

Language support

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Case

Mariam is a 28-year-old woman from Guinea. She suffers from regularly recurring bladder infections. She is pregnant (unplanned). She speaks French, does not require an interpreter but explains during a consultation in which an interpreter (a niece of hers) happens to be present that she has had some terrible experiences in her home country. The support worker speaks school French.

In practice

What are the risks of a language barrier?

- An inadequate transfer of information with an impact on a person's faith in therapy, for instance
- Risk of misunderstandings, insufficient mutual understanding
- Risk of conflict
- Risk of medical errors
- Impact on health

How do you determine a common language?

- Is there a common language (lingua franca)?
- In which language does the patient want to communicate?
- How well does each party speak the common language?
- Is there no common language? Or do the parties not speak it well? Use an interpreter!

What language support is available?

1. Professional interpreters

- Live interpreter present in meeting
 - Plan in advance
 - Trained interpreters
 - City-based or regional interpreting service
- Intercultural mediators
 - Present in hospitals
 - Limited number of languages
 - Trained interpreters
 - Cultural "adaptation" in addition to translation
- Telephone interpreters
 - Semi-professionally or professionally trained
 - One-time registration
 - Telephone with or without a microphone
 - Disadvantage: non non-verbal language
 - <http://www.vlaamsetolkentelefoon.be>

- <http://www.sociaalvertaalbureau.be>
- Video interpreting
 - Temporary pilot project
 - Less planning required
 - Non-verbal communication also possible
 - Very accessible
 - More information: Intercultureel Bemiddelen (intercultural mediation) project
 - Coördinatiecel Interculturele Bemiddeling (intercultural mediation coordination unit) (Hans Verrept en Sonia Baatout) Dienst Psychosociale Gezondheidszorg (psycho-social healthcare service), FOD Volksgezondheid (federal public service for public health) hans.verrept@gezondheid.belgie.be

2. Non-professional/informal interpreters

- Family members, acquaintances, foreign-language colleagues, children
- No previous specific education
- Be aware of confidentiality, accuracy and completeness of information
- If possible: do not use young children
- Avoid distractions (telephones, interruptions in the discussion, ...)

What skills are required for a meeting in which an interpreter is present?

- General discussion skills during a meeting in which an interpreter is present
 - Emphasise confidentiality.
 - Use short sentences and questions, both during the discussion of the medical history and the information phase.
 - Look at the patient; speak directly to the patient.
- Has the patient arrived with an informal interpreter?
 - Try to find out their relationship to the patient. How suitable is this interpreter?
 - Which common language is used? How well does the interpreter speak this language?
 - Identify the task of the interpreter. Thank the interpreter for the help they are offering.
 - Ask the interpreter to translate everything in both directions, as accurately and completely as possible.
 - Let the interpreter know that he/she may interrupt if something is unclear.
 - Maintain a clear structure in your own communication. Do not give too much information at once!
 - Keep an eye on the patient's non-verbal reactions.
- When is it absolutely necessary to use an interpreter (preferably a professional one)?
 - In a meeting in which bad news is given
 - With complex diagnoses
 - When the patient is not compliant, and you suspect mutual misunderstandings may arise
 - If you suspect underlying or clear psychological problems

Do you want to know more?

http://www.kruispuntmi.be/sites/default/files/bestanden/documenten/adressenlijst_sociaal_tolk-en_vertaaldiensten.pdf