THE CULTURAL INTERPRETER: AN APPRECIATED PROFESSIONAL

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36 INTRODUCTION

- Inter-regional Interpreters Bank
- Opinion on the Bank's services
- Confirmed interpreters satisfy both clients and health care workers

60,000 of the residents of the Montreal area do not speak French or English

«Act respecting health services and social services» (1991)

1993: Inter-regional Interpreters Bank is founded

70 cultural interpreters

Services in 50 languages

CONCEPT OF THE CULTURAL INTERPRETER'S ROLE

Two schools of thought

• Interpreters are halfway

• Health care workers: masters of their field

 Clients' authonomy (Charter of Rights and Freedom, 1975)

Code of Ethics

39 THE STUDY

- 11/1996-05/1997
- 38 clients, 33 workers, 12 interpreters
- 66 clients, 288 workers, 40 interpreters (questionnaires)

- Expectations of workers and clients
- Satisfaction
- Expectations of workers and interpreters
- Perception of the work
- How to improve service

40 METHODOLOGY

Exchanges used as basis for questionnaires

• Workers and interpreters had a "comments" section

41 WHO & WHAT WAS ASKED?

Clients

- Focus groups and subsequent questionnaire
- Express their preferences and degree of trust
- 10 statements agree/disagree
- Envelope

42 WHO & WHAT WAS ASKED?

Health Care Workers

- Focus groups and subsequent questionnaire
- Expectations of the interpreter, perception of the service and work methods
- Volunteer interpreters versus Bank's interpreters

43 WHO & WHAT WAS ASKED?

<u>Interpreters</u>

- Focus group and subsequent questionnaire
- Expectations of the working methods with the health care workers
- Perception of situations in which they had worked

44 RESPONSE RATE

- 27% clients
- 91% interpreters
- 35% health care workers

45 DIFFICULTIES

- Illiteracy of certain clients
- Language limitations of some health care workers

46 RESULTS

Clients

- Linguistic problems one of main obstacles
- Expectations towards interpreter:
 - Linguistic expertise
 - Confidentiality
 - Faithful translation
 - Discretion

47 **RESULTS**

Health care workers

- Expectations towards interpreter:
 - Help with communication
 - Proficiency
 - Precision and accuracy
 - Help respecting values and beliefs

HEALTH CARE WORKER SATISFACTION

- MAIN GAP BETWEEN BANK'S INTERPRETERS
 AND VOLUNTEER INTERPRETERS
- Knowledge of the health care worker's language
- Accuracy and precision
- Respect of values
- Confidentiality
- Remaining neutral (e.g. Emotional distance)
- Discretion
- Being more available

SMALLEST GAP

- Knowledge of the client's language (95% versus 80%)
- and culture (87% versus 76%)

50 INTERPRETERS

Work methods:

Making information available prior to the meeting

Explaining the objectives of the intervention

Introducing interpreter and health care worker to the client

Significative importance given to:

Flow of speech and pauses

Explanations about the culture

Debriefing after the intervention

HOW INTERPRETERS PERCEIVE THEIR ROLE

IMPORTANCE OF NEUTRALITY

- 83% of Interpreters feel a little uneasy or uneasy siding with the health care worker
- 53% explaining vaccinations, laws or a diagnosis (rare)
- 73% never done it before / question does not apply

52 ANALYSIS

• Heneman (1994): linguistic factors (37%) when accessing the formal network.

Supposition: Language as a barrier to use preventive care? (Woloshin)

Need: Understand and be understood

Worry: Inaccurate translation, semantic distortions and added or censored information

Health care workers

- Minimize the impact of culture (Kaufert, O'Neil 1990)
- Lend greater importance to confidentiality (vs. clients)

CONCLUSION

Bank's interpreters meet the expectations

BUT

Health care workers often recur to volunteer interpreters or colleagues.

Main concern: Cost of the interpreter

Bruners (1994): relying on a colleague for

interpreting costs \$11000/year.