An Introduction to Palliative Care
- Interpreting Skills Applied to Palliative Care
- The Vocabulary of Palliative Care
- Sight Translation in Palliative Care
- The Impact of Emotion and Belief on Interpreting

Materials updated and first-time materials created in COFA Languages

The PowerPoint presentation, vocabulary exercises and practice of both consecutive interpreting and sight translation were provided, as well as **bilingual medical glossaries** and practice activities in Marshallese, Chuukese, Kosraean and Pohnpeian, the four most needed languages for COFA migrants.

The bi-lingual materials were created in 2025 and used at the virtual training in December. It was the first time they were used for in-person workshops. Kōkua Mau worked with Cindy Roat and local translators to create these materials. Moving forward, Kōkua Mau will post them on the website so they can be used by interpreters and translators as well as bi-lingual health workers creating an important public community resource. These materials could also facilitate next steps in community outreach and education.

Certificate of Attendance

Students who attended all 8 hours of the training on January 24 received a certificate of attendance. This class is accredited for 7 continuing education credits from CCHI and 0.7 credit hours from IMIA although none of the attendees is certified as that is not yet possible in COFA languages!!

Extensive Recruitment and Publicity

Kōkua Mau used its extensive network to recruit for the training series. They reached out to Community Health Centers, Federally Qualified Health Centers, Health Systems such as Queens, Kaiser and HPH and health plans such as HMSA, AlohaCare, Ohana and United Healthcare. Additionally, they contacted various associations that support health and health workers such as the Primary Care Association, Hawaii Public Health Institute, and Healthcare Association of Hawaii. Outreach included other local organizations that work with COFA migrants including We Are Oceania, Family Promise of Hawaii, Kōkua Kalihi Valley, Safe Haven, and Kalihi Palama Health Centers. They contacted the consulates for all three nations as well as the medical programs at Tripler Army Medical Hospital who care for COFA migrants. To recruit from Neighbor Islands, Kōkua Mau reached out to Health Centers, Hospitals, hospices and organizations that serve COFA migrants such as Micronesians United – Big Island.

Kōkua Mau created an on-line registration, and participants got reminder emails and additional information to prepare for the sessions.



Additionally, Sue Zeng and Language Services Hawaii helped to publicize the training through their networks including the Hawaii Interpreter and Translators Association.

Positive Evaluations and Feedback– Summary of evaluations attached

Overall: People really like the training, the material and the opportunity to meet in-person. Participants liked the setting, the food and the chance to increase their skills for possible work and to help their communities.

Day 1 – Introduction to Medical Interpreting. We had 18 participants and 18 completed evaluations!! We have included in the attachments a compilation of the evaluations for both days. Participants rated the class as very useful, found the materials very useful and rated the instructor very highly. We have included below some of the actual comments on the evaluations in their own words

What did you like most about the class?

- Learning and practicing the art of interpreting together with my fellow Micronesian island language interpreters
- All the discussions on the agenda. Sitting alongside other Pacific Islanders. And sharing this moment listening to other points of view and experiences in their interpreting journey
- Everything/understanding and ethics standards
- Everything for the speaker to the food

What did you like least?

Fortunately, the only complaints that participants had: **there was not enough time.**

Other suggestions for improvement included:

- We need to learn medical terms more
- More time for practical exercises, group activities

How will this class help you in your interpreting work?

- Reference the importance of interpreting standard practice and efficient interpreting.
- Understanding what forms of interpretation to use in what scenario
- Ethics and time and understand the patient's needs/wants. Relay/convey message professionally and accurately.
- This class/training helped me to understand the introduction of interpreting
- It already has! Information overload at the moment but very helpful especially the standard of practice.
- It inspires me to learn more and use correct and appropriate language and things to consider when you're interpreting
- Help communicate and understanding our community as Marshallese
- Refresher training and information will always be useful



Day 2: Palliative Care and Medical Interpreting. People gave high marks to the training, materials and the trainer. People really liked the interactive sessions, group activities and learning about palliative care. 100% would recommend it to other interpreters. A sample of actual comments are included below.

What did you like most about the class?

- I love the small group exercises and also discussing as a larger group together (5+ people)
- Learning and understanding about palliative care period (4+people), interactive activities that we did amongst our islands. Bilingual glossary form.

What did you like least?

