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Prepared for the Licensing and Regulatory Affairs (LARA)

Michigan Interpreter Needs Assessment (MINA)



Innivee Strategies

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Agenda

Michigan's Interpreter Workforce: Where Are We Now?

- Project Purpose & Approach
- What the Data Tells Us
- Core Challenges Facing the Field
- Reframing the Interpreter Ecosystem
- Actionable Recommendations
- Open Q&A



Introduction

About Innivee Strategies

Innivee Strategies is a Deaf-led consulting firm that partners with organizations and systems to drive leadership, strategy, and community impact.

We specialize in leadership, organizations, and strategy centered on the lived experiences of Deaf and disabled people.

We believe systems change must be co-designed with the communities most impacted.

Our work in Michigan is not just about data, it's about laying the groundwork for real, lasting improvements in interpreter access, quality, and accountability.

Our lived experience and our professional expertise shape how we do this work.



We Are Disability-Led and DOBE-Certified
Not only diverse by design—we lead from within.

Michigan Interpreter Needs Assessment
Licensing and Regulatory Affairs (LARA)



Our Team



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Project Purpose & Approach

MINA Project Overview



Partnership

Collaboration between LARA and Innivee Strategies to better understand and improve Michigan's interpreter profession.



Purpose

Identify concrete, community-driven steps that strengthen LARA's ability to support Deaf, DeafBlind, and Hard of Hearing.

