

# CAN ARTIFICIAL INTELLIGENCE INTERPRET EMOTIONS?

## TECHNOLOGY VS EMOTIONAL COMPLEXITY IN HEALTHCARE INTERPRETATION

CARMEN MERINO CABELLO  
LAURA MONGUILOD NAVARRO  
CARMEN PENA DÍAZ

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# Introduction

Interpreting is not only about transferring a message from one language to another, but also involves understanding cultures, identities and cultural dimensions, as well as universal emotions (Fidalgo González, 2019).

In healthcare contexts, the emotional dimension and intercultural sensitivity (Bennett, 1986) are central to the clinical relationship:

- intercultural mediation
- emotional regulation.

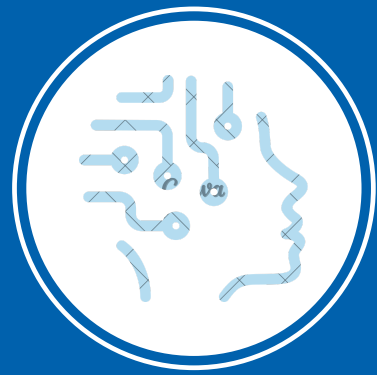


## **Artificial intelligence (AI)-based technologies**

Understanding, interpreting or expressing human emotions in an appropriate and culturally sensitive way



# Aim of the presentation



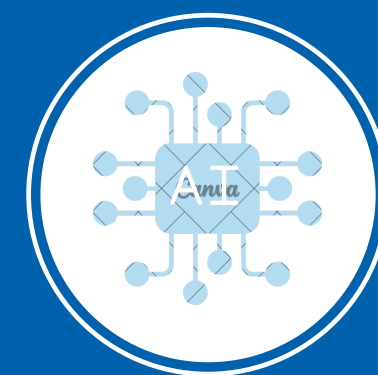
## Compare

the ability of human and AI  
systems to understand  
discourse nuances



## Analize

types of emotions  
cultural factors  
discourse markers



## Advocate

a critical view of the  
advantages and limitations of  
the use of AI  
in interpreting

# Emotional dimension and intercultural sensitivity

The affective dimension, often referred to as intercultural sensitivity, deals with the emotional competence and responsiveness of individuals when engaging across cultures.

Emotional competence is characterized by the ability to generate and receive positive emotional responses before, during, and after intercultural encounters (Chen & Starosta, 1996).



# AI-based technologies in T&I

Exponential growth of AI in translation and interpreting

- **Health chatbots:** assess symptoms, offer initial guidance, and refer complex cases.
- **Document translation:** natural language processing and predictive analytics.
- **Wearable devices:** monitor patients and personalise treatments.

# AI-based technologies in T&I

## PREVIOUS RESEARCH

### ADVANTAGES

Decision-making assistance: additional information about how patients perceive the conversation

### LIMITATIONS

- Lack of genuine empathy.
- Cultural adaptation challenge.
- Inability to communicate non-verbally through NVC elements.

