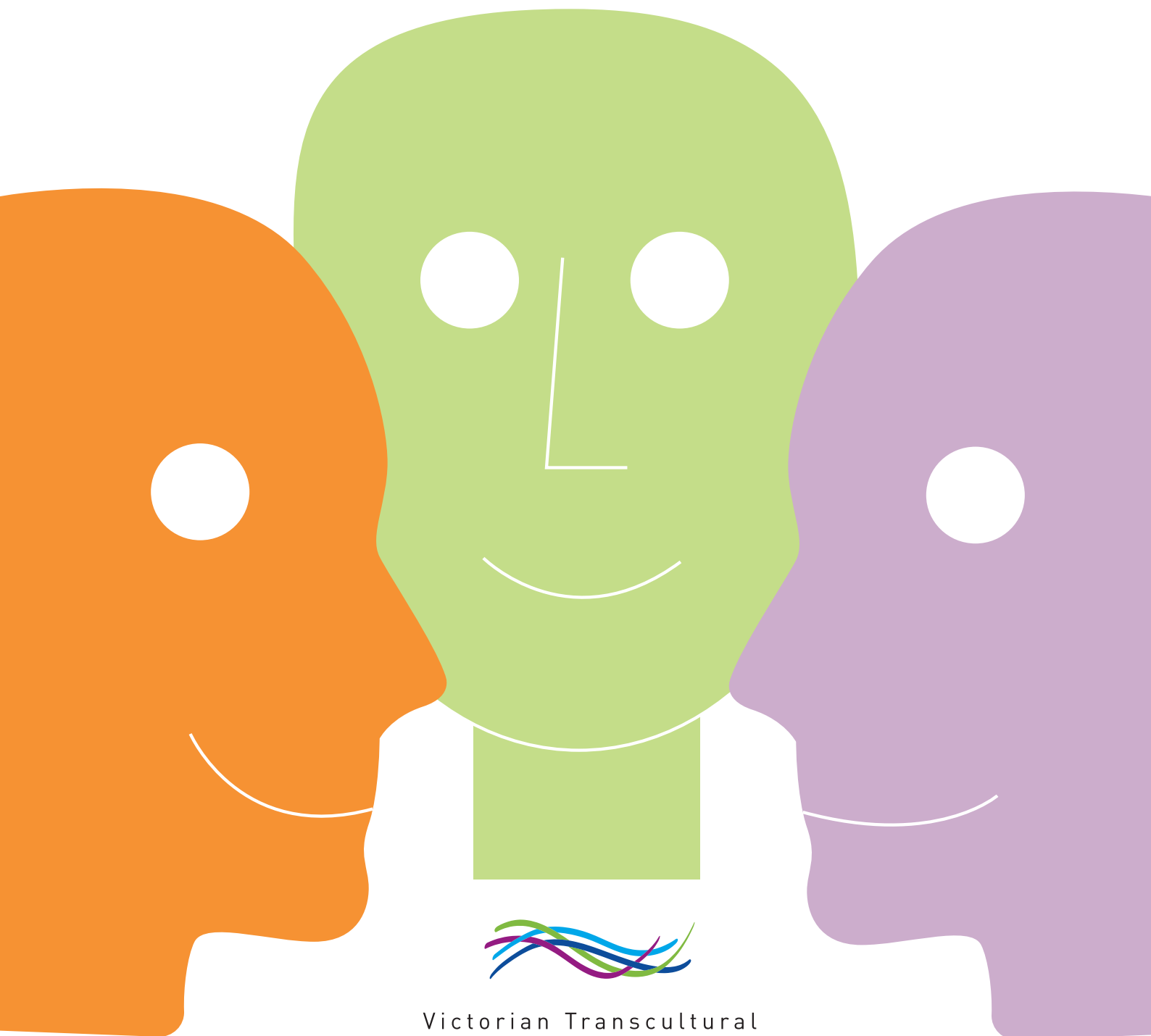# APPROACHING WORK WITH INTERPRETERS IN MENTAL HEALTH SETTINGS

PROJECT REPORT

Victorian Transcultural
MENTAL HEALTH

Acknowledgments

"Language is the carrier of information about who we are, how we express ourselves and our culture, it defines our world around us"

Victorian Aboriginal Corporation for Languages (VACL), (2019).

Contents

Project background

Victorian Transcultural Mental Health (VTMH) works with organisations and agencies to strengthen their capacity to address inequity in mental health service provision, with the overarching goal of improving the mental health and social and emotional wellbeing of culturally diverse individuals, families and communities.