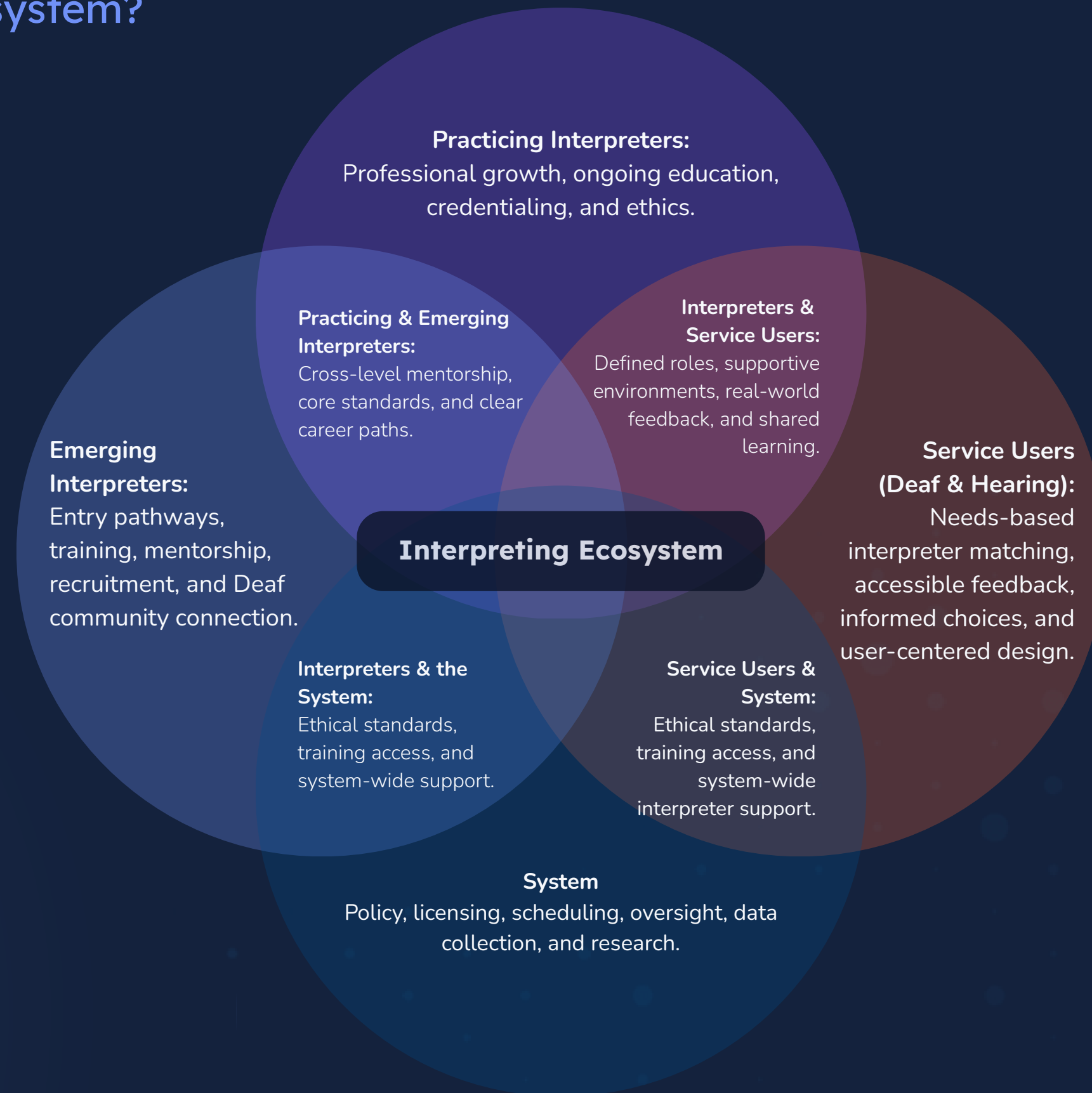


Approach

Mixed-methods design — combining surveys, focus groups, and interviews — to reflect lived experiences and realities.

Reframing the Interpreter Ecosystem

What Drives a Strong Ecosystem?



• MINA Data Scope & Context

◦ What the Data Tells Us



Who was the Primary Audience

- Primary focus on DDBHH individuals and interpreters.
- Further focus needed on hiring entities, interpreter coordination agencies, and other key stakeholders.



What was Happening in Parallel

- Some recommendations surfaced that LARA has been actively working on, such as drafting new administrative rules, updating online system, and more.



