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Understanding the different dimensions of healthcare systems: the 'interpreting voice' found in interpretation and translation services

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ABSTRACT

Interpreting was not something I had aspired to do; however, when I realised that there was a genuine scarcity for people in need of such services, I made a conscious decision to work as a freelance interpreter. The translation and interpreting service operates through various methods, such as face-to-face, video interpreting or remote interpreting by phone, depending on the need and the availability of both the user and the service provider. Usually, the doctors and other healthcare staff who work in the National Health Service book the interpreters through various interpreting companies, if patients are unable to speak the English language to express themselves. Despite immense effort, many times, staff cannot find interpreters for the patients; hence, I feel that awareness should be made so that people can come forward to use their language skills to help those people who require it. Having a medical degree helped me and instilled in me a better understanding, which is why I consciously give my free time to this service. In this article, I have tried to share my experience, so that people can derive a better understanding regarding the interpreting service in the UK. As an interpreter and translator of three languages, I have been working on a freelance basis for the past 3 years in the UK and am a linguist, a registered member of Chartered Institute of Language (CIOL).

BACKGROUND

The National Health Service (NHS) is the main healthcare service provider in the UK, aside from the private healthcare services available. People from different parts of the world have come to live in the UK to make it their home. They pay taxes regularly so that they can avail NHS services for themselves just like any other citizen. However, due to the language barrier, many people are deprived of equal and quality healthcare, which is a matter of great concern. The UK government has allocated funds for interpreting and translation services so that those people who speak languages other than English can have equal and quality healthcare service. Although the interpreting and translation service has its presence in the NHS for long, people are still unaware of its presence, and it has not reached the wide coverage that can support non-English-speaking patients. This has affected the health of many people directly and indirectly as many people are still struggling to get a proper healthcare service in their own language. Hence, awareness of the interpreting and translation service has become the need of the hour so that everyone

can have equal and quality healthcare services. This will call for more culturally appropriate care for people who are deprived of such services due to the language barrier.

Aim

Understanding the role of interpreting and translation services in the UK in delivering more culturally appropriate people-centric care.

Conclusion

An interpreting and translation service is more than just interpreting one language into another. There are a myriad of factors that play a great role in the smooth delivery of interpreting services in the NHS. The UK being a melting pot of different cultures and languages, it is vital to make the NHS healthcare service accessible even for limited English-proficient (LEP) people or those who do not speak English at all; hence, the awareness for the presence of interpretation and translation services should be made at all levels of healthcare services.

'The Census revealed that 65% of individuals with self-reported LEP identified as having 'good health' compared with 88% of the English-proficient population (Office of National Statistics, 2015) suggesting a correlation between LEP and poor health'.¹ It is also a wake-up call to the leaders who should also focus on culturally appropriate care. The one-shoe-size-fits-all healthcare service is the thing of the past as we are now a part of a global community where each and everyone's voices and languages matter. The healthcare leaders should be able to provide services to all people who belong to different cultures with different needs. More awareness should be made, and changes should be brought in from various levels to bridge gaps if there is and make it an accessible service for all. '...strategies optimizing care for migrants include the use of bilingual healthcare professionals or community-based healthcare workers, cultural competence training of all clinic staff, the appropriate use of trained interpreters and the use of culturally appropriate health promotion materials'.² Leaders and lawmakers should be focusing on culturally appropriate services by providing and catering to the needs of different cultures to provide wholesome care. The overhaul of the health system should be done at every level so that it embraces all and leaves behind none. With the help of interpreting services in the NHS, all people with various languages and cultural backgrounds can have equal access to healthcare services. People will not suffer



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from misdiagnosis and the NHS can provide better and optimum culturally inclined healthcare for all.

Understanding the need for the hour, it is recommended bringing more awareness about interpreting services at every level of the healthcare system in the UK. Personally, I have heard many stories from people that healthcare workers had to rely on cleaners or even passersby who happened to know the language as they did not have interpreters for the patients. Not having an interpreter is a serious situation but having unprofessional or unqualified people doing interpretation is even more dangerous for the patients. It often makes me wonder, how can such situations sit right with lawmakers or people who are able to make changes for the people's health? How can we risk the lives of non-English speakers by such callous act and not have a strong infrastructure that covers people from different countries with different languages? The government must make the interpreting and translating service a mandatory one at every level and its awareness should be highlighted more so that the healthcare system becomes truly available and accessible for all, like it should be. Choosing the right language is also vital for interpretation to save time, money and most importantly, the health of the patients. Hence, more options of languages should be given to the patients by health institutions to help them choose the correct language for themselves, and more awareness should be created at every level of health services to provide efficient and quality services for all.