- Three people said “not enough time” and the others said they liked everything.
- Suggestions for improvements: more trainings and more than just two days.

How will this class help you in your interpreting work? 100% positive

- Gave me awareness to how hard this is but also why this work really needs to be done
- A lot. I learned a lot today coping with stress sharing and learning from other's stories or experiences.
- This class will help me be able to interpret more accurate in the palliative care
- I understand more on palliative care
- I have gained more tools and understand more of what Kōkua Mau's mission is for the community.
- Learn the different views of terms/phrases
- Much help for our community
- Gave me more knowledge

Observations and Lessons Learned

1. **Meeting in person with others from COFA nations is important.** The group dynamic was wonderful as people found long lost relatives and met others from their communities. The setting encouraged conversation and having on-site meals meant everyone stayed to socialize and network.
2. **Extra effort to include COFA participants was appreciated.** Participants appreciated that we had specifically reached out to them, facilitated their travel and participation, and valued their input and participation.
3. **Content of the workshop was relevant for participants including understanding serious illness care.** Clearly, the workshop content resonated with participants as it provided skills to help them improve their own skills and help their community. Nearly everyone had stories about a loved one with serious illness and learning about palliative care and hospice care was very timely. The interactive nature of the training meant people were encouraged to share stories which then empowered others to share as well.
4. **Health Literacy gaps and misunderstandings are real,** and much training is needed to increase people's understanding of medical issues as well as interpreting skills. Like with most people who are not trained in health care, there



are many issues and misunderstandings that must be addressed. There is a real need in Hawai'i for interpreters with comprehensive training who can help their communities understand health issues, including serious illness care, which will take time and support. But the basic skills presented in the workshop were a good first step.

5. **There is an important role for people who are not fully qualified as interpreters.** As people boost their skills and understanding, they can help their communities with health literacy, especially around serious illness care. This can be in a professional setting like a Community Health Worker or other health professional, or as lay community members. Clearly people are interested in learning about serious illness care, but this workshop showed that people do not know about palliative care, were unfamiliar with Advance Directives or understand what hospice care really was.

Possible Next Steps

1. **Include participants in the Kōkua Mau network.** We now have contacts around the state in different communities and can build on those connections to include participants in Kōkua Mau events and make them feel they are part of our network.
 - a. **Newsletter.** We have invited participants to join our free newsletter which provides updates, resources and educational events.
 - b. **Join Kōkua Mau events such as Palliative Pupus.** Inviting the interpreters to Kōkua Mau trainings can increase their skills and comfort with palliative care. For instance, at our invitation, four interpreters attended (via Zoom) our recent palliative care case discussion, Palliative Pupus, which involved a Chuukese family. In the session, the providers attending all expressed interest in learning more about Chuukese culture and decision-making. This may also help us identify people and organizations who could help with cultural understanding for providers.
2. **Reach out to participants to see who is interested in further engagement.** Participants in the training were very involved, and we can reach out to them to see who is interested in further training on Advance Care Planning, understanding treatments options, or other ways to engage around serious illness. However, we need to find additional funds for these activities. As we did follow up calls and during the training, people shared that they are very busy, money is tight and they would need support to make training happen.
 - a. **Identify additional funding for pilot projects in community engagement.** If there is interest, we could develop pilot projects with interested groups, but money would be needed to pay for food, site rental, interpreters, and time for coordination. As examples from our follow up calls, several people spoke about further sessions with their own personal church, one participant is involved in the new Marshallese group RiMeto and another spoke about working with Pohnpeian community on Maui. It is vital for such endeavors to



- have a champion on the inside that advocates for such trainings in their community.
- b. Create language groups to practice vocabulary and work through the new glossaries.** These could be in-person for several hours at a time in a convenient spot and people should be fed afterwards. There should be at least one language coach who is more familiar with the vocabulary. We could work with a small pilot group to see what will get them to attend and how to best structure this. And any changes could be shared on the Kōkua Mau website.
 - 3. Reach out to CHW and others in the health field for additional training.**

About half of the participants are already involved in health care and they can be approached for increased training and engagement starting with Advance Care Planning and care options such as palliative care and hospice care. All participants were interested in the new Med-QUEST palliative care benefit, but no one knew about it. Possible activities:

 - a. Professional Training.** Kōkua Mau can offer tailored training at the workplaces of participants. We have already begun with Kalihi Palama Health Center who has asked us to speak to three different staff groups. Other health centers were KKV, Waianae Coast and Hawai'i island health center.
 - b. Go Wish cards were a great tool to help with communication.** We shared the Go Wish cards with participants to show different ways of communicating about what matters most including during serious illness. People felt the cards would be a good way of communicating in their communities about serious illness, including with translated versions. Creating those translations could be a separate project. (These are available from the Coda Alliance and Kōkua Mau uses them extensively.)
 - 4. Provide training to healthcare providers.** Several possible topics for training emerged after these workshops.
 - a. How to work with interpreters.** Interpreters in the sessions shared that most healthcare providers do not know how to work with interpreters nor see them or include them as part of the team. Cindy Roat provides this training, and hopefully different parts of healthcare could work with her to improve their policies and practices.
 - b. Specific Palliative Care topics.** Providers are interested in learning more about their patients and there is interest in culturally specific trainings such as "Decision making in Marshallese" or "Chuukese Beliefs around Serious Illness". Kōkua Mau could host the training and put the recording on our website. This may help with cultural understanding and strengthen connections in both directions.
 - 5. Put all the materials up on the Kōkua Mau website plus other language materials.** Kōkua Mau will be creating webpages with the newly created materials so they can be used by the entire community. This will supplement the



existing webpages with Advance Care Planning materials in 13 languages. If language groups update the materials, the updated materials can be included.

6. Additional Interpreter Training Options in Hawai'i.

- a. **This in-person interpreter training was well received.** Could it be repeated? Kōkua Mau would be ready to coordinate.
- b. **Support local interpreter training. There is clearly a need for more interpreters.** Currently, all the courses in Hawai'i are virtual so people could take a 40-hour course that gives them the skills and certification. However, funding would be needed to pay for stipends, books, and course fees. Currently the Hawai'i Community College offers a training course for \$1100 for 40-hour course with a trainer from Virginia. In Washington state, an in-person Chuukese interpreter training was created stemming from a health system's inability to find qualified Chuukese interpreters. They are willing to share their lessons learned and were interested in the materials created here as the entire training is only in English. They had some good results, but it requires a commitment of time and money.
- c. **Support on-line interpreter training.** Several training programs exist although they are all on the US continent. Cindy Roat runs one, for instance, so she could advise us to what might work. (Cindy prefers in-person training for COFA and other languages of lesser diffusion.) She advises, for instance, that the training should be synchronous so people can practice in language pairs.
- d. **Explore creating more interpreter training options are needed in Hawai'i.** Perhaps there could be a brainstorming session with Sue Zeng at LHS and others interested in the issue, to see about expanding interpreter training in Hawai'i

- 7. Explore how to expand the skills of bi-lingual workers.** This training was just for interpreters, but people are often called on to use their language skills at work. Helping bi-lingual workers to expand their skills, using the new materials, is another possible way to strengthen community understanding. Adding to people's skills set could also increase their pay level. First steps would be brainstorming with a small group of people and developing pilot projects.

We are very grateful to the Hawai'i Community Foundation's support of this project through their Health Equity Fund. We look forward to working together in the months and years to come.

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Cynthia E Roat MPH is a consultant, trainer and researcher in language access in health care. Cindy entered the interpreting world in 1992 after earning her Master's degree in International Public Health from the University of Washington and quickly became certified by Washington State as a medical and social-service Spanish-English interpreter. Her interest in systems change, however, led her into teaching interpreters, trainers and medical providers the basics of interpreting practice and consulting with healthcare administrators around the country on how to improve their language access programs. She also spent three years at Seattle Children's Hospital, managing their unique Bilingual Patient Navigator program.

Cindy is the author of a wide array of key resources in the field, including the original version of *Bridging the Gap*, for many years the country's most widely-offered training for healthcare interpreters. She has developed numerous basic interpreter trainings and continuing education modules. Her most recent book, *Healthcare Interpreting in Small Bites*, is being adopted as an ancillary text in many interpreter training programs. She is a founding member of the National Council on Interpreting in Health Care (NCIHC), where she was a long-time Board member and Chair of various committees, a founding member of the Washington State Coalition on Language Access (WASCLA), and a former board member of the Northwest Translators and Interpreters Society (NOTIS) where she currently leads the Community Interpreter Division. She is known nationally as an engaging speaker, a knowledgeable resource, and an energetic advocate for language access in general.