How Data Was Collected

- 356 Survey Responses
- 11 Individual Interviews
- 6 Focus Groups

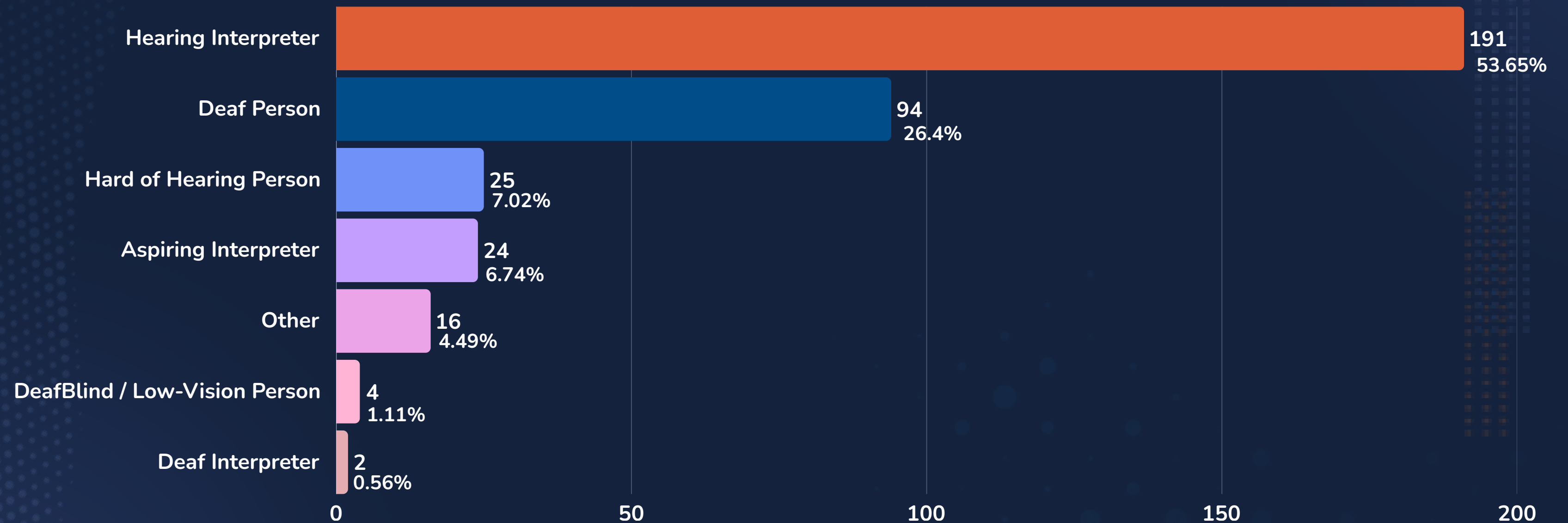


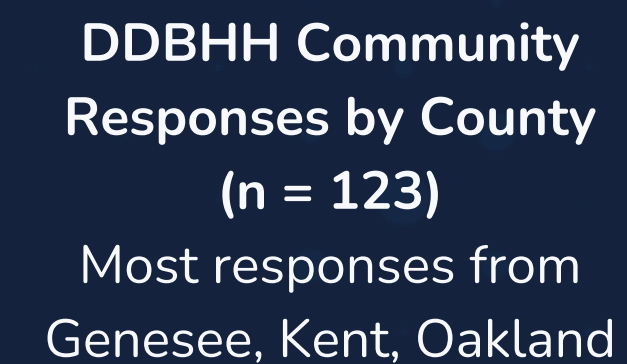
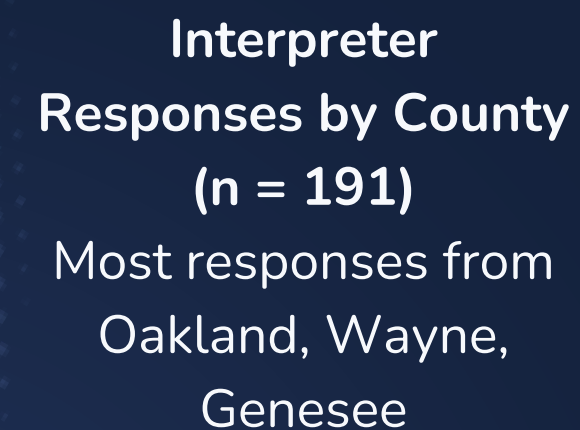
Why Terminology Matters

- Terms like *certified*, *licensed*, *qualified*, and *waiver* carry different meanings across communities, agencies, and the law.

Survey Demographics: Community Identity

What the Data Tells Us





Survey Demographics: Age, Gender, and Race

What the Data Tells Us



Age

- Majority (56%) of DDBHH survey respondents were older than 50.
- Interpreter survey respondents represented well-balanced age range.



Race & Ethnicity

- Majority of all survey respondents were white
- Slightly more diverse interpreter respondents than DDBHH