# Analysis

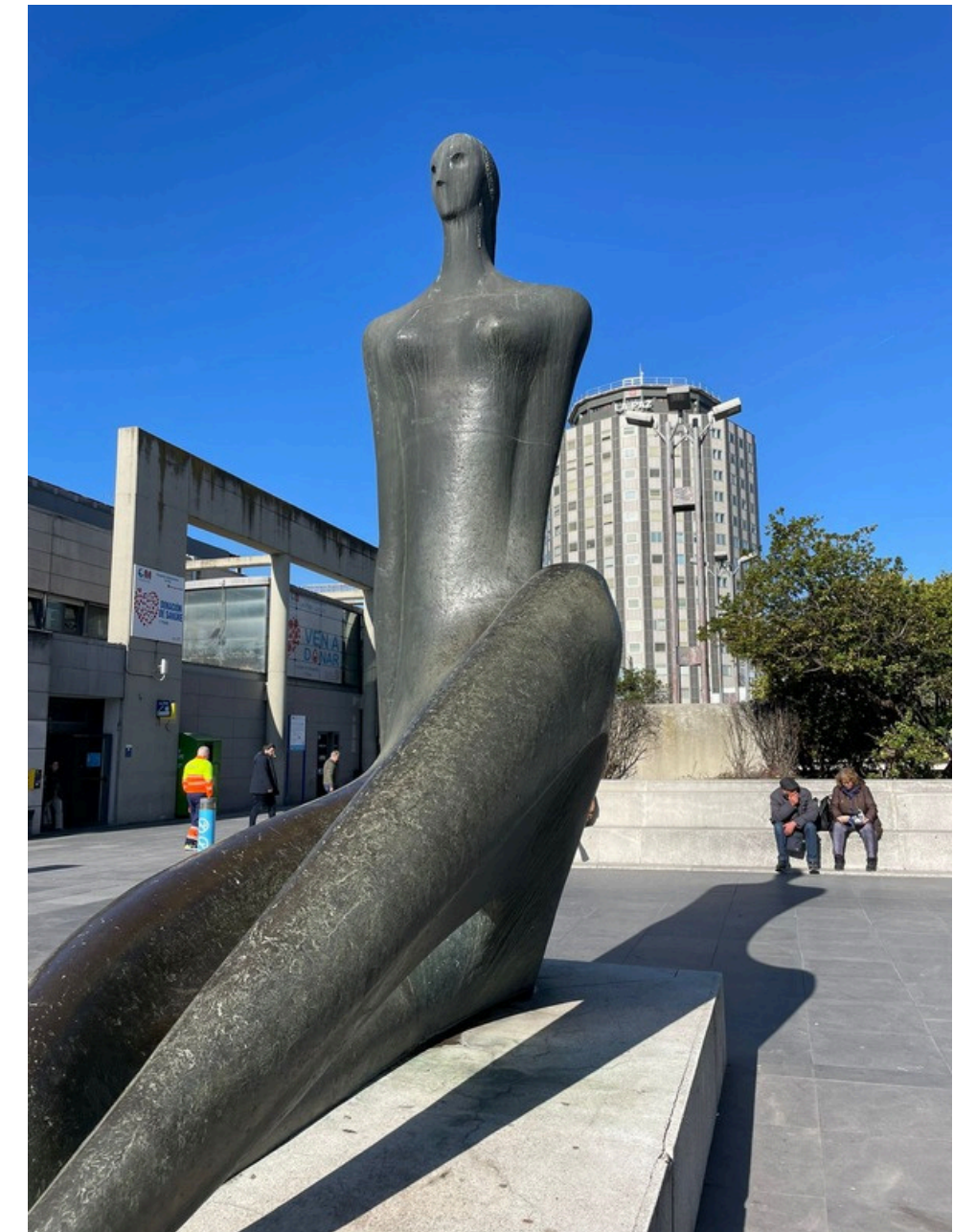






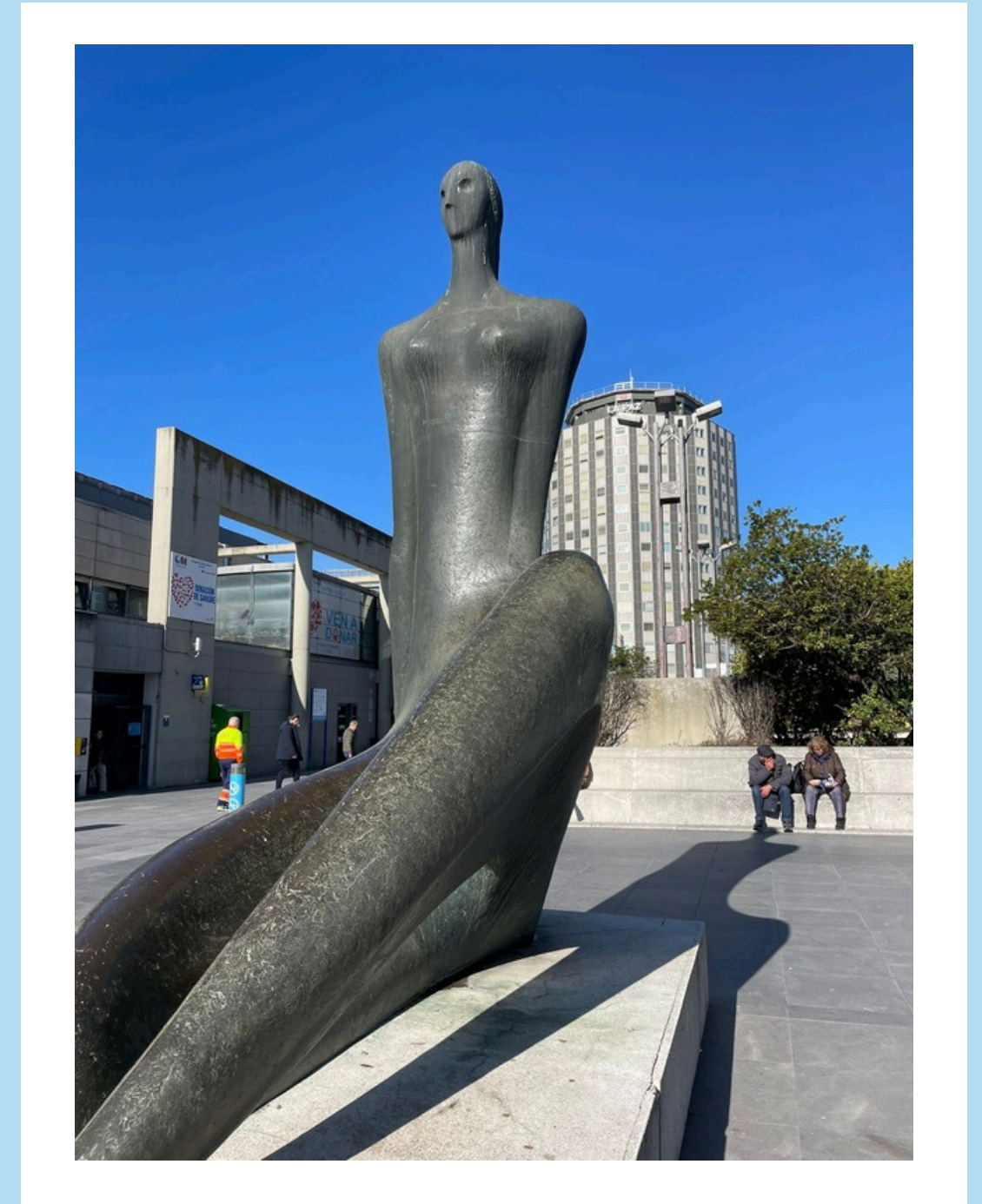
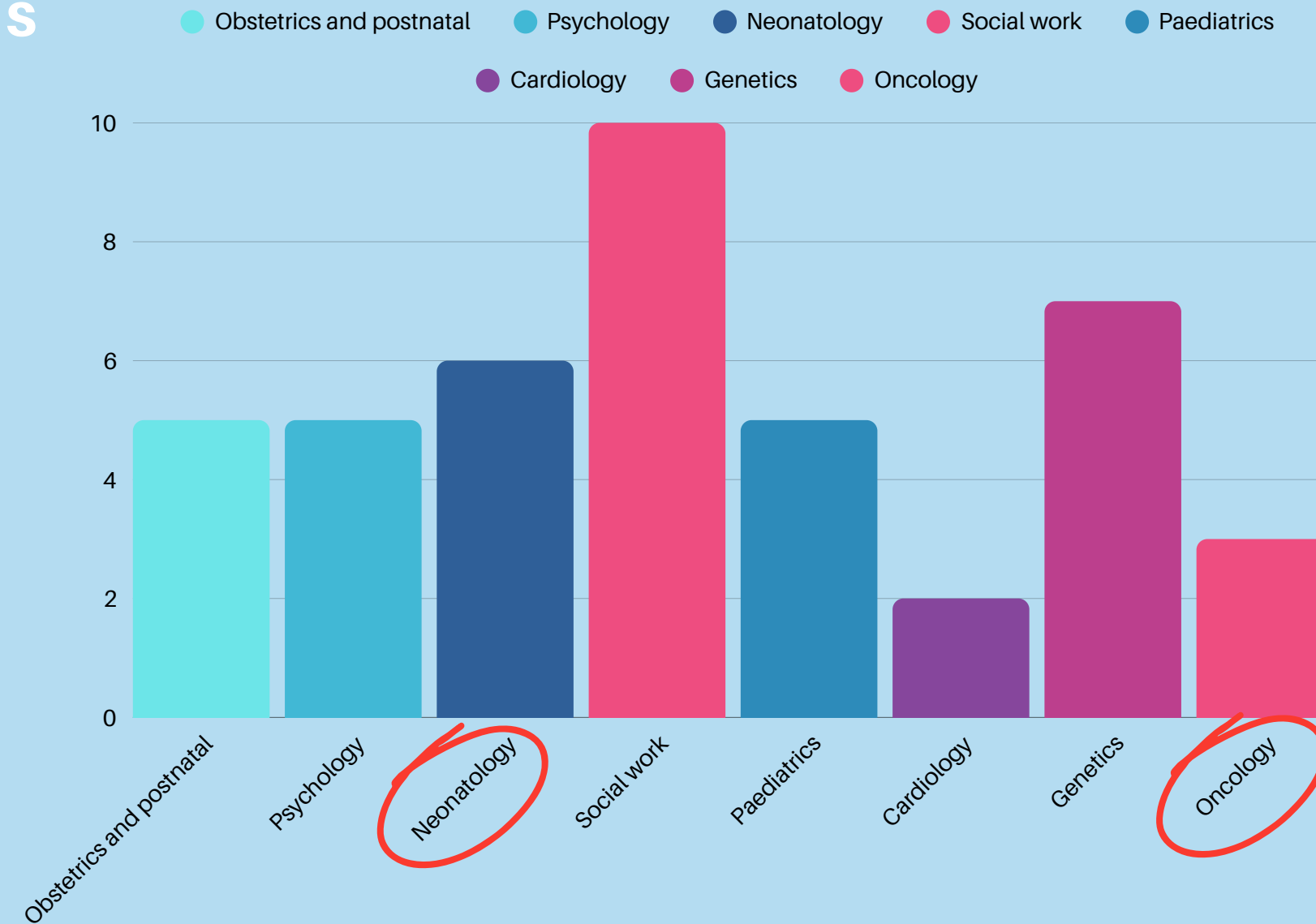
## NATIONAL RESEARCH PROJECT INTERCULTURAL COMPETENCE IN FEMALE HEALTHCARE INTERLINGUISTIC COMMUNICATION

