

informATIO

October 2007

Number 3

Launching the Debate

By Nancy McInnis, President

This issue is dedicated to all the community interpreters quietly slaving away out there. But before you hit the panic button, ATIO does not have a category to recognize community interpreters, nor are we considering doing so at this time. Their group still has much work to do on professional training, standards, ethics, etc. before we can cross that bridge.

But we do want to know how far off you think that bridge is. How do you feel about community interpreters? Have you, or someone you know, ever had to use their services? What did you think of their work?

Community interpreters got their name not because they are ordinary people from the community serving as interpreters, but because they are trained interpreters working in a community setting. Most of us can agree that they serve a valuable purpose. Many people living in Canada have limited proficiency in our official languages. So what do they do when faced with an immigration hearing or a medical procedure? Who do they call?

If available, court interpreters could help in some instances, but not necessarily in all. And there is a woeful disparity between the wages paid to community interpreters and those charged by conference interpreters.

What do you think ATIO should be doing about community interpreters? No matter how you feel about them, we cannot deny that they serve a valuable purpose. We also believe that they are here to stay. So should ATIO turn a blind eye to them? Should we tell them they have no place in a professional association like ours until such time as they have implemented professional training, standards of practice and a code of ethics? Do we lend them a helping hand to do just that?

This is your association, and this is a hot topic. Let us know what you think by dropping us a line at informATIO@atio.on.ca

Let the debate begin!

CERTIFIED THROUGH CTIC TRANSLATION EXAMINATION

French-English
Susanne Garmsen
June MacMullin
Alexandra Scott

German-English
June MacMullin

Italian-English
Alexandra Scott

Serbian-English
Meri Petrov

English-French
Marine Armstrong

English-Italian
Pasquale (Pat) Capo

English-Romanian
Cristina Negrea

CERTIFIED ON DOSSIER IN TRANSLATION

English-French
Josée Fiset
Sylvie Moisan

Inside...

University Health Network: Improving Patient Care Through Professional Interpretation.....	Page 3
Institutional/Community Interpreting: Mowing Forward Towards National Standards of Practice.....	Page 4
Bridging the Communication Gap: A Profession of Passion in the Field of Human Emotions.....	Page 5
Extreme Interpreting: Report From the Front Line of a Hospital.....	Page 6
Employment Opportunities for Community Interpreters.....	Page 7
On the Lighter Side: Internet Sites	Page 8
Calendar of Events.....	Page 8

University Health Network: Improving Patient Care Through Professional Interpretation

*By Elizabeth Abraham, C. Tran. (Canada)
Manager, Interpretation and Translation Services, University Health Network,
and Vice President, Healthcare Interpretation Network*

The foundation of healthcare provision is communication. Diagnosis and treatment are based on the verbal exchange of information. For individuals who have a limited command of English, access to health care services is restricted by their ability to describe their symptoms, understand the diagnosis and treatment plan, and develop a trusting relationship with their provider.

In a city receiving approximately 100,000 new Canadians every year¹—half of which do not speak either official language²—Toronto healthcare providers are struggling to meet the needs of its increasingly diverse patient population.

University Health Network (UHN, a teaching hospital comprised of Toronto General, Toronto Western and Princess Margaret hospitals) is committed to facilitating access to care for patients with limited English proficiency (LEP). The department of Interpretation and Translation Services at UHN coordinates interpreters for approximately 1,000 patient visits each month, in over 70 languages, among its staff, contract and agency interpreters. The service is free for patients.

While communicating in the patient's language is integral to the patient-centred care practiced at UHN, professional interpretation is also essential for patient safety and risk management. Healthcare interpreters at UHN must have a passing CILISAT or ILSAT, which tests their proficiency in English and a second language, and their ability to interpret both ways. UHN is continually recruiting qualified interpreters in all languages.

Most UHN interpreters have training in healthcare and/or community interpretation (which includes healthcare, law and social services) through courses provided by the Healthcare Interpretation Network, Access Alliance, Multilingual Community Interpreter Services or University Health Network. Training in core competencies of healthcare interpretation is vital for working in the medical field, not just for terminology, but to learn current standards of practice and professional ethics in this specialized field. Last year, the first Language Interpreter Training Program was launched in seven colleges

in Ontario. The program is a critical step towards the professionalization of community interpretation.