Gender

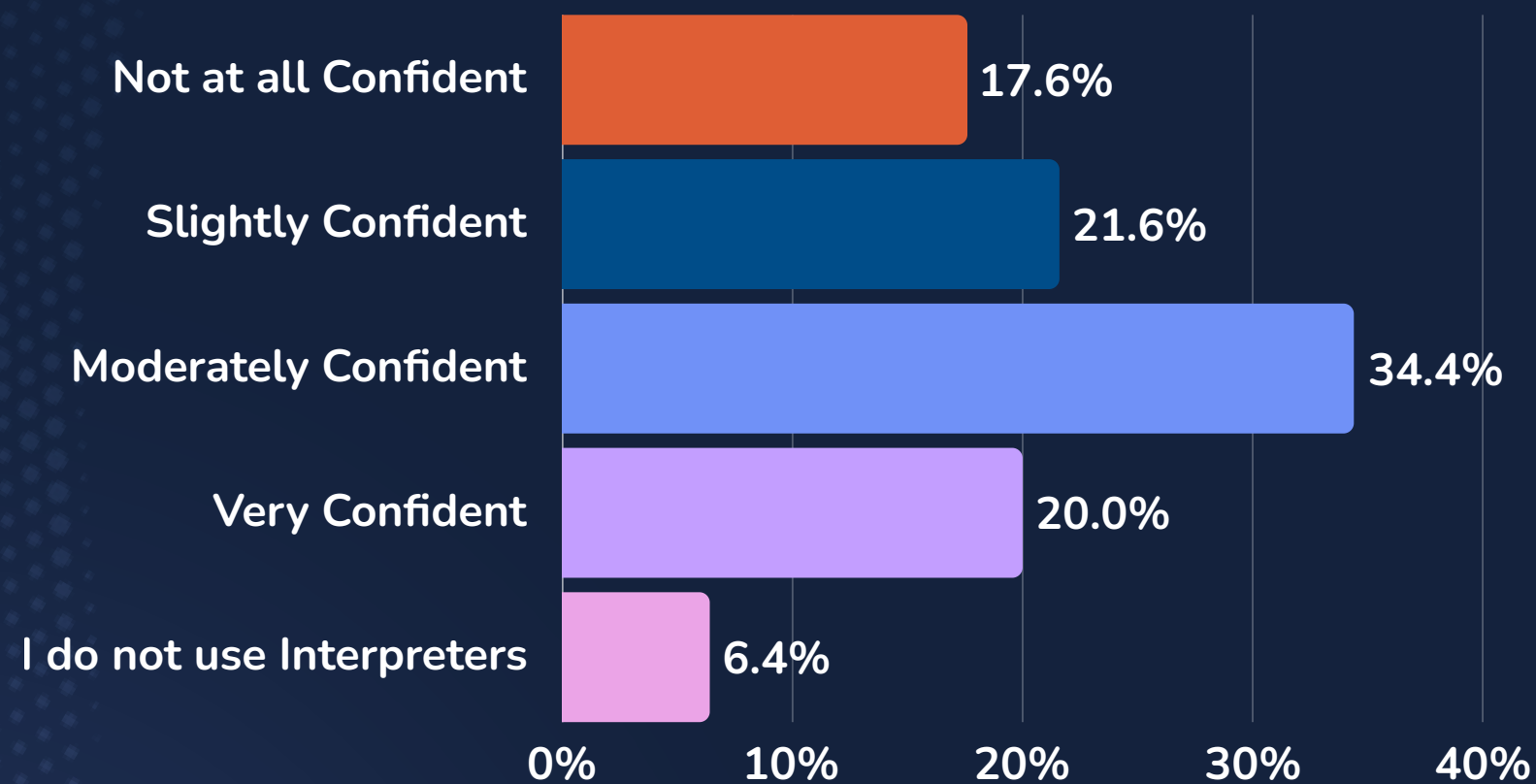
- Majority of all survey respondents were female.