ANALYSING THE VOICE OF INTERPRETATION IN THE NHS

I took the earliest train to reach my assigned workplace, an hour earlier to be precise. I ran through the busy street, as I knew how important it was for me to be there at that time. By the time I opened the door, I could see two other interpreters inside a room full of people. I was in fact the third interpreter they had invited and there were eight people in the room, including me.

My client, a Nepali child, had learnt basic sign language in Nepal but did not know British sign language (BSL). So, there were two interpreters, one for basic sign language and another for BSL. The child would first express herself in basic sign language, which would be relayed by the basic sign language interpreter to the BSL interpreter. The latter would then interpret the BSL to English for me which I subsequently had to interpret to the child's parents in Nepalese language. The parents' answers or queries were interpreted to the social service workers, respectively, by me. So, there was the volley of signs among sign languages, English and Nepalese languages, playing back and forth in the room, almost taking a shape of game of tennis. My role in this was crucial for the child's health and well-being, as the parents as well as the social service people could not understand the child who needed to be assessed and enrolled in a school based on her ability. This was the reason why I was booked a month ahead so that it would help her to get a better school that could cater to her needs. Her parents were unable to fathom the need of their child as they themselves were not fluent in any sign language. This had marred their relationship as it was fuelled with frustration and tension for not understanding each other. Currently, the child was not well adapting to her school, and she felt frustrated for not being able to express herself to anyone, just because there was no one to help her interpret. After months from this appointment, I again met her in a hospital for her further check-up. This time, her hearing aid needed to fit in so she could hear properly and her relationship with her parents looked better than before. A school was assigned to her after our previous rendezvous, and I was elated to see the fruition of my

previous effort. I slowly started to see the clear picture of how small dots of our services are connected and play a crucial role for the well-being of people's health in the long run. Without the interpreting service, she would not have been assessed, which led her to finding the correct school which she required, not forgetting the help she got from social workers after the assessments and the hearing device to aid her listening skill. She was also able to express herself better to her parents and vice versa in the presence of the interpreters. All those interpreters were there, including me, just to facilitate this child so that she could go to school and hear properly with her fitted device.

INTERPRETING DURING THE COVID-19 TIME

The initial days, when the COVID-19 pandemic was just emerging to become the notorious virus that everyone was trying to shield themselves and protect from, were in fact an eye-opening time for all of us. Healthcare systems everywhere around the world relied on dedication and selfless acts of healthcare workers to go through the eye of the storm that had swept the whole world. I cannot emphasise enough the role that interpreters played in the healthcare system, during this testing time, where sometimes many procedures like surgeries were left hanging at the mercy of the interpreters. Anaesthesia could not be carried out without explaining the procedures and technicality to the patients or any vital procedures for that matter were put on hold due to a lack of face-to-face interpretation. Many appointments were cancelled, and interpreters had to continue their support through remote interpreting via telephone interpretation or video interpreting as face-to-face interpretation was very limited or was not carried out at all during the COVID-19 period. This situation was not an ideal one for both patients and the interpreters in the already limited atmosphere, where it is not always easy to get hold of the interpreters. The effort to interpret and provide services from their own home through mediums like phones and video calls is another example of how vital the service was in that tumultuous period and how all interpreters continued their services.

INTERPRETING SERVICE FOR THE PREGNANT WOMEN

'Pregnant women who do not speak fluent English are at greater risk of poor birth outcomes compared to their English-speaking counterparts and intersecting factors such as racial discrimination, poverty, housing issues, poor mental health further exacerbate this risk'.³ Not having interpreting services has more detrimental effects on overall living experiences of non-English speakers, but with careful help and support given by the lawmakers when the need arises, such situations can be improved. The journey of a pregnant woman who does not speak English or has limited proficiency in English can become better if interpreters and translation services are provided at every step from the time she is pregnant until the delivery of the child. The non-English-speaking pregnant women have better birth outcomes, if interpreting services are provided, by avoiding mishaps that can be caused during the pregnancy period. The matter of fact is, without the help of the interpreting and translating service, it is almost impossible to give the equal and quality service to the non-English speakers. However, the importance of interpreting services should be highlighted, and people should be made aware of such services at every level of healthcare services so that they can make use of the facilities. The doctors, nurses and other healthcare workers should know about such services or should be given training on how to use them to the fullest, so that they can make full use of the interpreting services to help their patients.

