Medical Interpreter Ethics

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Interpreter Ethics—Why?

- Patient story: My interpreter told me that the other interpreter in town would gossip about me, so I should always get appointments that would fit with his schedule. This slowed down my course of treatment so much that I lost my insurance before I could finish treatment, and now I can’t afford to go to the doctor.
Interpreter Ethics—Why?

Patient story: My interpreter was with me when I had to terminate my pregnancy due to very severe abnormalities in the fetus. The interpreter keeps telling me that God does not allow abortions. I am so depressed that I cannot take care of myself or my two children.
Interpreter Ethics—Why?

- Patient story: When I go to the heart doctor, my interpreter likes to talk to the doctor in English. He tells everyone that he went to medical school back in his country. The doctor hardly pays any attention to me, and the interpreter tells me not to ask so many questions, just to do what the doctor instructs me to do.
Interpreter Ethics/Key Concepts

- Primary relationship in health care
- Accuracy
- Confidentiality
- Respect
- Barriers to over-familiarity
- Financial gain
- Influence, dependence
- Impartiality, personal beliefs
- Awareness of culture
NCIHC  National Council on Interpreters in Health Care

- http://www.ncihc.org/mc/page.do

Core values of NCIHC code:
  – Beneficence
  – Fidelity
  – Respect for culture and differences
Primary Relationship

- Patient to Provider
- Interpreter facilitates primary relationship
- Avoid: distracting behavior, side conversations, emotional displays, casting doubt on either party’s reputation or capability.
Primary Relationship-Ethical

- Interpreter directs each party’s attention to the other
- Interpreter is transparent in communication
- Interpreter encourages patient to ask provider questions
- Interpreter encourages provider to check for understanding from patient
- Interpreter faithfully represents voices
Accuracy

- Transmit the meaning. Do not leave anything out. Do not add anything unless you claim it.
- Transmit the tone.
- Transmit any meaning from body language.
- Clarify your own understanding of statements from both parties
- Notice, be aware of, indications that either party may need further clarification.
Accuracy--Ethical

- Let provider OR patient know if you do not understand what they say. Have them explain it.
- Write down numbers or names or meds so that you can repeat them correctly.
- Ask provider OR patient to repeat if you forgot something they said.
- Convey emotion, anger, bad words.
- Correct any mistakes immediately, openly.
- Acknowledge when interpreter limitations may affect accuracy of interpretation.
Confidentiality

- Share only within the HC organization.
- Share only for need-to-know with HC.
- Gossip within HC is NOT need-to-know.
- Patient can be killed or ostracized if PHI is revealed to family or community.
- Know the rules for what info can be left on a message machine or with family member (if your role includes phone reminders).
- Dispose of written materials properly, including your own notes.
- Observe phone confidentiality guidelines.
Confidentiality--Ethical

- Use diplomatic excuse (scripts) to avoid sharing ANY info with family, friends, coworkers. (Handout)
- Report any breach of confidentiality.
- Assure patient that you are committed to protecting her privacy.
- Offer to withdraw from cases where patient might resent your knowing his business.
Respect

- Approach patients, families, and health care staff with the assumption that they have inborn worth as human beings.
- Give every party credit in your own mind for having talents and capabilities.
- Respect the autonomy and expertise of each party.
- Give every party your attention and your best effort.
- Leave judgment aside while working.
Respect--Ethical

- Be encouraging and positive even if you have heard bad things about a party.
- Help each person be the best that she can be.
- Find diplomatic ways to say good things about any party being complained about.
Barriers to Over-familiarity

- Share only general and non-controversial information with patients.
- Do not give out your contact info.
- Be clear about the scope of your job.
- Avoid making personal comments unless positive and non-intimate.
- Do not encourage patient chatter about relationships, troubles, opinions.
Barriers--Ethical

- Use a polite script to decline discussing personal subjects.
- Deflect or distract the patient from disclosing info about himself, or remove yourself from the vicinity politely.
- Educate the patient about boundaries of the interpreter role in general.
- Steer the patient to sources of help for problems, such as community agencies, and encourage her to become competent herself.
Financial Gain

- Generally, do not accept cash or gifts.
- Never develop a conflict of interest: your interpreting existence should have zero connection to any money-making situation.
- Never solicit business from patients or providers.
Financial Gain—Ethical

- Use a polite script to refuse most gifts.
- Food gifts may be accepted in some instances.
- Share gifts of food with coworkers.
- Assure patients that they have the right to an interpreter for free.
- Do not use the interpreting environment to get information with which to make money, such as selling life insurance.
The interpreter has enormous influence over patients, due to
- Dependence of patient upon interpreter, due to interpreter’s language skills
- Power within the health care setting
- Greater education, in some cases
- Position in the community, in some cases
Influence, Dependence

- The interpreter can foster harmful dependence in patients by:
  - Assuming that the patient is helpless
  - Assuming that the patient cannot grow/learn
  - Taking over tasks for the patient that he could do for himself
  - Reassuring the patient endlessly that she can count on the interpreter to take care of her.
Influence--Ethical

- Use a script to decline giving your opinion about what the patient should do.
- Encourage the patient to learn about his options.
- Red flag yourself whenever you realize that you really want the patient to do something in particular---refrain or remove yourself from this relationship.
Dependence--Ethical

- Be clear with the patient that you encourage his growing confidence and competence in navigating the system.
- Offer navigation information, explain the process, cheerlead the patient through the steps herself.
- Notice when a patient is too dependent on you, and correct the relationship.
Impartiality, Personal Beliefs

- Politics
- Religion
- Health care practices

The interpreter can do enormous damage to a patient’s health care by showing her opinion about these topics.
Impartiality--Ethical

- Truly refrain from showing your opinion about health care practices or health care choices. No excuses, no slogans, no body language.
- Save your opinions for arenas outside of healthcare: sign up for work in political, religious, or advocacy organizations.
Awareness of Culture

- Own culture(s)
- Patient’s culture(s)
- American medical culture (biomedical)
- Research culture
Cultural Awareness--Ethical

- Know your own cultural blind spots and work extra hard to respect patients or coworkers in those blind spots.
- Know your areas of ignorance with respect to culture, and work to learn.
- Use cultural information as background, not as stereotyping.
- Encourage coworkers to grow in cultural awareness and to ASK the patient.
Continuing Education--Ethical

- Assess your knowledge (technical understanding, language, culture, community, system)
- Address your knowledge gaps
- Assess your skills
- Address your skill gaps