In healthcare interpreting, as in legal interpreting, confidentiality is paramount; impartiality is also critical to providing quality services for both clients, that is, patient and provider. One of the challenges for the healthcare interpreter is to maintain professional boundaries. Patients tend to see the interpreter as a potential advocate and often approach the interpreter for advice or to disclose information that compromises the interpreter's impartiality. At UHN, some patients have followed their interpreter around the food court or into the washroom!

Healthcare interpretation is never routine. Clinic visits are usually straightforward, but you may find yourself in a family meeting with a palliative patient who is ready to die, but whose spouse or children want to prolong treatment. Or you may have to interpret for a patient as she receives news of a serious diagnosis. You may be called to emergency to interpret for a trauma victim or his family. Every case is unique; however, there is one constant: the majority of patients and providers are very grateful for the service.

A number of professional organizations in Canada are working towards the adoption of national standards for community interpreting. A universal set of standards will raise the professional status of community interpreters, and clients in all sectors will benefit from enhanced, reliable service. In Toronto, the Healthcare Interpretation Network is actively involved in this initiative (www.healthcareinterpretationnetwork.ca).

Interpreter groups working in the Canadian public sector are striving towards certification as a means of regulating the profession. In addition to national standards of practice, certification in community interpretation would result in better—and safer—access to public services for the immigrant and refugee population in Canada.

¹ Citizenship and Immigration Canada

² Statistics Canada

Institutional/Community Interpreting: Moving Forward Towards National Standards of Practice

By Lola Bendana, Multi-Languages Corporation, AILIA Board, HIN Board

Institutional or Community interpreting (CI) is the means used by both providers and users of public services in the legal, healthcare, education, government and social sectors, to communicate with people with limited English proficiency.

Roda Roberts outlined the following distinctions between community and conference interpreting:¹

- *Community interpreters primarily serve to ensure access to public services, and are therefore likely to work in institutional settings;*
- *They are more apt to be interpreting dialogue-like interactions than speeches;*
- *They routinely interpret into and out of both or all of their working languages;*
- *The presence of the community interpreter is much more noticeable in the communication process than is that of the conference interpreter; and*
- *A great many languages, many of them minority languages that are not the language of government in any country, are interpreted at the community level, unlike the limited number of languages of international diplomacy and commerce handled by conference and escort interpreters.*

Canada's multicultural spectrum means that the demand for community interpreters is increasing both in the scope and diversity of languages, thus intensifying the need for professional interpreters and higher industry standards. This need has prompted those involved in the provision and delivery of services to identify strategies to professionalize the field.

For over 20 years, several stakeholders have collaborated on building a solid foundation for the professionalization of CIs through the identification of standard testing and training programs.

In Ontario, a Curriculum Advisory Committee representing the public and private sectors developed the first Standard Language Interpreter Training Certificate to be offered by the community colleges of Ontario. The LITC (Language Interpreter Training Certificate) was launched in September 2006, and it is successfully running at seven colleges across the province.

The LITC curriculum integrates theory, principles and concepts with the practical application and skills development required for proficient practice as language interpreters. The 180-hour program provides an **introduction** to spoken language

interpreting, skills development practise in the major constituent tasks of interpreting—consecutive interpreting, sight translation and note taking, simultaneous interpreting, and a focus on setting-specific interpreting.²

A basic language interpretation test is another key screening tool for evaluating the interpreter's language proficiency. In Ontario the CILISAT and ILSAT are available in 50 languages.

Four organizations are now launching the first Canadian National Standard Guide for Institutional/Community Interpreters:

- The Healthcare Interpretation Network – Toronto-based HIN represents healthcare institutions, interpreters and suppliers of services. HIN has been conducting research, providing education and promoting professional standards in regards to the provision of language interpretation (www.healthcareinterpretationnetwork.ca).
- Association of Canadian Corporations in Translation and Interpretation – ACCTI represents the private sector.
- The Critical Link with a national scope includes in its membership the academia, public and private sector.
- The Association de l'industrie de la langue/Language Industry Association – AILIA represents organizations delivering language services (translation, language training, and language technologies) and has been working to raise the standards for the language industry in Canada. It has now taken an active role in supporting Community Interpreting through its Translation Committee (www.ailia.ca).