Responding to the learning, practice and information needs of the public mental health workforce and other providers of health and social support services is one of the key functions of our Workforce Education & Support Program.

VTMH has produced a range of resources over the years to support Victoria's mental health sector to work effectively with interpreters. Resources have included guidelines, audio-visual materials, workshops and online learning resources (www.vtmh.org.au).

Recent shifts towards recovery-oriented approaches in Victoria's mental health system, and the introduction of the Mental Health Act 2014 gave impetus for VTMH to embark on a process of creating a range of resources to benefit work with interpreters.

Hence the project development gave attention to:
- the contemporary service delivery context, stakeholders, legislation and funding;
- emphasising a nuanced and complex understanding of work with Interpreters;
- addressing the balance between organisational/structural responsibilities vis-a-vis practitioner responsibilities, in enabling effective interpreting services.

The project took place over two years across three phases:

PHASE 1 - CONSULTATION

PHASE 2 – CONSOLIDATION AND DESIGN

PHASE 3 – RESOURCE DEVELOPMENT

What does the current literature say about working with interpreters in the area of mental health?

Published research in the area of working with interpreters provides a broad cross-section of Australian and international perspectives. The literature identifies ways to improve the quality of care provided by mental health practitioners in a general health setting and a clinical setting.

From a general health perspective, Tribe (2007) identifies opportunities and challenges in working with interpreters and the importance that language and culture have in interpreting meaning across cultures. Tribe also highlights the importance of the partnership with interpreters, who provide an essential link between the health professional and the client. The Ethnic Communities Council of Victoria (ECCV, 2017) discusses the use of interpreters from a culturally diverse consumer perspective in Victoria's health services. The ECCV research identifies several gaps and barriers to equitable health care for culturally diverse consumers including the facts that: a) interpreters were not offered to all consumers who needed one and b) some health care services were unsure how to book them. The ECCV recommended raising awareness to promote the role of accredited interpreters, to better publicise ways to access interpreting services and to promote understanding of the important role of interpreters in reaching better health outcomes. The Federation of Ethnic Communities Council of Australia (FECCA, 2016) looked at the provision of language services such as interpreters to enhance access to social services for migrants, to alleviate social isolation by connecting them with the community.

From a mental health perspective, Meadows (2017) discusses mental health in the context of migration. Meadows highlights how language and culture are central to who we are, and how deeply embedded cultural issues are for those from a non-English speaking culture within the existing culture of the broader Australian community. Meadows also discusses how to use interpreters in the treatment of mental health issues for migrants. This literature also emphasises the negative impact that miscommunication and misunderstanding can have on health outcomes when interpreters are not used. Cerci and Neale (2018) discuss the recommended guidelines for working with an interpreter and how to make use of their knowledge to gain a better understanding of clients' presenting issues. By considering interpreters as members/consultants of the multidisciplinary team, communication can be improved with patients and ensure high-quality mental health care.
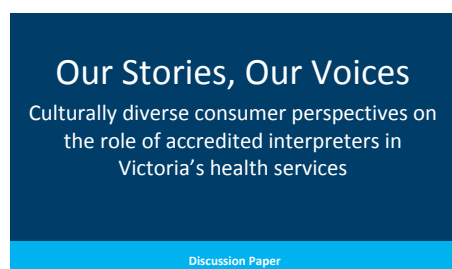
Tribe and Lane (2009) outline a set of positive practice guidelines for working with interpreters in mental health to support practitioners in moving towards improving their clinical service provision to be accessible, inclusive and appropriate. Rousseau, Measham and Moro (2011) argue for the importance of working with interpreters in child mental health, which is an area that is scarcely mentioned in literature and research in Australia. They describe the challenges faced when working with interpreters to diagnose child psychiatric disorders and identify the need for training programs to prepare clinicians and interpreters with the required knowledge when working with children from culturally -diverse communities. Paone and Malott (2008) review the literature regarding the partnership between counsellors and interpreters and provide guidelines for effective mental health services for clients. They also build on understanding of the relationship between the counsellor and the interpreter by providing suggestions for collaborative practices. The Mental Health Coordinating Council (2018) provides guidelines for recovery-oriented language in the context of mental health and recovery. The guidelines promote a culture that fosters recovery, through suggesting the use of language to convey hope and optimism. In addition, the Translation and Interpreting Studies Unit at Monash University (2017) provides recommendations for practices and protocols for interpreters to follow in mental health. These include ethical considerations and self-care in mental health interpreting.

