

**Irish Translators. and Interpreters. Association/
Cumann Aistritheoirí agus Teangairí na hÉireann**

Submission to the Medical Council in response to invitation for public consultation on the review of *A Guide to Ethical Conduct and Behaviour*.

The Irish Translators' and Interpreters' Association (ITIA) is made up of approximately 500 members, including professional, ordinary, student and corporate members. See our website on <http://www.translatorsassociation.ie> for more information. It is the only such professional body in Ireland that represents the interests of translators and interpreters and promotes the highest standards in Translation and Interpreting.

The 2004 version of the *Guide to Ethical Conduct and Behaviour* makes no mention of working with patients who have limited English proficiency. Given the recent increase in immigration into Ireland, we believe that this has become a very important issue. Our view is that doctors should work with interpreters to ensure that they understand the patient's medical history, symptoms and prior medication. It is also essential that patients can understand a diagnosis, medication, prognosis and any other advice they are given regarding diet, exercise etc. In the case of informed consent, it is essential that information is properly explained and interpreted to patients.

We are very concerned that children and family members are being asked to interpret. We have anecdotal evidence of an eight year old boy being asked to interpret for his mother who had just had a miscarriage; a fourteen year old boy asked to interpret for his aunt who had been diagnosed with cancer. In many cases, patients feel obliged to bring friends along to interpret. Sometimes the relationship between a patient and the person acting as interpreter is unclear. In cases involving domestic violence, it may be impossible to discover the truth if the perpetrator is the interpreter. There are also many cases where patients have no interpreters at all and have to manage with signs and gestures. This can be a very real problem for patients who are in pain or discomfort in a hospital ward and cannot explain their problem.

We are aware that the HSE funded a pilot project to provide interpreters in Dublin, Kildare and Wicklow. However, we understand that the take-up of this service was low both by doctors and by patients. To the best of our knowledge, there has been no assessment of this project and it has not been rolled out nationwide.

We believe that it is not ethical for doctors to try and make do without the help of interpreters. Therefore, we believe that the *Guide to Ethical Conduct and Behaviour* should include a section on working with patients with limited English and on hiring interpreters. It should be policy:

1. Not to allow children or family members to interpret. A family member usually has another role to play, acting on behalf of the patient. The transfer of information is likely to be poor with the 'interpreter' omitting some information and adding their own questions and answers. In some cases, embarrassment can be a factor because a patient may not want another family member to know what is wrong with him/her. It is unreasonable to ask children to act as interpreters.

2. To always hire an interpreter in person or over the phone if a patient cannot communicate adequately in English. Telephone interpreting should be restricted to emergencies.

Research carried out in the United States¹ shows that it is cheaper to obtain the services of a trained interpreter rather than to work with family members, friends and untrained interpreters. If a patient cannot obtain a diagnosis or satisfactory treatment, he may return to visit the doctor on a number of occasions. Similarly, if a doctor is unsure of the exact symptoms of a patient, he or she may carry out unnecessary procedures and organise unnecessary tests.

There is a need for a properly set-up emergency telephone interpreting service. We acknowledge that there is also a need for interpreters to be trained in how to interpret and how to behave professionally. It would be most helpful if the Medical Council were willing to take up these issues and to work on them in association with the ITIA.

For and on behalf of
The Irish Translators. and Interpreters. Association
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Annette Schiller
Chairperson

Mary Phelan
Honorary Secretary
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<p>Irish Translators' and Interpreters' Association Irish Writers Centre 19 Parnell Square Dublin 1 Website: http://www.translatorsassociation.ie Email: itiasecretary@eircom.net Tel. (01) 872 13 02</p>
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¹ Jacobs, E.A. et al (2004) Overcoming Language Barriers in Health Care: Costs and Benefits of Interpreter Services. American Journal of Public Health, 94 (5): 866-869