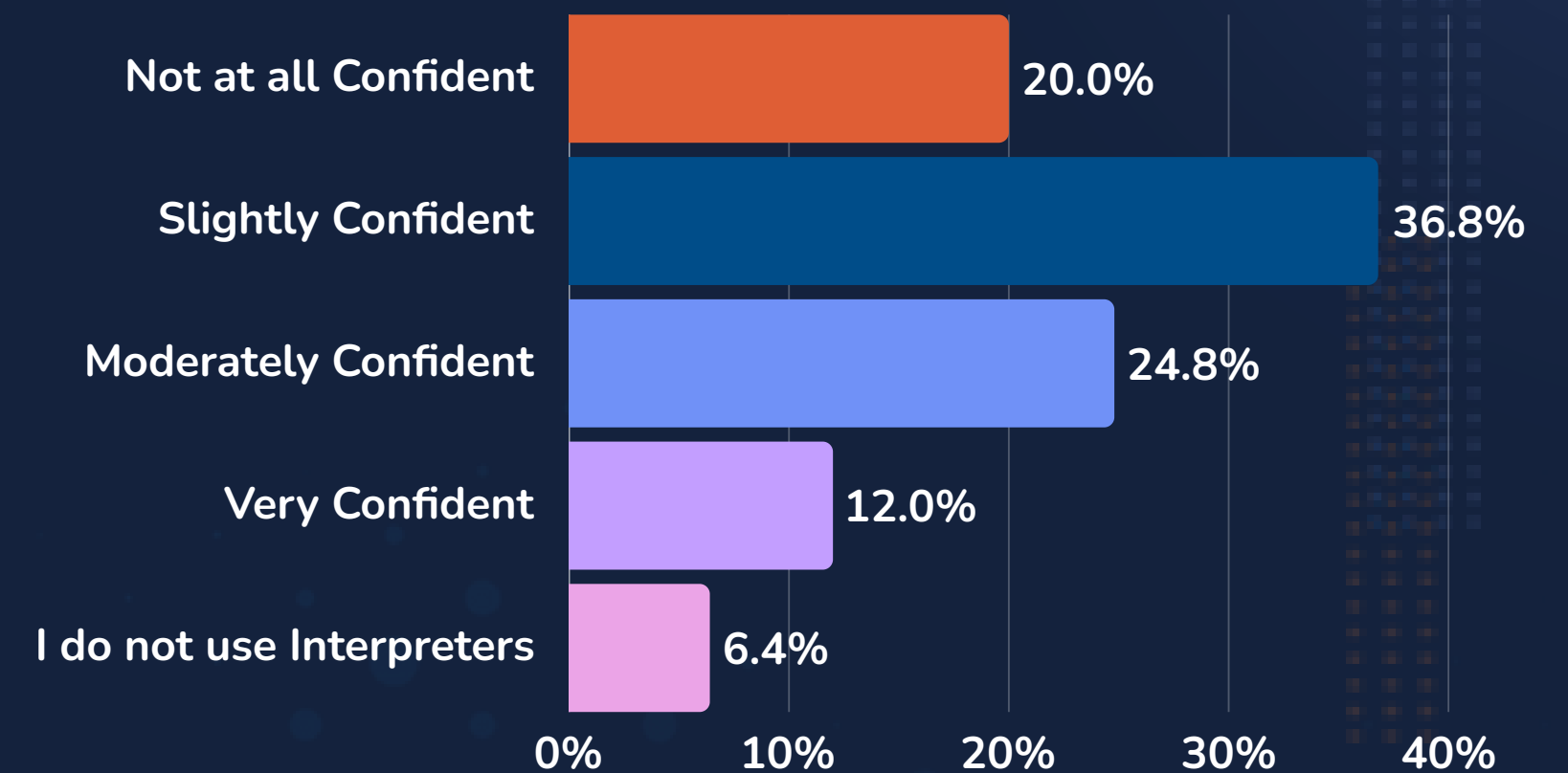
Deaf Community: Confidence with Interpreting

What the Data Tells Us

Confidence in Interpreter Request Being Filled



Confidence in Interpreter Meeting Expectations



Challenges faced by Interpreters & DDBHH

Key Challenge Areas

- Barriers to Entry
- Video Remote Interpreting Accessibility
- Regulatory Accountability & Oversight
- Regional Disparities in Access
- Unsustainable Interpreter Economics
- Challenges in Specialized Settings



Barriers to Entry

Key Challenge Areas

Gaps in Training: Most ITPs in Michigan are 2-year programs, graduates are not fully prepared for certification.

No Bridge to Practice: There is no structured pre-certification work pathway to build on real-world experiences.

Testing Barriers: Long wait times, lack of feedback, and limited availability of testing often delays or discourages certification.