- Free interpreting service
- Analyze recordings
- Define healthcare intercultural competence
- Training programme for healthcare professionals



## RESULTS

- 41 recordings



# Analysis

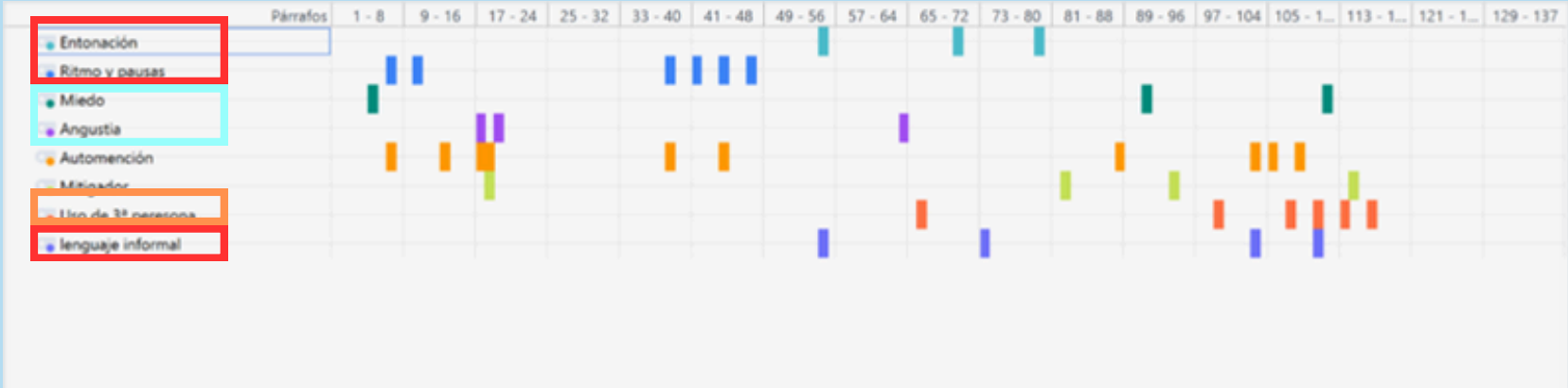
## 3 analysis dimensions:

- **Emotions:** joy, anxiety, fear, surprise, anger and disgust.
- **Cultural factors:** intervention and silence, rhythm and pauses, listening, intonation, authority and colectivity.
- **Discourse analysis:** certainty, mitigation, behaviour, relation and self-reference.