FINDING THE RIGHT VOICE

Keeping the equality in mind among the diverse population of the UK, the interpreting service becomes a vital tool for healthcare professionals to equip with. The cost of keeping an interpretation service may not be a welcoming addition for many, but being taxpayers who contribute to society equally, we cannot deny people equal healthcare services, based on their language skill.

Many Pakistani people book for Urdu interpreters, and I find them speaking in Punjabi in the middle of the conversation often leaving me at lurch that I had to stop the service many times to inform them about my limited knowledge of the latter. The fluency level should be on a par with a native in speaking and understanding. Oftentimes, I find my own Nepalese-speaking people speaking in dilapidated Hindi language for which I must correct them and request the team to change it into Nepalese language. The fact that Nepalese language interpreters are available like any other languages and are also provided when requested sometimes comes as a novelty if not a shock for many people. I do remind them to always ask for the language they are most comfortable in speaking and understanding, rather than falling into the assumption that understanding a few words and sentences is more than enough to express themselves in another language. The sensitivity of people's health is a matter of great concern that we should deal with utmost care. This is why awareness about interpreting services should be made at all levels in healthcare systems, so that people have the option of choosing the correct language.

I once entered a meeting room in a hospital and found a group of seven people, which consisted of a team of doctors, nurses, a patient and her family, who were waiting for me to interpret the meeting. Looking at the number of people present, I understood that it was some serious case that needed to be discussed well with the patient by the health personnel team. But to everyone's dismay, the moment the patient opened her mouth, I understood that somebody did not check the correct language section. They were waiting for a Sinhalese interpreter for Sri Lankan people, and they misunderstood it as Nepalese language. Although I was allowed to leave and was paid, I could feel the time and the money being wasted due to inefficiency in locating the correct language. It does cost money to pay for the interpreting services and not to forget many who still do not have access to it, which is why it has become crucially important to locate the correct language.

This calls for serious work on the part of the health workers who book interpreters as well as the patients who request their preferred languages. They both should be aware that finding the correct language and requesting as well saves not only time and money but also the effort that may go to waste.

AWARENESS OF AND FOR DIFFERENT VOICES IN THE NHS

One young woman who requested me to meet her under a tree outside the hospital, after interpreting for her, took me by surprise. I was one of the few people who could speak her language, whom she had met after a long time. She wanted to thank me for my service with £30 wrapped inside a red envelope. It took me some time to make her understand that we already are paid for our services, and she need not pay anyone to help her interpret in the hospital. This incident also made me understand how vulnerable these people are, who could easily be exploited as many of them are unaware of the interpreting services provided by the government. Many of the non-English-speaking patients must find someone, on their own, whom they

can take to their appointment, and who can interpret for them like friends, family members or people whom they must pay just to interpret for them. Not everyone is able to find the interpreters and it sometimes causes the patients the dilemma of not being able to understand their own ailments without the help of interpreters.

Unaware of such facilities provided by the government which are free of charge, many times patients shy away from expressing themselves fully. Not everyone is keen on taking an economic burden, so they often deny themselves proper healthcare by avoiding it all together. This, over time, has resulted in giving incorrect diagnosis and treatment, resulting in adverse health effects in the long run as well. Hence, it becomes even more important that all doctors and healthcare personnel are made aware of such facilities and make the patients understand that such services are free of charge, which they can avail by requesting in surgeries or hospitals. They should be given training on how to request and connect the patient with the correct interpreters as well. 'It is important once you have identified a specific need for an interpreter, that this is recorded on the patient's file, so that others do not have to repeat the process of working out the language spoken and the right interpreter'.⁴