*"Michigan does not create a compelling environment to stay in and pursue work after graduating... nearby states make it more favorable."
— Aspiring Interpreter*

*"Students cannot work without certification but cannot get experience to become certifiable."
— Interpreter Educator*



Video Remote Interpreting Accessibility

Key Challenge Areas

Technology Failures

Frequent freezing, delays, poor connectivity

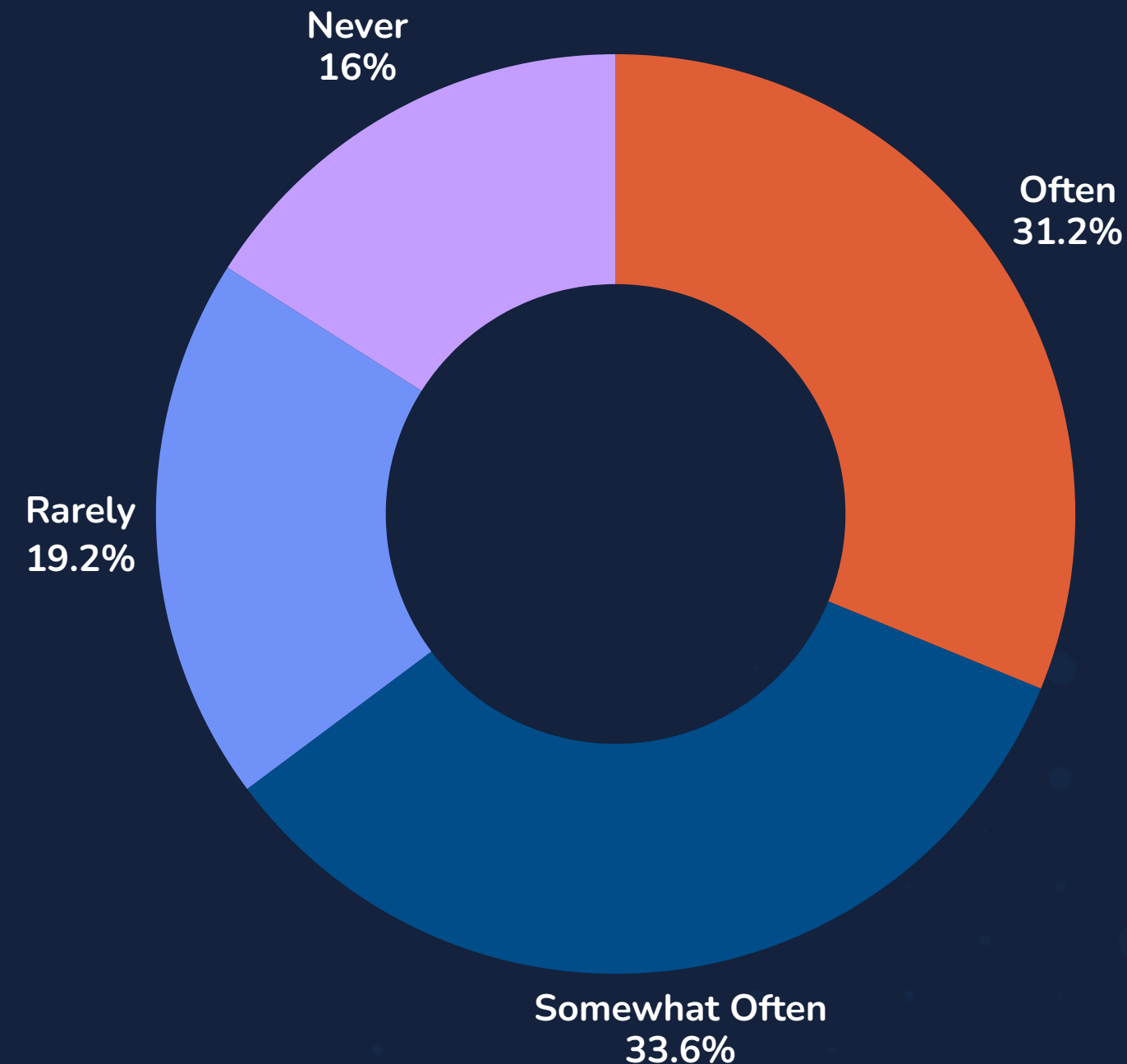
Over-reliance

VRI is being used as a default even when inappropriate.