Through reviewing the published research on working with interpreters in mental health settings, VTMH identified the common themes:

- Service users and service providers ought to have accessible, inclusive and suitable mental health interpreting services.

- Working with interpreters broadens the knowledge and understanding of clinicians.

- Working with interpreters results in fewer errors in translation, higher client satisfaction, and improved client outcomes.

- A collaborative relationship with interpreters improves communication with patients and ensures better quality mental health care.

- The use of family and friends as interpreters is not supported by policy and is to be discouraged. It creates issues around the accuracy of interpreting, confidentiality and conflicts of interest.

- Not using interpreters leads to miscommunication and misunderstanding and creates negative health outcomes for patients.

It is therefore essential that culturally diverse consumers and their families, carers and service providers are aware of the important role interpreters play in enabling effective mental health service provision. Despite the common themes emerging in literature on this topic, there are significant gaps that need to be addressed for equitable health care for culturally diverse communities.

In summary, health services do not always meet the communication needs of non-English speaking communities. Offering interpreters to consumers is an essential part of meeting these needs. Further, health services do not always provide the training that is needed to prepare clinicians for working with interpreters for assessment, intervention and therapy for individuals, families or communities.
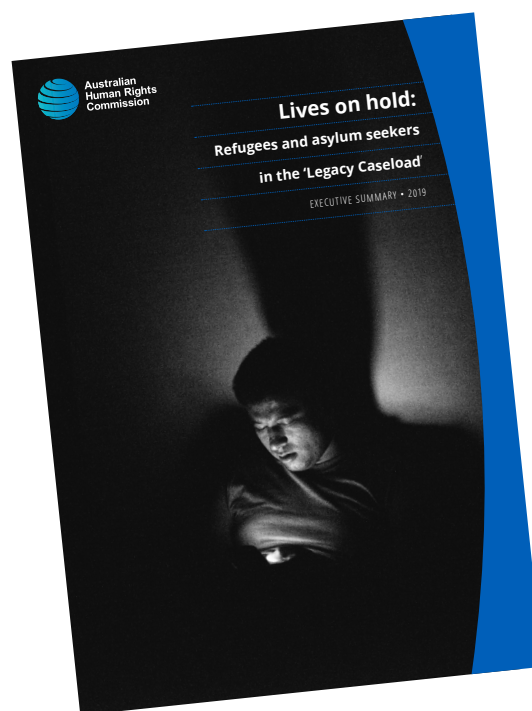
Assorted literature

Description of the Project processes

A consultation process was employed to identify content and formats for this resource.

PHASE 1: CONSULTATION

Stakeholders with diverse experiences were invited to engage in the consultation processes. These stakeholders were sourced through VTMH networks and included:

- people with a lived experience (a consumer or a carer) who had engaged an interpreter when accessing a mental health service;

- accredited interpreters with experience working in mental health settings;

- practitioners from clinical mental health services and community-managed mental health services who work with interpreters;

- staff in leadership positions such as regional managers;

- Auslan interpreters and Deaf interpreters;

