

Communicating via an interpreter



This information sheet is one of a series produced by the Centre for Culture Ethnicity & Health (CEH) covering aspects of language services. It aims to enhance language services planning and practice for staff working with people with limited English proficiency.

This information sheet is for staff in funded agencies who are responsible for working with accredited interpreters. It provides basic information related to interpreting.

Victorians with limited English proficiency require some form of language service to overcome a language barrier in complex communication encounters with service providers.

The Victorian Government requires that government departments and funded agencies ensure people with limited English proficiency have the opportunity to participate in decisions that affect their lives. For more information go to www.multicultural.vic.gov.au/projects-and-initiatives/improving-language-services/

Before the interpreted discussion

For communicating via a face-to-face interpreter, ensure the room is set up with the desired seating arrangement and a glass of water is available for the interpreter.

For communicating via the telephone or videoconference, ensure that you are familiar with the technology you will use.

For telephone interpreting, inform the interpreter if you will have a telephone on speaker or will be handing over a handset, to allow for pauses before interpreting between parties.

Tip: To avoid potentially awkward contact between interpreter and client in the waiting room, you should organise a waiting area for the interpreter away from clients.

Tip: More information on the style of interpreting and seating arrangements can be found in the CEH information sheet Interpreters: an introduction.

Introduction

Be prepared for the first meeting with an interpreter to take more time than you usually allow for an appointment, as you will need to:

- Introduce all parties to one another and explain the interpreter's and your respective roles (do not assume the client, carer or other workers know the interpreter's role)
- Explain that interpreters are bound by their code of ethics to treat everything as confidential and that interpreters only

interpret what others have said and do not add explanations

- Ask if the interpreter and client know each other socially and whether the client is comfortable with the interpreter (see the CEH information sheet Booking and briefing an interpreter)
- Outline the process for good practice interpretation and your expectations for interpreted communication, such as keeping statements brief, pausing for interpretation and that everything said by all parties will be interpreted. Explain that if this process is not followed, you will stop the interview and restate the process.

Before commencing, ask if the client has any questions.

During the discussion

During the interpreted discussion, you should be aware of and adopt the following good practice approaches:

- Address the client directly (not the interpreter) during the discussion. For example, when speaking, ask the client 'how are you feeling today' rather than saying to the interpreter 'ask her/him how s/he is feeling today'. If the client addresses the interpreter directly, intervene and request the client speak directly to you.
- Be aware of your own body language and that of the client and the interpreter. As with spoken language, your body language should indicate you are addressing the client and not the interpreter. This applies to face-to-face interpreting and telephone interpreting (leaning over or looking at the telephone).
- Speak clearly and in simple sentences. Ambiguous or complex sentences increase the chance for misinterpretation.
- Make one point at a time. This allows the interpreter to understand and remember what is being said.
- Pause for the interpreter to interpret what you said and for the client to respond.
- Avoid colloquialisms and jargon and explain technical terms if used.
- Avoid jokes, particularly puns, as these generally don't translate well across cultures.
- Allow the interpreter to clarify information. Ask the interpreter to explain this to the client first.
- Invite the client to ask questions at any time.
- Summarise the discussion occasionally to ensure the client understands the information.

If at any stage during the discussion there are any concerns about the interpreter's conduct interfering with communication, stop the meeting. Restate your expectations to the interpreter and continue with the discussion or cancel the meeting.

Tip: For more information on better communication, refer to CEH information sheets on health literacy, particularly Verbal communication and Using the teach back technique.

Interpersonal dynamics

It is your responsibility to control the interpreted discussion. The presence of an interpreter alters the relationship between you and your client. Be aware of the following distortions:

- Interpreter-client over-identification: the interpreter and the client form an alliance excluding you.
- Interpreter-staff member over-identification: you and the interpreter form an alliance excluding the client.
- Interpreter dominance: the interpreter assumes control of the discussion.
- Interpreter rejection: the client rejects the interpreter.

These distortions can be avoided or minimised by briefing (role clarification) and debriefing (exploring issues arising) with your interpreter.

Ending the discussion

Summarise the discussion and check whether the client is ready to end the discussion and there are no further questions.

Allow the interpreter to leave separately to the client.

If you plan to debrief with the interpreter, the client should leave first.

If you have concerns about the interpreting that you want to discuss with the client, this can be attempted immediately through a telephone interpreter service once the interpreter has left.

If you need to speak to both the client and the interpreter, ensure the interpreter leaves first and waits in another room. Conduct your discussion first with your client.



Information sheets in the CEH language services series

INTERPRETATION

1. Interpreters: an introduction
2. Assessing the need for an interpreter
3. Booking and briefing an interpreter
4. Communicating via an interpreter
5. Debriefing with an interpreter

TRANSLATION

6. Translation: an introduction
7. Planning for translation

BILINGUAL STAFF

8. Recruiting bilingual staff
9. Managing bilingual staff

ORGANISATIONAL RESPONSE

10. Developing a comprehensive language services response

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