# Results



## Patient/Family Emotions:

- **Concern/Anxiety:** The patient's initial questions immediately after the doctor's explanation reveal significant concern about the child's condition and the proposed treatment. They ask directly, "La operación es difícil? ¿Cuál es su probabilidad de éxito?" <sup>64</sup>, indicating worry about the complexity and outcome of the surgery. This anxiety is further highlighted by their question about the origin of the infection: "¿esta bacteria de donde viene?" <sup>91</sup>, suggesting a desire to understand and perhaps prevent further complications.
- **Fear/Distress:** The doctor's statement that the child "fallecería" <sup>35</sup> if the operation is not performed would undoubtedly evoke strong fear and distress in the parents. Although not explicitly stated by the patient in Spanish, the gravity of this statement implies a high level of emotional impact.
- **Relief (potential/implied):** While not explicitly stated, the patient's final "Gracias" <sup>122</sup> after the interpreter explains the availability for future translations could imply a sense of relief at the prospect of continued clear communication and support during a difficult time.

## Medical Team Emotions (Doctor and Interpreter):

- **Informative/Explanatory:** The doctor's primary role is to convey complex medical information in an understandable way. Their language is factual and descriptive, explaining the heart's anatomy <sup>7 10</sup>, the child's specific condition <sup>18 21 24 47 52</sup>, the surgical plan <sup>29 58 61</sup>, and recent complications <sup>70 73 76 79 82 85 88 103 108</sup>. This suggests a professional and empathetic approach aimed at educating the parents.
- **Reassuring/Empathetic:** Despite the seriousness of the situation, the doctor attempts to offer reassurance, noting that "hay mucha experiencia en este hospital" <sup>67</sup> regarding difficult surgeries. This statement aims to alleviate some of the parents' anxiety about the operation's difficulty. The doctor also provides clear timelines for the surgery, contingent on the infection clearing, which can help manage expectations and provide a sense of control <sup>114</sup>.
- **Direct/Serious:** The doctor is direct about the necessity of the surgery, stating, "hay que hacerlo" <sup>32</sup> and "Porque si no, fallecería" <sup>35</sup>. This directness, while potentially alarming, is crucial for conveying the urgency and severity of the child's condition.
- **Practical/Supportive:** The interpreter's role is to facilitate communication, and their responses reflect a practical and supportive stance, ensuring the parents understand the medical information and the logistical details, such as their availability for future translations <sup>120 124 126 129 133 137</sup>.

In summary, the transcript primarily reveals the parents' understandable anxiety and concern regarding their child's critical health issues and the proposed surgery, while the medical team focuses on providing clear, factual information and reassurance within a professional framework.



| Emoción               | Fragmento representativo                                  | Intensidad | Comentario contextual                        |
|-----------------------|-----------------------------------------------------------|------------|----------------------------------------------|
| Miedo / Angustia      | "Porque si no, fallecería." / "¿La operación es difícil?" | Alta       | Emoción dominante ante riesgo vital infantil |
| Sorpresa              | "Ayer, de repente, Mohammed se puso malo."                | Media      | Noticia inesperada sobre el empeoramiento    |
| Asco (implícito)      | "Tiene una infección en la sangre."                       | Baja       | Posible reacción fisiológica, no expresada   |
| Enfado                | —                                                         | —          | No presente                                  |
| Alegría / Alivio leve | "Gracias."                                                | Muy baja   | Cierre educado, no eufórico                  |

