

Working with interpreters in the counselling professions

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#### **Good Practice in Action 091**

#### **Fact Sheet**

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**T:** 01455 883300 **F:** 01455 550243 **E:** bacp@bacp.co.uk **www.bacp.co.uk** 

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Design by Steers McGillan Eves

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#### **Context**

This resource is one of a suite prepared by BACP to enable members to engage with the BACP *Ethical Framework for the Counselling Professions* www.bacp.co.uk/ethics/EFfCP.php in respect of working with interpreters in the counselling professions.

#### **Using Fact Sheet Resources**

BACP members have a contractual commitment to work in accordance with the current *Ethical Framework for the Counselling Professions* (BACP, 2018). The Fact Sheet resources are not contractually binding on members, but are intended to support practitioners by providing general information on principles and policy applicable at the time of publication, in the context of the core ethical principles, values and personal moral qualities of BACP.

Specific issues in practice will vary depending on clients, particular models of working, the context of the work and the kind of therapeutic intervention provided. As specific issues arising from work with clients are often complex, BACP always recommends discussion of practice dilemmas with a supervisor and/or consulting a suitably qualified and experienced legal or other relevant practitioner.

In these resources, the word 'therapist' is used to mean specifically counsellors and psychotherapists and 'therapy' to mean specifically counselling and psychotherapy. The terms 'practitioner' and 'counselling related services' are used generically in a wider sense, to include the practice of counselling, psychotherapy, coaching and pastoral care.

#### 1 Introduction

The principle of justice is an essential principle of the *Ethical Framework for the Counselling Professions*, and mandates fair and impartial treatment of all clients. It also requires a commitment to put clients first, provide adequate services and establish appropriate working relationships with clients through clear communication. This includes making counselling available to non-English speakers (including clients who use sign language). Ensuring that a client feels understood is a fundamental pillar of counselling, and is only possible through the use of interpreters when a counsellor lacks fluency in the client's language.

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Concerns about working via interpreters are common and include feeling 'appraised' by the interpreter; its impact on the therapeutic relationship, including transference issues; and power dynamics (Granger and Baker, 2013).

Despite its challenges, working with interpreters can foster personal and professional growth by encouraging counsellors to reach beyond the familiar and constantly review their practice. Meeting clients who speak different languages offers an opportunity to learn about a world with different socio-cultural norms, and how this diversity shapes experience.

This resource has been written with all counselling professionals in mind. It is divided into sections to make it easy to read. Although there are sections dedicated to specific populations, the resource should be read in full as many of the principles apply to any work with interpreters. While aiming to give readers an understanding of the special considerations that apply to this type of work, the issues addressed are not exhaustive. Readers who wish to engage with this subject matter in greater detail may consult the references provided.

### 2 Policy and legislation

The National Service Framework for Mental Health (Department of Health, 1999) states that practitioners should be able to demonstrate cultural competence, which involves ensuring access to interpreters where a language barrier exists. Section 4 of the Mental Health Act Code of Practice (Department of Health, 2015) also states that qualified and experienced interpreters should be used with clients not fluent in English. It is against the law (Equality Act 2010) to discriminate when offering services on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.

(See the Equality and Human Rights Commission for more details at: <a href="https://www.equalityhumanrights.com/en/equality-act/protected-characteristics">https://www.equalityhumanrights.com/en/equality-act/protected-characteristics</a>, so those working within the counselling professions will need to consider how they make their services accessible to those who need an interpreter. The Delivering Race Equality in Mental Health Care – an Action Plan for Reform Inside and Outside Services (Department of Health, 2005) also explicitly recommends the provision of a range of culturally appropriate treatments including counselling and psychotherapy.

### 3 Contracting and boundaries

### 3.1 What kind of counselling contract do I need?

The following considerations are important:

- aspects of the contract that apply to the interpreter (such as confidentiality) should be a three-way agreement between client, counsellor and interpreter
- the contract should explicitly state that the interpreter is bound by confidentiality
- it should be clear to the client that your clinical responsibility is to them, and the interpreter's role is to support the therapeutic relationship. Although therapists should respect the interpreter's expertise and experience, it should be remembered that interpreters are not 'cotherapists' and it is important for the therapist to assume overall responsibility for the therapy (Blackwell, 2005)
- the contract should cover client contact outside therapy sessions.
   Interpreters should be discouraged from forming personal relationships with clients outside counselling
- counsellors should ensure that client and interpreter are aware that they can and should seek clarification if something is unclear
- any written information should be made available in the client's preferred language
- your contractual obligations to the interpreter (with regards to fees etc.)
  are distinct from the counselling contract. Responsibility to pay the
  interpreter rests with the service provider where that is an organisation.
  Private practitioners who choose to work with clients who require
  interpreters, should consider how to contract for payment of fees, and
  whether the interpreter will be arranged by the client or counsellor.

Practitioners should consider how they will accommodate interpreting costs in the counselling fees they charge clients and be clear and transparent about this with clients at the outset

- GDPR (General Data Protection Regulation) will mean that you need to be clear within your contracts with both the client, and the interpreter, what personal data will be collected, who will have access to the information, and how long you intend to keep it for
- any limits to confidentiality need to be explained at the contracting stage, including any legal obligations you may have to report disclosures.

