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AHDC Email Network – Cultural Competency and Culturally and Linguistically Appropriate Services (CLAS)  
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- 1) Professional interpretation is the best option for multilingual medical environments
  - 2) Evidence for the Importance of Interpreter Positioning
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### **1) Professional interpretation is the best option for multilingual medical environments**

A new study, published in the most recent issue of the *Mount Sinai Journal of Medicine: A Journal of Translational and Personalized Medicine* is to present the narrative of a family-member interpreter in Israel, a diverse immigrant society. While numerous studies have been done on the challenges in the doctor-interpreter-patient medical encounter, these studies tend to focus on the experiences of the physicians or the patients, and the perspective of the interpreter is often sidelined. After discussing the various interpreting options, the researchers suggest that the perspective of the family-member interpreter strengthens assertions that professional interpretation is the best option for multilingual medical environments.

<http://onlinelibrary.wiley.com/doi/10.1002/msj.20189/abstract>

### **2) Evidence for the Importance of Interpreter Positioning**

A recent article published in *Medical Education Online* (2010, 15:5151) highlights the importance of interpreter positioning. In this study, 162 second-year medical students completed a 3-hour workshop on how to work effectively with interpreters followed by a 1-station clinical examination 8 weeks later to assess their skills. Based on a passing score of 70%, 39.4% of the class failed. The two most common problems appeared to be assuring confidentiality (missed by 50%) and positioning the interpreter (missed by 70%). Here is where the study gets interesting. While addressing confidentiality did not appear to have a significant impact on standardized patient satisfaction, interpreter positioning did. The authors concluded that instructing an interpreter to sit behind the patient helps to sustain eye contact between clinician and patient. They suggested emphasizing guidelines for interpreter positioning in medical education and also said further research should be conducted on this subject. As a side note, one presentation in the Critical Link conference in Birmingham made clear that the triangle is still the dominant position in Europe and elsewhere for community interpreting. Many attendees also felt strongly that interpreters should not promote direct eye contact between service providers and clients. Interpreter positioning appears to be a very "hot" topic internationally.

<http://www.med-ed-online.net/index.php/meo/article/view/5151>