- workers from multicultural services who engage with interpreting services;
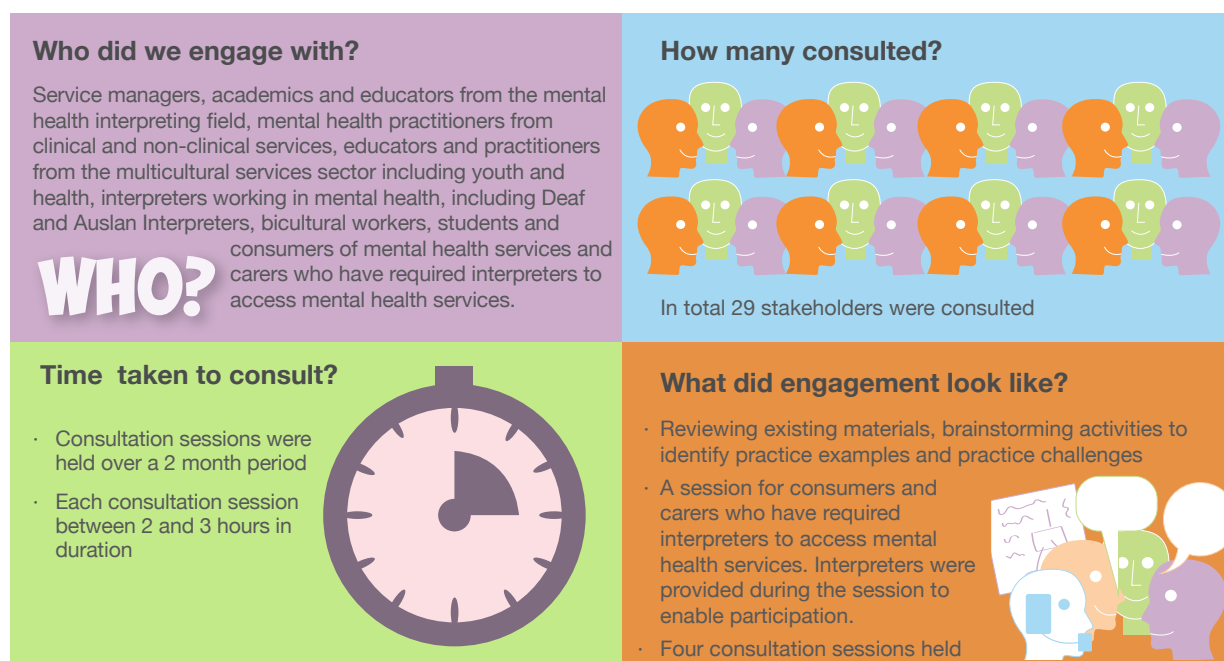
- Academics doing research in this field.

Consultation sessions were facilitated by VTMH staff. Stakeholders reviewed existing resources prior to consultation. The format of these sessions enabled brainstorming by the group to identify practice examples and practice challenges, which were then drawn on in the design of the resources.

Four consultation sessions were held over a two-month period (see Figure 1). Twenty-nine stakeholders engaged in a consultation session, with between five and nine stakeholders at each session.

These sessions were structured to support inclusion of stakeholders from a range of practice settings, enabling clinical and non-clinical mental health practitioners, mental health service managers, interpreters with mental health setting experience, and those specifically working with linguistically diverse communities to all come together to exchange perspectives. These consultations were between two to three hours in duration.

A fourth consultation session was open to carers and consumers with lived experience of requiring the services of an interpreter when engaging with mental health services.

Figure 1: Overview of consultation process

Who did we engage with?

Service managers, academics and educators from the mental health interpreting field, mental health practitioners from clinical and non-clinical services, educators and practitioners from the multicultural services sector including youth and health, interpreters working in mental health, including Deaf and Auslan Interpreters, bicultural workers, students and consumers of mental health services and carers who have required interpreters to access mental health services.

WHO?

How many consulted?

In total 29 stakeholders were consulted

Time taken to consult?

- Consultation sessions were held over a 2 month period
- Each consultation session between 2 and 3 hours in duration

What did engagement look like?

- Reviewing existing materials, brainstorming activities to identify practice examples and practice challenges
- A session for consumers and carers who have required interpreters to access mental health services. Interpreters were provided during the session to enable participation.
- Four consultation sessions held

PHASE 2: CONSOLIDATION & DESIGN

The project team came together to review all the information captured during the consultations. Current literature was also reviewed and considered.

Further to this, a small number of stakeholders from across the four sessions were invited to be part of a Project Reference Group. This group advised on the content and layout for the various components of the resource.
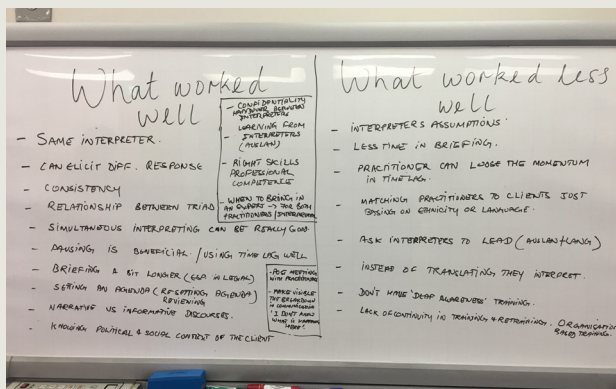
PHASE 3: RESOURCE DEVELOPMENT

The project developed three resources:

1. Tri-fold Booklet and Practice Tips Poster

2. Video resource

3. Project report

A graphic designer was engaged to visually design the tri-fold booklet and practice tips poster. A production company was engaged to create video resources.