| Elemento                  | Descripción                                        | Función comunicativa                         |
|---------------------------|----------------------------------------------------|----------------------------------------------|
| Intervenciones y silencio | Turnos respetados, silencios reflexivos y técnicos | Facilitan comprensión y contención emocional |
| Ritmo y pausas            | Lento, marcado en puntos críticos                  | Permite asimilar información delicada        |
| Escucha                   | Atenta, sin interrupciones, validando preguntas    | Refuerza empatía y confianza                 |
| Entonación                | Suave, modulada, enfatiza seriedad y calma         | Transmite seguridad profesional              |
| Autoridad                 | Basada en conocimiento, no imposición              | Da credibilidad y calma al interlocutor      |
| Colectividad              | Uso del "nosotros" y referencias al equipo médico  | Transmite apoyo institucional y cooperación  |

| Categoría             | Ejemplos representativos                                  | Función pragmática principal                                    |
|-----------------------|-----------------------------------------------------------|-----------------------------------------------------------------|
| Marcadores de certeza | "Tiene...", "Hay que hacerlo.", "Está con antibióticos."  | Transmiten seguridad y autoridad médica                         |
| Mitigadores           | "Pensamos que...", "Si todo va bien...", "Yo creo que..." | Suavizan la dureza de la información o la incertidumbre         |
| Actitudinales         | "A ver", "Vale", "Claro", "Es necesario..."               | Expresan valoración, guía o actitud empática                    |
| Relacionales          | "¿Vale?", "Les llamaremos", "Gracias"                     | Refuerzan cercanía y cortesía interpersonal                     |
| Automenciones         | "Yo creo...", "De mi parte...", "Les informaré"           | Refuerzan el rol del hablante y su responsabilidad comunicativa |

# Results



| Emotions (Evans, 2001) | Human analysis | Chat GPT | AI-Maxqda |
|------------------------|----------------|----------|-----------|
| Alegría                | 2              | 2        | 1         |
| Angustía               | 3              | 6        | 9         |
| Enfado                 | 0              | 0        | 0         |
| Miedo                  | 4              | 6        | 4         |
| Sorpresa               | 1              | 3        | 1         |
| Asco                   | 0              | 0        | 0         |

| Cultural factors                      | Human analysis | Chat GPT | AI-Maxqda |
|---------------------------------------|----------------|----------|-----------|
| Intervenciones y gestión del silencio | 10             | 5        | 14        |
| Ritmo y pausas                        | 13,5           | 3        | 12        |
| Escucha                               | 3              | 6        | 17        |
| Entonación                            | 3              | 6        | 0         |
| Autoridad                             | 1              | 6        | 33        |
| Colectividad                          | 2              | 8        | 2         |

| Categories (Garofalo, 2025) | Human Analysis | Chat GPT | AI-Maxqda |
|-----------------------------|----------------|----------|-----------|
| Marcadores de certeza       | 4              | 13       | 6         |
| Mitigadores                 | 4              | 12       | 4         |
| Marcadores actitudinales    | 2              | 9        | 2         |
| Marcadores relacionales     | 8              | 9        | 8         |
| Automenciones               | 22             | 12       | 8         |

## Examples of AI's analysis

- **Joy:** Doctor: "Ok? All right. Have a splendid weekend."
  - **Fear:** During the explanation of the informed consent: "...they will take out the breast and the tissue of the axilla..."
- **Rhythm and pauses:** Pauses for interpretation and after shocking messages
  - **Authority:** "We will try..."
- Markers of certainty:** "You will have an appointment for a blood test."

**Automentions:** I will give you informed consent

# Analysis comparison

## HUMAN

- Primarily intended for linguists and for the training of interpreters.
- The accuracy of discourse analysis depends entirely on the researcher's expertise and training.
- Human understanding of communicative subtleties (diminutives, third person, use of the plural).

## AI-MAXQDA

- It provides a clear overview of the emotions.
- It highlight the specific segments where such emotions.
- AI may help prepare for emotionally demanding situations.
- Unable to analyse dialects and two languages at the same time.

