

Internet Appendix A12: Healthcare

Figure A12.1 Illustrative Pitch Template

Pitcher's name	Wanvipha Hongnaphadol	Date Completed: 21 September 2015
(A) Working Title	Negotiating role identities of Thai and Japanese healthcare interpreters at Thai private hospitals	
(B) Basic Research Question	To what extent do Thai and Japanese interpreters have to negotiate the roles in provider-patient interactions? How does the role of Thai and Japanese healthcare interpreters conflict or overlap?	
(C) Key paper(s)	<ul style="list-style-type: none"> ▪ Fulahori, H.; Baba, Y.; Hioki, F.; Monkong, S.; Intarasombat, P. & Malathum, P. (2011). Healthcare services for Japanese elderly long-staying in Thailand from the perspective of the patient and healthcare providers: A survey study. <i>Archives of Gerontology & Geriatrics</i>, 53, 168-173. ▪ Laongbua, C. (2006). Health Service Utilization of Japanese Visitors in Thailand. Master Thesis, Mahidol University, Thailand. ▪ Hsieh, E. (2006). Conflicts in how interpreters manage their roles in provider-patient interactions. <i>Social Science & Medicine</i>, 62, 721-730. 	
(D) Motivation/Puzzle	The interpreter's various job titles & identities may influence his/her approaches to the assignments & clients. Although interpreters may recognize the need for their neutrality, their interpreting task may be intertwined with other obligations & identities, presenting challenges to their neutrality. What about those Thai and Japanese healthcare interpreters who are similarly based on collectivism cultural approach?	
THREE		
(E) Idea?	Previous research suggests that as Japanese healthcare interpreters having various role expectations, their role identities are conflicted and overlapped between that of provider proxy and patient's voice. It is interesting to investigate whether similar phenomenon applies to Thai healthcare interpreters for Japanese patients in two differently located chain hospitals.	
(F) Data?	<ul style="list-style-type: none"> ▪ Setting: Samitivej Sriracha Hospital (SSH) as it is strongly promoted as a Japanese hospital in the east of Thailand, and Samitivej Bangkok Hospital (SBH) ▪ Sample size: 40 Thai and Japanese healthcare interpreters (around half from each of hospital) ▪ Control variables: pay structure (salary level between that of Thai and Japanese interpreters, and between two hospitals), gender ▪ Scoping interview done with head of Japanese interpreters at SSH (August 2014) 	
(G) Tools?	<ul style="list-style-type: none"> ▪ Semi-structured interview & focus group discussion ▪ Content analysis; thematic analysis (NVivo or Atlast.Ti software) 	

TWO	
(H) What's new?	<ul style="list-style-type: none"> ▪ Role identities are normally employed in organizational performance research which evaluates the efficiency of those who hold several role identities such as mother and officer. Little research has investigated such role identity concept in a healthcare setting where life-saving is a sensitive issue. ▪ Although there is some research discussing the role management of healthcare interpreters, it has been done in the Western context, mostly in the US.
(I) So What?	<ul style="list-style-type: none"> ▪ Apart from knowing the role identity management of those healthcare interpreters, the knowledge of how and why they shift their frames of reference as provider proxy to become part of patient's voice will, in turn, also shed light on the role identity of Japanese patients whether they are being treated by a provider as a consumer or a patient. This will expand the existing knowledge of role identity theory. ▪ Understanding how to manage role identities of healthcare interpreters helps improve physicians-patient relationship and enhance the healthcare services quality.
ONE	
(J) Contribution?	Recommendations for interpreters to manage the conflicts of role performances influence quality of healthcare services & provider-patient relationship.
(K) Other Considerations	Realistic target journal: Kasetart Journal