Engaged in the consultation process

The Resource

### TRI-FOLD BOOKLET AND PRACTICE TIPS POSTER

A Tri-fold Booklet, **Approaching work with interpreters in mental health settings: A supplementary resource for mental health professionals working with interpreters** is a hardcopy resource for practitioners and agencies.

This booklet has four sections:

(a) Understand the person's language needs to source an appropriate interpreter;

(b) Prepare for work with an interpreter;

(c) During the interpreting session;

(d) At completion of the interpreting session.

The Practice Tips Poster has **9 Tips for an interpreted session**. This is attached to the Tri-Fold Booklet, and also available as a separate lift-out.

The Tri-fold Booklet and Practice Tips Poster are designed to be used in conjunction with each other.
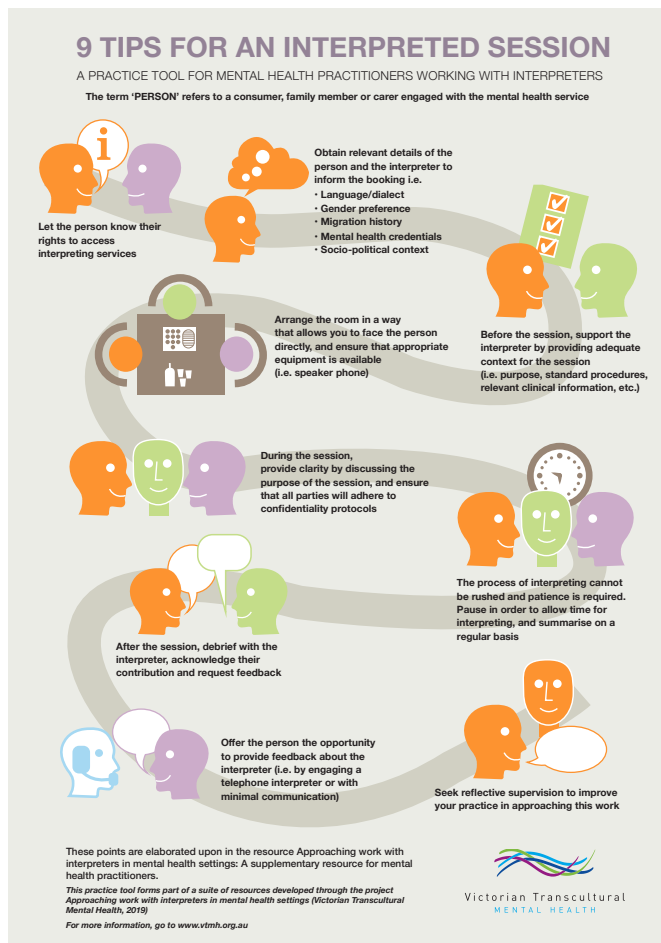
Poster

Tri-fold Booklet

VIDEO RESOURCES

A series of short video clips was created as part of this project.

The videos were designed to enhance appreciation of the multiple perspectives and challenges that arise for different workers in an interpreted session. The following people shared and reflected on their experience of being part of an interpreted session:

- A person with a lived experience (consumer) using an interpreter
- A consumer talking about the use of interpreters with their family members
- An interpreter in mental health
- Mental health clinicians in various roles using interpreters
- A mental health service manager

PROJECT REPORT

A report was written capturing the process of the project.
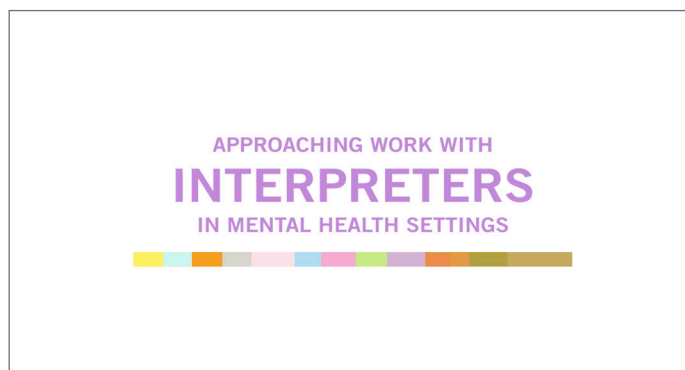
Reflections arising from the Project

A number of broader themes emerged during the development of this project. These are highlighted below.