The National Standards of Practice will provide a clear and consistent definition of the characteristics and competencies of a qualified interpreter, such as the role of the interpreter, professional standards of practice, core ethical principles, human resources requirements and definitions of interpreting terminology, as well as other required elements involved in providing quality services. This standard guide will ensure the highest quality of service when adopted for assessment, training, hiring, performance evaluation and, eventually, professional recognition.

Thanks to **Diana Abraham, Elba De Leon, Lisete Figueiredo**, HIN Board Members, and to **Gonzalo Peralta**, AILIA President for their contribution to this article.

¹ Roberts, Roda. "Community Interpreting Today and Tomorrow," in Peter Krawutschke, ed. *Proceedings of the 35th Annual Conference of the American Translators Association*. Medford, NJ: Learned Information, 1994, pp. 127-138.

² College Connect LITC

Bridging the Communication Gap: A Profession of Passion in the Field of Human Emotions

By Effrossyni Fragkou, C. Tran. (Canada) and Vanesa Demko, C. Tran. (Canada)¹

There are several definitions of “community interpretation” (CI)² In our view, and from our own experience, a community interpreter is “a professional who helps people communicate in critical situations, where human emotions usually come into play.”

A community or institutional interpreter deals with diverse situations. He or she may be asked to be the voice of a molested child, an abused wife who pleads her case before a judge, a mother desperate for details on her child’s medical condition, an ailing senior who begs to be taken off life-support or, more happily, a doctor announcing the birth of someone’s child. These are real cases where people couldn’t have exchanged vital information without an interpreter’s professional help.

In a multicultural, multiethnic and multilingual society, CI is both a necessity of community life and a means of providing the equality of rights as guaranteed by the Canadian Charter of Rights and Freedoms. This responsibility currently rests on the shoulders of a heterogeneous group that includes experienced interpreters and language professionals with the necessary credentials and training, where available, as well as bilingual people with no training, who are allowed and/or summoned, depending on the case, to provide language services in multiple settings and under various circumstances.

Unlike conference interpreters, who tend to specialize in a limited number of fields, community interpreters must be able to deal with a wide range of topics. There are two possible reasons for this: the absence of trained practitioners, especially in some language combinations and, the lack of a substantial and regular income flow. The latter may also be a valid reason why many practitioners are forced to leave the profession.

Community interpreters also face some unique challenges. Last-minute calls and cancellations, and unsatisfactory working conditions are common in institutional interpretation. This can have a considerable impact on the interpreter’s performance, his or her physical and mental well-being, and the quality of services provided. Knowledge of the topic and the participants’ profile, status and situation, and familiarity with the specific interpretation setting are important factors for a successful session. Additionally, collaboration and peer-support are almost non-existent in community interpreting—institutional interpreters work alone and cannot rely on the assistance of a colleague who could provide advice or share the time demands of a lengthy session.

CI is a challenging task that demands a special breed of individuals—inquisitive, and motivated, resilient and patient, but also able to work in a fast-paced environment. At the same time, community interpreters, like their conference counterparts, have to be experienced, trained language professionals with

exceptional skills and work ethic.

Yet, currently, despite its importance, CI lacks a professional umbrella and a regulated framework for practice. The absence of a functional definition of CI and of professional status contributes to a certain “victimization”³ of community interpreters. Although usually treated as non-professionals, community interpreters are asked to fulfil many obligations that are otherwise considered reasonable and absolutely legitimate in the context of recognized professionals. Community interpreters have yet to be given the rights, which flow from the roles and responsibilities of their practice.

