

Tips for Providers on Mental Health Interpreting

Practice-Based Guidance for Working with Interpreters in Mental Health Settings

Use trained interpreters, not bilingual staff or community members.

Untrained interpreters permit inaccurate or summarized interpretations of clients' comments. Bilingual staff and community members are less likely to keep the clients' sessions confidential.

Explain "interpreting procedures" to the providers and clients.

Professional interpreters are trained to use different "interpreting procedures" depending on the circumstances. The interpreter should explain these procedures to the provider as well as to the client in order to assure clear communication.

Address the stigma associated with mental health that may influence interpreters.

Untrained interpreters may not understand the sensitivity of mental health and bring their own prejudices to a session. For the provider's treatment to be effective, possible biases needs to be addressed.

Have the provider discuss their goals for a session with the interpreter before seeing the client.

Providers often have specific goals for each counseling session. The interpreter needs to be aware of these goals to work with the provider towards reaching common outcomes.

Schedule time for the provider and interpreter to meet before and after each session to discuss concerns or

answer questions.

The provider and the interpreter will not always understand the other's methods. Allow time for them to communicate about a session to reduce problems or confusion.

Train providers and interpreters in cultural competency and help them understand the importance of culturally and linguistically sensitive interventions.

Cultural and linguistic backgrounds influence the beliefs and values of every client and must be addressed to connect with the individual and to make the largest impact.

Debrief interpreters so they can process the traumatic stories heard when interpreting the clients' experiences.

Many interpreters have experienced traumatic events similar to those reported by clients and may have emotions triggered when hearing clients' experiences. To keep the interpreter healthy, debriefing should occur or a support system should be available.

Build a provider-interpreter team.

Providers and interpreters are both essential to the client's good care. Emphasizing mutual respect facilitates better outcomes for clients.

Source: <http://www.healthinschools.org>



ASIAN PACIFIC AMERICAN HERITAGE MONTH

May 2019 Calendar

*Asian American and Pacific Islander
Heritage Month*

National Mental Health Month

- 1 – Labor Day (International)
- 2 – National Day of Prayer (US)
- 5 – Cinco de Mayo (US)
- 6 – Ramadan Begins (Islam)
- 5-11 – National Anxiety and Depression Awareness Week
- 6-12 – National Nurses Day & Week
- 10 – Mother's Day (Mexico)
- 12-18 – National Hospital Week
- 12 – Nurses Day (International)
- 12 – Mother's Day (US)
- 18 – Buddha Day (Buddhist)
- 24 – Victoria Day (Canada)
- 27 – Memorial Day (US)

Certified Deaf Interpreters (CDI) Provide Optimal Language Access in Healthcare Encounters

by *InDemand Interpreting*

To provide the best possible care to Deaf patients, it is important to secure the services of Certified Deaf Interpreters (CDIs), enabling providers and patients to gain a more complete picture of healthcare needs while ensuring optimal language and cultural access for Deaf and hard of hearing (HOH) patients. CDIs can be incredibly beneficial in the healthcare setting, particularly when there are complex demands and unique language needs.

American Sign Language (ASL) Interpreters are bilingual in ASL and English, and are trained professional interpreters, however, they typically are not native users of ASL. CDIs, on the other hand, are native users of ASL, trained professional interpreters, and have a shared language and cultural experiences with the Deaf patient. Often, an ASL interpreter and a CDI work together to ensure optimal communication and accuracy, support Deaf consumers with unique language needs and manage dynamic encounters that may be highly emotional and stressful for all parties.

CDIs have native exposure to American Sign Language (ASL), giving them a higher level of fluency and linguistic competency as they are accustomed to working with a variety of consumers and interpreters. As a result, they can interpret in diverse settings, making them an asset to Deaf patients, providers and interpreters, no matter the patient's language competency and region. For example, a Deaf patient, fluent in ASL, may arrive for a routine appointment. During the encounter, the ASL interpreter may note some regional or dialect differences that they do not recognize. When a CDI joins the encounter, the CDI is familiar with the dialect and able to communicate more effectively with the patient and the provider. As a result, the flow of communication is seamless, and the message conveyed is accurate. The presence of another Deaf person, a CDI who possesses the linguistic and cultural training and experience, quickly eases communication access. The patient and healthcare provider can fully communicate and participate in this healthcare encounter with the interpreting team present.

This is just one example of how ASL interpreters and CDIs can work together to provide a better experience for both patients and providers. Within medical video remote interpreting (VRI) encounters, there are several additional reasons an ASL interpreter may need to partner with a CDI to ensure clear, effective communication, including: interpreting for monolingual ASL signers; foreign-born patients; highly emotional/traumatic medical encounters; new diagnosis and treatment presentation; patient education (i.e. diabetes education); mental health encounters; patients with physical limitations. Using CDIs has the potential to maximize a variety of medical encounters. CDIs function as effective resources to support a high-performing language access experience for everyone involved.

Source: https://blog.indemandinterpreting.com/blog/certified-deaf-interpreters-healthcare?fbclid=IwAR1i8Ui6bmQHNbhSUIStvNYVC8uK8GNnwko2_a9NQmXLnFOVnzd-ThbGCEM

New Supervisor Profile: Soyun Kim



Soyun Kim is the new Translation Projects Supervisor at Medical Interpreting Services, UC Davis Health. She was born in Seoul, South Korea and lived there until she moved to Monterey, CA in 1998 to attend the world-renowned Middlebury Institute of International Studies where she obtained two Master's Degrees: in Teaching Foreign Language and in Translation & Interpretation (T&I). She taught Korean and English as foreign languages, trained foreign language instructors, developed T&I performance tests, and worked as a Korean translator/interpreter before joining UC Davis. She has lived in different places including Shanghai, Toronto, and several states in the USA. She enjoys the diverse environment at UC Davis Health. Some of her favorite events at work are the multicultural potluck celebrations! She appreciates the opportunity to practice customer service through MIS dispatch coordination and looks forward to collaborating with the written translators for future medical translation projects. She spends her spare time walking her 7-year-old German Shepherd with her husband, running and volunteering at a local food pantry in Vacaville CA.

Welcome onboard, Soyun!