WORKING WITH AUSLAN INTERPRETERS IN MENTAL HEALTH SETTINGS

Spoken language interpreters, Auslan interpreters and Deaf interpreters were involved in the consultation process. Whilst in both Auslan-English interpreting and spoken language interpreting the aims and outcomes of the interpreting process remain the same, in Australia, the Australian Sign Language Interpreting Association (2019) notes there are a number of areas where Auslan-English interpreting work does differ to that of spoken language interpreters including, but not limited to, practicalities relating to the positioning of the interpreter, consideration of the Deaf client's language use, the domains in which interpreting occurs, and team interpreting.

Some comments regarding work with Auslan interpreters are included in the Tri-Fold booklet. References to specific and detailed information on working with Auslan and Deaf interpreters are included in the reference list at the end of this Report.

CAPTURING THE RICHNESS

The consultations, which were extensive, brought together an incredible depth of knowledge, practices and skills in the sector. For the sake of brevity, some of these nuances and subtleties were not able to be captured in the final set of resources. Notwithstanding this limitation, it needs to be acknowledged that practitioners and leaders in the field are thinking deeply about the challenges and complexities of approaching work with interpreters in mental health settings.

RESPONSIBILITY AND ACCOUNTABILITY IN THE PROVISION OF INTERPRETING SERVICES

Work with interpreters in mental health settings is usually considered the responsibility of the practitioner. In the consultation sessions, it became apparent that organisational accountability is as critical as individual practitioner responsibility. However navigating the roles and responsibilities for organisations, teams and practitioners it is a complex terrain.

Reflecting on these the following two areas are offered for consideration:

Organisational Accountability

These accountability practices include mental health services establishing contractual agreements with interpreting services; collecting data on language demographics; collecting data on interpreter use within the services that they are responsible for; organisations communicating clearly to clinical and other staff what the appropriate procedures are for booking interpreters; and implementation of internal policies that ensure training for staff at all levels. The recommendations also include the importance of reflective supervision for staff working with interpreters and finally, resources (including consumer and carer feedback) made available in various languages.

Further, mental health services need to develop and strengthen reciprocal partnerships with funded interpreter services to promote mutual learning opportunities.

Planning for language services should occur as an integral part of operational service planning and monitoring as highlighted in the Department of Health and Human Services language services policy (DHHS, 2018).

Practitioner responsibilities:

These practices include "discovery of self" (Box 1) through reflective supervision groups, professional development learning programs, and peer group discussion. All these practices contribute to the objective of critical self-learning.

TRANSLATED MATERIALS AND THE ROLE OF BILINGUAL WORKERS

This report did not focus on translated materials or the role of bilingual workers; however there is much scope and work being done in Victoria (Centre for Culture, Ethnicity and Health, 2014) and nationally.

SUPPORTING PROFESSIONAL INTERPRETERS AND THE INTERPRETING PROFESSION

The professional sector of interpreting in mental health has dramatically changed and expanded over the last two decades in Australia, and the scope of interpreting has evolved in response to migration and resettlement patterns. The complexity increases when taking into account new and emerging communities where it is increasingly difficult to find NAATI qualified interpreters. As the sector of interpreting changes and grows, it is imperative that this sector (mental health interpreting) is supported ably to achieve sustainable practices, appropriate wages/remuneration, adequate and sufficient training opportunities for professional development and funding for supervision groups and collaboration, to build solidarity with other professionals. This emerging sector has much to learn from other translation and language sectors, for example Auslan.

Box 1 - Discovery of Self

Discovery of Self

"All interpreted consultations are fundamentally cross-cultural encounters. As such, the most important issue is the practitioner's overall attitude to the encounter with the patient…. [In order to avoid the encounter ending abruptly] Cohen-Amerique & Hohl suggest that "practitioners should go through a "training process that includes the 'discovery of self'. Only when one is clear about the implicit rules and values in one's own cultural system can one understand the other and find ways, through negotiation and mediation, to offer culturally sensitive care."

Leanza, Miklavcic, Boivin & Rosenberg, 2015, p.100.