We, as community interpreters, are passionate about our job. In light of our many experiences, we recognize that community interpreters, as well as community interpretation services requesters and receivers, need to reconsider the current state of community interpretation in order to move towards a professionalization of this form of interpretation. To this end, we suggest the following:

- Define the needs and challenges of this particular form of practice; seek models of training and methods of problem solving in conference interpretation theories and apply them to CI.
- Raise the standard of CI by recognizing the need for formal education.
- Look to the government and, subsequently, to professional associations to accord CI professional status, to ensure adequate regulation, and to define rules of practice (i.e. a code of ethics, roles and responsibilities of practitioners).
- Define and ensure basic rights for community interpreters.

Institutional interpreters are people who deal with human emotions daily and handle human situations. Their presence helps unite and extend communities. This important task cannot be entrusted to volunteers with best intentions alone, as life-changing decisions can depend on the accuracy of the interpretation. For those reasons, making community interpretation a *recognized profession* is a pressing need. We community interpreters are the voice of others. It is time to speak up for ourselves.

¹ The authors would like to thank Lola Bendana, Joanna Pachner, and Marielle Godbout for the valuable feedback and their precious comments.

² See, among others, the Critical Link at www.criticallink.org, and Holly Mikkelsen, *The Interpreter’s Companion* (2000) and *The Interpreter’s Edge* (1995).

³ Fragkou, Effrossyni, Show Me “What You Say,” I’ll Tell You Who You Are! - Changing the discourse in dialogue interpreting to reflect new realities and to promote the professionalization of dialogue interpreters in Canada, presentation at the Monterrey Institute of International Studies, Sept. 9-11, 2005.

Extreme Interpreting: Report From the Front Lines of a Hospital

By Jucelei Pereira, Candidate for Certification in Translation, ATIO
Healthcare Interpreter, University Health Network

Having a bachelor degree in English and Italian, a postgraduate certificate in translation (English-Portuguese), and as a Licentiate in English and Italian, I felt that I was an ideal candidate for a posting in *The Mississauga News*:

“Interpreters required to work with health, justice, and social service environments. Requirements: Excellent written and oral skills in English and Portuguese; available to work “on call” basis. Candidates must pass a language assessment test. Training provided.” Wonderful!

And back in 2001, the Cultural Interpreter Services of Peel opened the doors to an exciting, challenging and underpaid profession (most of the agencies still pay \$25 per hour).

After working as an independent interpreter and translator for six years, I was hired as a full-time Portuguese interpreter by University Health Network in Toronto. I soon discovered that the requirements that I read in the newspaper were just the tip of the iceberg.

If you have practised this profession for any length of time, you know that interpreters need continuous learning and professional development. Maintaining knowledge of evolving medical terminology and pharmaceuticals is a lifetime process. This is why we have to attend lectures, belong to associations, have mentors (thanks to Deolinda Wing and Zaida Lima), develop a professional support network, and take advantage of the generosity of the experienced interpreters who share their knowledge, experiences and expertise. I have learned to pay careful attention to the issues faced by my colleagues; their problem today may be my problem tomorrow. Challenging goals, yet not impossible to achieve.

Then there is the issue of witnessing medical procedures. Interpreters working in the medical field must be comfortable in all settings, including minor surgery. Is there any training or test for it? Not as far as I know.

A colleague of mine almost fainted during a bone biopsy. For those who are unfamiliar with this procedure, it involves injecting a local anesthetic with a very fine needle to freeze the area. Then, a larger needle is inserted into the centre of the bone to take out a liquid sample of bone marrow. This is followed by

a second needle inserted into the same site to remove a small piece of the bone itself.¹

It sounds simple, but it’s a painful test; to my colleague’s disadvantage there is usually blood all over the bandages, trays, dressings and equipment.

When you are working in a hospital from Monday to Friday, seven hours a day, you have to expect to see body fluids. It’s important to mention that body fluids are not considered risky unless visibly tinged with blood. While contact with certain body fluids (faeces, urine, vomit, sputum, tears, nasal secretions) is not typical, the risk of accidental exposure is a reality.

My first experience of this type occurred when I was called to go to a ward to meet a psychiatrist for a psychiatric assessment. As soon as the service provider and I entered the room, the patient had a bout of diarrhea, and the strong smell and noise diverted my attention.

