Working with Interpreters

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Learning Objectives

After this session, participants will be able to:

• Describe the role and responsibilities of an interpreter and interpretation

• Demonstrate cross-cultural and trauma-informed skills for an interpreted encounter

• Identify and address challenges with interpretation for clients, service providers, and interpreters

• Know where to find additional resources for interpretation
The need

- [https://www.youtube.com/watch?v=q5ZJzEeJbe0](https://www.youtube.com/watch?v=q5ZJzEeJbe0)
Language Rights & Realities

Title VI of Civil Rights Act of 1964: “No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.”
Modes of Interpreting

• **Consecutive**: interpreting occurs after the speaker has completed speaking
• **Simultaneous**: interpreting in real-time as the speaker speaks
• **Proximate**: interpreter is physically present
• **Remote**: interpreter is outside the room of the encounter
• **Word-for-Word**: verbatim; neutral; “black box”
• **Summary**: summarizes important points
Interpreter Associations of Standard Setting

- International Medical Interpreters Association (IMIA)
- The National Standard Guide for Community Interpreting (Canada)
- Australian Institute of Interpreters and Translators (AUSIT)
- *National Council on Interpreting in Healthcare (NCIHC)
Interpreter Core Values
(NCIHC)

• Beneficence: The well-being of the patient is central
• Fidelity: Faithfulness to role/assignment and to the message
• Respect for the importance of culture and cultural differences
Interpreter Roles

- Advocate
- Cultural Broker
- Clarifier
- Conduit
Trauma-informed interpreting

Why?

• History of betrayal by authority figures
• Significant distrust can prevent service access
• Focus on safety and empowerment
• Session content and client presentation may be overwhelming

What?

• Interpreter role is explicitly defined in front of client and interpreter
• Space and positioning take into account experiences of client
• Service provider explains confidentiality and consequences of breaches in confidentiality
• Interpreter receives trauma training
Basic Do’s

- Immediately establish the client-service provider dyad: make introductions and explain the interpretation process, roles, expectations, confidentiality, etc.
- Speak directly to the client and in the first person.
- Consider positioning.
- Look at the client, not the interpreter.
- Speak at a normal rate of speed and make your statements clear.
- Speak in short enough sentences for the interpreter to interpret.
- Say only what you want repeated to the client. Trained interpreters are obligated to interpret everything spoken or signed.
- Interrupt if something seems to not be going well.
Basic Don’ts

• Depend on children or other relatives and friends to interpret when other options are possible.
• Ask the interpreter to do something outside of her role as interpreter unless this was previously discussed and agreed upon.
• Ask the interpreter for her opinions about the client, unless possibly in a cultural broker or advocate role. The interpreter is simply there to communicate the information between you and the individual.
• Hold personal conversations with the interpreter. Once the interpreter has taken on his or her role, they can no longer be a part of the conversation.
• Stop to watch or wait for the interpreter to begin speaking. The interpreter may require a complete sentence in English before beginning to speak.
A Few Best Practices

1. Pre-session conversation with Interpreter
2. First-session conversation with client and interpreter
3. Debriefing conversation with interpreter
Best Practices: Pre-Session conversation with interpreter

- Explain purpose of the interview
- Confirm the mode of interpreting
- Request the use of first-person interpretation
- Discuss case, terminology, relevant background information, vicarious trauma
- Describe interview process (including seating arrangements)
- Discuss interpreter preferences (i.e. rhythm, pauses, etc)
- Encourage interpreter to interrupt and request speaker to slow down, repeat, or clarify
Best Practices: First-session conversation with client and interpreter

1. Explain confidentiality
2. Explain interpreter’s role
3. Describe interview (including seating arrangements)
4. Predict some initial “bumps” and planned adjustments
5. Predict that any participant may interrupt and request speaker to slow down, repeat, or clarify
6. Highlight eye-contact between therapist and client

Manage boundaries and professional behavior throughout
Best Practices: Debriefing conversation with interpreter

- Supports maintenance of boundaries for interpreter
- Acknowledge and thank the interpreter for his/her collaboration/contribution to the session
- Elicit feedback on notable speech (soft, stutter, long pauses) or response patterns (off-topic)
- Allow interpreter to discuss aspects that were confusing or distressing
- Direct interpreter to supportive resources
What are some challenges faced by interpreters?

- Strong identification to client or content
  - Shared cultural history or trauma history
- Survivor guilt
- Idealizing/Devaluing the patient
- Personal disagreements with the content or process
- Feeling overwhelmed
- Need to act
- Finding the right words
- Membership in community/role
- Vicarious traumatization
What about…?

- Bilingual Staff
- Spouse insisting s/he should interpret
- Phone interpretation
- Untrained interpreter
Let’s Practice

- Characters: Client, Provider, Interpreter
- Setting: Information gathering in intake/first encounter with a client
- Break into groups of three: interpreter, provider, client
- Provider asks 3-4 questions that are commonly asked at an initial assessment/intake at your agency
- Client: Responds to provider’s questions
- Interpreter: “Interprets” consecutively between Provider and Client (repeats what has been said in English)
- After 3-4 questions switch roles
Discussion

• What concerns did you notice in the role play?
• What could the provider have done differently before, during, and after the encounter?
• What could the interpreter have done differently before, during, and after the encounter?
Resource Sharing
References