## CHAT GPT

- Is only able to register and quantify some emotions.
- Regarding cultural factors, it can provide some examples of all categories but is not able to provide an exhaustive analysis.
- Regarding discourse analysis, the engine can quantify but doesn't provide examples for all of them.
- Unable to compare all 3 analysis





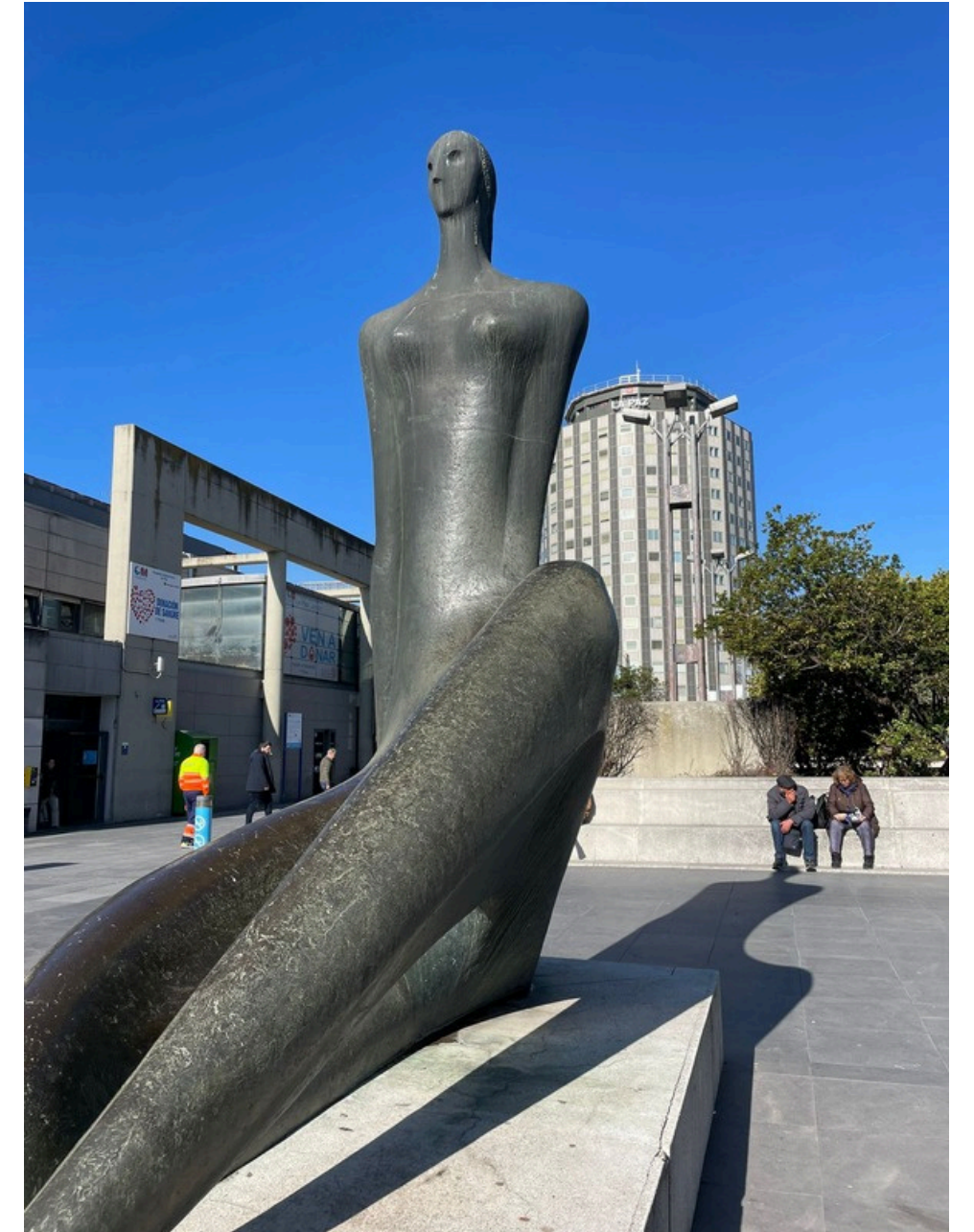
## CONCLUSION

Limits of AI and discourse analysis tools (AI-Maxqda and ChatGPT)

+ importance of human affective presence

- High emotional impact
- Unaccompanied patients
- Culturally sensitive issues

***THE INTERPRETER ACTS AS MORE THAN A TRANSLATOR: THEY BECOME AN EMOTIONAL MEDIATOR, A CULTURAL BRIDGE, AND SOMETIMES A SOURCE OF COMFORT.***



**THANK YOU!**  
**GRAZIE!**



carmen.pena@uah.es  
lmonguilod@usj.es  
carmen.merinoc@uah.es