References

Australian Human Right Commission. (2019). *Lives on hold: Refuges and asylum seekers in the 'Legacy Caseload', Executive summary.* Retrieved July 25, 2019, from https://www.humanrights.gov.au/our-work/asylum-seekers-and-refugees/publications/lives-hold-refugees-and-asylum-seekers-legacy

Australia Sign Language Interpreting Association (2019). About Auslan-English Interpreting. Retrieved May 4, 2019, from https://aslia.com.au/about-us/about-interpreting/about-auslan-english-interpreting/

Centre for Culture Ethnicity & Health (2014) *Managing bilingual staff.* Retrieved February 12, 2019, from https://www.ceh.org.au/wp-content/uploads/2015/12/LS9_Managing-bilingual-staff.pdf

Cerci, D., & Neale, J. (2018). Working with interpreters in mental health: Are we lost in translation? *International Journal of Social Psychiatry,* 64(5), 509-510. https://doi.org/10.1177/0020764018770699

Cornes, A & Napier, J. (2005). Challenges of mental health interpreting when working with deaf patients. *Australasian Psychiatry,* 13 (4), 403-407.

Department of Health and Human Services (2017) *Language services policy.* Retrieved February 12, 2019 from https://dhhs.vic.gov.au/publications/language-services-policy-and-guidelines

Ethnic Communities Council of Australia (ECCV). (2017). *Our Stories, Our Voices: Culturally diverse consumer perspectives on the role of accredited interpreters in Victoria's health services.* Retrieved March 17, 2019, from https://eccv.org.au/wp-content/uploads/2018/03/discussion_paper_Our-Stories-Our-Voices_MARCH2017.pdf

Federation of Ethnic Communities' Councils of Australia (FECCA). (2016). *Australia's Growing Linguistic Diversity: An opportunity for a strategic approach to language services policy and practice.* Retrieved March 17, 2019, from http://fecca.org.au/publications/australias-growing-linguistic-diversity/

Leanza, Y. (2005). Roles of community interpreters in paediatrics as seen by interpreters, physicians and researchers. *Interpreting,* 7(2), 167-192

Leanza, Y., Miklavcic, A., Boivin., I & Rosenberg, E. (2015) Working with interpreters. In Kirmayer, L., Guzder, J., & Rousseau. C. (Eds) *Cultural Consultation Encountering the Other in Mental Health Care* (p. .88 - 113). https://doi.org/10.1007/978-1-4614-7615-3

Meadows, E. (2017). Navigating the language maze: Mental health in the context of migration. In *New Paradigm. Psychiatric Disability Services of Victoria* (VICSERV). Elsternwick, Victoria.

Leanza, Y., Boivin, I., Moro, M.-R., Rousseau, C., Brisset, C., Rosenberg, E., & Hassan, G. (2015). Integration of interpreters in mental health interventions with children and adolescents: The need for a framework. *Transcultural Psychiatry,* 52(3), 353–375. https://doi.org/10.1177/1363461514558137

Mental Health Coordinating Council (MHCC). (2018). *Recovery Oriented Language Guide.* Retrieved January 28, 2019 from http://www.mhcc.org.au/wp-content/uploads/2018/05/Recovery-Oriented-Language-Guide_2018ed_v3_201800418-FINAL.pdf

Paone T, & Malott K, (2008) Using Interpreters in Mental Health Counselling: A Literature Review and Recommendations *Journal of Multicultural Counselling and Development,* 36(3), 130-142

Rousseau, C., Measham, T., & Moro, M. (2011). Working with Interpreters in Child Mental Health. (Report). *Child and Adolescent Mental Health,* 16(1), 55-59

Mental Health Coordinating Council (MHCC). (2018). *Recovery Oriented Language Guide.* Retrieved January 28, 2019 from http://www. mhcc.org.au/wp-content/uploads/2018/05/ Recovery-Oriented-Language-Guide_2018ed_ v3_201800418-FINAL.pdf

Translation and Interpreting Studies Unit at Monash University (2017). *Recommendations for practices and protocols for interpreters to follow in mental health interactions.* Retrieved January 28, 2019 from https://ausit.org/AUSIT/Documents/ Mental_Health_Interpreting_Guidelines_for_ Interpreters.pdf

Tribe, R. (2007). Working with interpreters. *The Psychologist,* 20(3), 159-161)

Tribe, R., & Lane, P. (2009). Working with interpreters across language and culture in mental health. *Journal of Mental Health,* June 2009, 18(3), 233-241.

Victorian Aboriginal Corporation for Languages (VACL). (2019). *Why is language important?* Retrieved September 23 2019, from https:// vaclang.org.au/

Victorian Transcultural
MENTAL HEALTH

ST VINCENT'S
HOSPITAL
MELBOURNE

A FACILITY OF ST VINCENT'S HEALTH AUSTRALIA