Excludes DeafBlind

VRI is often inaccessible for tactile or low-vision communication needs

Frequency of VRI Issues



*“Hospitals/doctor offices feel using VRI works for ‘ALL’ — and the Deaf person has no choice in the decision making.”
— Retired Interpreter*

Regulatory Accountability & Oversight

Key Challenge Areas



Strong Laws, Weak Enforcement: Standards exist, but compliance often goes unchecked.

Burden on Community: DDBHH individuals and interpreters are left to advocate on their own.

Schools and Healthcare = Top Concern: Unqualified interpreters, misusing waivers, and lack of audits.

Coordination Agencies Need Oversight: Agencies vary in quality, accountability, and ethical practices.

Regional Disparities in Access

Key Challenge Areas



Southeast Michigan: highest concentration of interpreters



Western/Northern Michigan: “service deserts” - few providers

Rural areas face the most persistent gaps especially in healthcare, education, and daily life

“I was forced to complete my entire associate’s degree program without an interpreter... My degree had to be self-taught due to no interpreter availability in my county to access my classes.”
— Deaf Community Member

Unsustainable Interpreter Economics

Key Challenge Areas



Pay & Billing Practices

Low rates, inconsistent pay, professional overhead, and unsupportive labor practices among hiring entities.

Career Growth & Development

Access to professional development beyond ITPs including specialization, mentoring, and test preparation.



Workforce Attrition

Existing shortage of providers plus two-thirds of interpreters have 10+ years of experience — many are nearing retirement.

Challenges in Specialized Settings

Key Challenge Areas

K-12 Education

- Shortage of qualified interpreters
- Schools hiring uncredentialed or underqualified interpreters
- Lack of supervision and training for underqualified staff

Healthcare

- Over-reliance on VRI, even when inappropriate
- Lack of provider training on communication access
- Major in-person interpreters delays for DeafBlind and rural patients

Legal

- Few legal-endorsed interpreters
- High cost and limited access to training
- Clarity on how to meet endorsement requirements

DeafBlind

- Few DeafBlind-endorsed interpreters
- Endorsements do not guarantee interpreters prepared for individualized communication needs
- Critical access delays for medical and legal settings

Systemic Issues Across All Settings

- **Endorsements:** Perception that endorsements are difficult to obtain and maintain
- **Mentorship & Training:** Limited, inconsistent, and often cost-prohibitive
- **Oversight:** Minimal accountability and unclear state requirements
- **Burden on DDBHH Individuals:** Expected to educate interpreters

• Actionable Recommendations

◦ Seven Strategic Priorities

- ✓ Address Regulatory Barriers to Entry
- ✓ Establish Accountability in Healthcare VRI
- ✓ Modernize Regulatory Infrastructure
- ✓ Address Economic Sustainability Through Data Collection
- ✓ Expand Geographic Access Through Partnership
- ✓ Strengthen Oversight and Accountability Systems
- ✓ Support Specialized Workforce Development



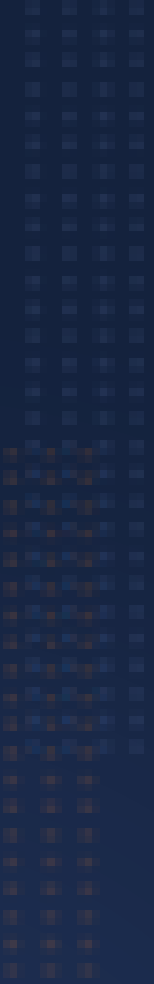
Open Q&A



Download MINA Report



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Thank you.
contact@innivee.com

This project was funded by the following organizations:

The Michigan Health Endowment Fund, which works to improve the health and wellness of Michigan residents and reduce the cost of healthcare, with a special focus on children and older adults. You can learn more at mihealthfund.org.

The Michigan Health & Hospital Association (MHA), a statewide leader representing all community hospitals in Michigan. MHA represents the interests of its member hospitals and health systems in both the legislative and regulatory arenas on key issues and supports their efforts to provide quality, cost-effective and accessible care. You can learn more at mha.org.