I expected the service provider to call off the encounter, or to take a break and ask the nurse to clean the patient. However, the LEP (Limited English Proficiency) patient and the service provider carried on, as if nothing had happened, and I almost lost the battle with my stomach.

I can handle unpleasant visuals by changing my position or focusing on different things. However, there is no way to avoid an unpleasant smell, unless you stop breathing. Nevertheless, the patient’s vulnerability empowered me to finish the assignment, but it wasn’t an easy task.

Today, I feel confident to address this issue with any service provider at any time (that is, to request that a patient in this situation be cleaned before continuing), but a negotiation is sometimes not possible. Under these circumstances, my advice is to focus on the importance or urgency of the encounter, or if the situation goes beyond your physical control, refuse it. It’s better to disclose your limitations than to risk having an adverse reaction yourself during the encounter.

¹ Leukemia/BMT Program of BC (http://www.vch.ca/bmt/public/treatment/biopsy_marrow.html)

Employment Opportunities for Community Interpreters

By Axelle Janczur

Executive Director, Access Alliance Multicultural Community Health Centre
President, Healthcare Interpretation Network

Community interpretation is like the wild west of interpretation—lots of opportunities for entrepreneurial individuals and few rules in the great unknown.

There are lots of opportunities because urban centres in Canada are demographically diverse, and newcomers are arriving daily. Not just independent immigrants and business class who often have some English or French language skills, but also their families, as well as government sponsored refugees and many, many refugee claimants. These latter categories often have limited to no official language skills but need access to services. Organizations (public sector in particular) are increasingly acknowledging the need to provide equitable access to services.

Entrepreneurial individuals can be very successful if they are proactive, market themselves and are in the right place at the right time. Interpreters work in the healthcare system, in the legal system (through legal clinics, with private lawyers, in tribunals, etc.), with the Immigration and Refugee Board, with Workers Safety and Insurance Board, with insurance and rehabilitation companies, often affiliated with WSIB, as well as in the health care sector with hospitals, community health care centres, other clinics, etc.

There is no set process for finding employment as a community interpreter. Many organizations contract directly with individuals (e.g. legal clinics, lawyers, other organizations), developing their own internal rosters. Examples are some hospitals, as well as the IRB and the court interpreters program through the Ministry of the Attorney General. These organizations have their own screening and testing processes for their official rosters. Other organizations actually hire staff interpreters—again using their own employment criteria. Finally, there are a number of interpretation services—either private sector or not-for-profit sector—that contract interpreters and dispatch them. Skills or experience requirements for interpreters vary from agency to agency.

There are few rules, as community interpreting is still a completely unregulated profession, and there is little agreement about minimum standards—both in terms of qualifications and practice. Organizations that are active in the Healthcare Interpretation Network in Toronto have some guidelines about minimum standards related to basic requirements and the training, role and responsibility of community interpreters, etc. However, many individuals can find work simply based on their stated claim of speaking another language and many employers will hire them on that basis. Additionally, expectations in terms of practice are all over the place, with some interpreters providing cultural explanations, advocating for (or against) clients, etc. Certainly regulation is required.

A final note: until there is consensus in the interpretation industry on standards of practice and agreement around regulation, employment conditions will continue to be all over the place—with varying rates of pay and expectations of interpreters.

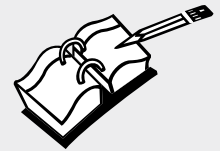
With a car instead of a horse, and a cell phone instead of a pistol, community interpreters are the cowboys (and girls) of the interpretation industry!