One should be aware that many different dialects or languages are spoken in many geographical regions within a country. Such dialects may be totally different than the national language of a country; hence, we should be very clear and accurate in choosing languages because sometimes, despite hailing from the same country, people speak different languages and may request for different languages according to their preference. For instance, Pakistani people can request for an Urdu or sometimes Punjabi-speaking interpreter, while Indian people can request for Hindi or Gujarati interpreters. Like shifting gears, unless one knows the pulse of the languages, then interpreting becomes quite challenging as knowing the language is often not the first hurdle, in fact, translating and interpreting correctly in medical term is the major goal to reach, within a limited time. '...using professional interpreters in healthcare settings can mitigate communication barriers, improve clients–healthcare professionals' interactions, and positively influence healthcare access and quality for clients with limited English proficiency, overall lessening healthcare costs'.⁵ Knowledge on cultural sensitivity, aside from dialect and languages, bound to geographical perimeter, is an important aspect of interpreting.

Having medical knowledge is a must in this field because we are expected to give an accurate picture of everything that is on our plate. Oftentimes, I have heard patients complaining about how they wanted to say certain things to the health staff but the interpreter, instead of doing their work, would give them a different interpretation to the doctors or the healthcare workers. I also have witnessed it personally when interpreters come in with preconceived notion and would interject their own thoughts in between, rather than saying the exact meaning. Becoming an interpreter of three languages, I do not shy away, if I feel I must, from informing about my shortcomings in terms of understanding different cultures and religions. Sometimes, I must understand the sensitivity of the issue and must excuse myself if a man feels embarrassed to open about their health with a female interpreter and same goes for a woman as well in case of a male interpreter, due to cultural background.

CULTURALLY APPROPRIATE SERVICES

As we are taught to say, 'Today I will be your voice' while interpreting, sometimes we must become their pillar of strength

as we give our voice to their stories. ‘The lack of interpreter services for South Asian languages creates additional barriers to accessing health services and communicating with healthcare professionals’.⁶ From my own personal experience, I can say that my respect for doctors increased many folds when I saw that many doctors are not only respectful of various cultures but are also very understanding and knowledgeable as well. I have seen them going out of their way to make their patients understand procedures just to put them at ease. Once I was interpreting for consultants and the patient, instead of saying that she felt dizzy and felt the things were moving around her, expressed differently. She was further asked what could have been the reason behind it for which she innocently replied that Goddess had shook her. I was a bit hesitant to interpret thinking how they would perceive it; nevertheless, I interpreted it verbatim. She was just expressing normally but the way she worded those sentences could have been misconstrued, had they not been culturally sensitive, understanding and non-judgemental about it. This makes it even more crucial for the interpreter to know, understand and interpret the cultural and religious background of the patient to the health workers to shed better light on their cases. Many diseases are misdiagnosed or misconstrued due to cultural insensitivity. Creating a culturally sensitive and culturally appropriate healthcare system is a must so that patients are not placed in difficult situations of being misdiagnosed.

‘A family member may also give you their own version of events, and their emphasis may skew the whole consultation. It can also be difficult to check the veracity of the interpretation. This could lead to a misdiagnosis.’⁷ Many times, non-English speakers must rely on their friends, family members and relatives who may not be qualified or suitable to interpret for them. It is not taken as an ideal situation as it may lead to a situation where the patient may not be able to fully express themselves or their interpreters whom they know personally and previously may not accurately interpret for their own known reasons. But due to a lack of any interpreter, they must confirm to such situations that are less than ideal, which often compromises their treatment plan.

‘During interpreting, the interpreter must understand a message produced in one language and then simultaneously (or else subsequently) reproduce that message in the other language. This means that interpreting requires parallel activation of at least two languages.’⁸ Interpreting does require robust knowledge about the subjects and cultures because many things are often lost in translation if one is not acutely aware of the details which consequentially may affect the healthcare of the patients. Hence, in order not to have such incidents, interpreters from the same culture and countries are often preferred because many diseases and health issues are often related to cultures that may need broader understanding from the doctors’ and the healthcare workers’ part. Interpreting for health service may not be as tough as judiciary or conference interpreting where simultaneous interpretation and chuchotage lead to a rigorous situation.

But if you want to give your cognitive mind a little bit of jogging, then interpreting in the health sector may be for you. With the help of interpreting services, we can render not only the best service but also an equal service to all patients and they need not be victims of a lack of culturally sensitive services, but should have access to a healthcare service that caters to people who have various languages and cultural backgrounds.

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