Calendar of Events

✓ OCTOBER 2007

October 27, 2007: English Grammar Workshop (ATIO)

Delta Chelsea Hotel, Toronto
Information: http://www.atio.on.ca/PDD/PECK_REG_TOEn.pdf



October 31-November 3, 2007: American Translators Association 48th Annual Conference

San Francisco, California – USA
Information: <http://www.atanet.org/conf/2007/>

✓ NOVEMBER 2007

November 3, 2007: English Grammar Workshop (ATIO)

University of Ottawa, Ottawa
Information: http://www.atio.on.ca/PDD/PECK_REG_OTEn.pdf

November 9-10, 2007: “The Translator’s Profession,” International Conference and 50th Anniversary

École supérieure d’interprètes et de traducteurs, Université de la Sorbonne Nouvelle – Paris III

Paris, France
Information: http://www.univ-paris3.fr/esit/colloque/programme_definitif.pdf

November 24, 2007: Translation of Immigration Documents Workshop – Spanish into English (ATIO)

University of St. Michael’s College, Toronto
Information: <http://www.atio.on.ca/PDD/DominguezLambertTOEn.pdf>

November 24-26, 2007: 11th International Translation and Interpretation Congress “San Jerónimo 2007” and 2nd Meeting of the FIT Regional Centre Latin America

Guadalajara, Mexico
Information: <http://www.fit-ift.org/doc/cal-nov24.pdf>

November 29-30, 2007: Translating and the Computer 29

Kensington – London, England
Information: <http://www.aslib.com/conferences/tcindex.html>

✓ DECEMBER 2007

December 7, 2007: ATIO Christmas Dinner

Toronto

December 14, 2007: ATIO Christmas Dinner

Ottawa

✓ APRIL 2008

April 5, 2008: ATIO Annual General Meeting

Toronto (Delta Chelsea Hotel)

✓ AUGUST 2008

August 1-7, 2008: XVIII FIT World Congress

Shanghai, China
Information: www.fit2008.org

On the Lighter Side Internet Sites

By Nancy McInnis, President

The last “On the Lighter Side” survey dealt with members’ favourite Internet sites. We thought you might want to use this as an opportunity to share your favourites, and perhaps pick up a few new ones. Yet there was very little response—too little to have any real significance. We are left wondering why. There was a problem with the site at first, but it was soon remedied. Did members not go back to slot in their answers? Or are you jealously hoarding your favourite sites?

Be that as it may, a couple of sites came up more than once. Termium and *Le grand dictionnaire terminologique* aside, members have tried Translators Café, Agent Solo, Trans Term, dict.cc (English-German), Proz, Gotranslators, Wordreference, Aquarius, Systran and Reverso. The next time you are stuck on a word or phrase, you might consider giving one of these a try to see what you think of them. But please note, we are not recommending any sites; we are merely passing along those mentioned by respondents.

We were also interested to read what services members wanted ATIO to offer. Many of the services you asked for are already available on the Website. For example, we have a list of links that includes other associations, schools, and Internet tools. We have a calendar of events under the *InformATIO* button. Job postings are routinely sent out to members, and our home page has been redesigned to include News from the World—language-related news stories from around the world—as well as information to help clients determine whether they need a translator or an interpreter. Not only that, but we have our own terminology bank, languishing on the sidelines for want of input. If you are unable to find the help you need on any of the Websites mentioned above, enter your term in the ATIO termbank, and perhaps another member will be able to help you out. You can only get out of it what you are willing to put in!

InformATIO

Published by:

**The Association of Translators and Interpreters of
Ontario**

1202-1 Nicholas Street

Ottawa, Ontario K1N 7B7

Tel: (613) 241-2846 / 1-800-234-5030

Fax: (613) 241-4098

E-mail: InformATIO@atio.on.ca

Website: www.atio.on.ca

Circulation: 1600

Printer: Plantagenet Printing

Graphic Designer: More In Typo

Editorial Team: Catherine Bertholet, Alana Hardy, Nancy McInnis, Michel Trahan, Ilse Wong

Editorial policy:

The Editorial Committee of *InformATIO* reserves the right not to publish, or to edit with the author’s consent, any article submitted or commissioned for publication. Any opinions expressed (except in articles signed in an official capacity) are those of the authors and are not endorsed by the Association.

Special thanks to: Elizabeth Abraham, Patricia Adjizian, Lise Balthazar, Lola Bendana, Michel Bérubé, Nathalie Blais, Denis Bousquet, Estelle Brunet, Christiane Delon, Vanesa Demko, Claude Forand, Effrossyni Fragkou, Axelle Janczur, Nancy McInnis, Jucelei Pereira