### 3.2 Can I use family members or friends as interpreters?

It is not considered good practice to utilise informal interpreting arrangements (Tribe and Morrissey, 2004) because:

- clients may feel uncomfortable speaking about their thoughts and feelings in front of people close to them
- friends or family may be clouded in their interpreting role by a desire to present the client's narrative in a certain light
- casual interpreters would not have had professional training or qualifications to verify their language proficiency
- issues that a client brings may involve or include family or friends
- casual interpreters would not be bound by a professional code of conduct or contract, making it difficult to address any ethical or malpractice issues.

If clients insist, using informal interpreters may be useful to establish rapport before introducing a professional interpreter (Thompson and Woolf, 2004). It is important to always explicitly offer the services of a professional.

A client's refusal of a professional interpreter should ideally be obtained in their own language, independent of any friends/family members.

If a counsellor offers support via an informal arrangement, consideration should be given to how boundaries and confidentiality will be negotiated and any problematic issues addressed. The appropriateness of this arrangement should be reviewed regularly.

### 3.3 What if the client and interpreter know each other?

A client and interpreter may know each other through prior contact. They may have worked with each other before or share social or religious spaces outside of work, due to a shared cultural background. It is useful to check whether the interpreter and client know each other outside of therapy, and consider the impact this could have on the counselling sessions. Members need to remember that they are committed through the *Ethical Framework* to building appropriate relationships and that 'any dual or multiple relationships will be avoided where the risks of harm to the client outweigh any benefits to the client' (Good Practice, point 33b), this would include working with interpreters. It is important therefore for a transparent and clear discussion about boundaries and contact outside sessions to take place prior to therapy commencing and that these are agreed by the interpreter, client and practitioner.

### 3.4 Contact between the practitioner and interpreter

Practitioner contact with the interpreter outside therapy sessions should be regulated by the principles of avoiding any impression of collaboration between you and the interpreter that excludes the client. For instance, reaching and leaving a counselling session together or discussing any sensitive information about the client outside times dedicated to this purpose.

If the interpreter is part of the staff team, this should be communicated to the client at the start of the work and reassurances given about confidentiality and your clinical responsibility to the client.

In such cases, your relationship with the interpreter is akin to relationships with colleagues in multi-disciplinary teams where clients are discussed jointly when appropriate but professional role boundaries are respected.

### 3.5 What if I think the interpreter is acting unethically?

In the first instance, seek advice from a manager or supervisor. If appropriate, meet with the interpreter outside the session and discuss your concerns. Depending on the seriousness of the event, you may have to report the interpreter to their agency or regulatory body and/or terminate your contract with them. If this happens, it is important to arrange an alternative interpreter and let the client know of the change.

Remember that any event necessitating a change of interpreter may have a psychological impact on the client.

### 4 Practical aspects of working with interpreters

### 4.1 What do I need to consider when booking interpreters?

If you work for a large organisation, you may have administrative support to book an interpreter. In smaller practices, the responsibility to book an interpreter may rest with you.

#### Ensure you:

- use a reputable interpreting agency, preferably with experience in the area of therapy/mental health
- book an interpreter who is registered with a regulatory body such as National Register of Public Service Interpreters (NRPSI), National Registers of Communication Professionals working with Deaf and Deafblind People (NRCPD or Chartered Institute of Linguists (CIOL)
- some languages have multiple dialects and transcend national boundaries. If you want the interpreter to be of a particular nationality or speak a particular dialect, ensure you specify this.
- the interpreter should ideally not only be proficient in the client's language, but also be culturally sensitive. Consideration should be given to the client's age and gender
- you may wish to arrange a longer session if using an interpreter. If you
  meet with the interpreter before or after the session, this should be
  included in the allotted time
- try to book the same interpreter for every session with a particular client, to provide consistency and continuity.

### 4.2 What should the seating arrangement be?

There are no strict guidelines on seating arrangements. Ensure that you are not sitting closer to the interpreter than to the client, as doing so may create an impression of collaboration between you and the interpreter. The interpreter should also not be seated between you and the client. You should be able to see and address the client directly, without physical barriers between you. An exception applies when working with sign language interpreters, who may sit adjacent to the counsellor, so that both are in the client's line of sight at any given moment.

A triangle, where all parties are equidistant from each other is one preferred arrangement (Tribe, 2008). Some practitioners prefer the interpreter to be seated behind the client, so that they are only acting as the client's voice. This allows for the client-counsellor 'dyad' to remain relatively undisturbed, but may lead to the interpreter missing non-verbal cues, and is not always culturally appropriate.

### 5 The interpreter's role

### 5.1 What is the interpreter's role in therapy settings?

Interpreters can take on multiple roles depending on the type of service. They may provide linguistic interpretation only, be a part of the team and inform decisions about treatment or be an advocate for the client (Baylav, 2013). Often the interpreter's role depends on whether they are employed by the organisation or sourced from an external agency. Typically, in counselling settings, the interpreter's role is to ensure that the client and the therapist are able to communicate with one another and understand one another as fully as possible.

### 5.2 Do interpreters provide literal translations only?

In therapy, the focus is not solely on facts, but on subjective experiences. For this reason, some believe that exact wording is less important than the meaning or emotion conveyed by the spoken words (Tribe and Morrissey, 2004).

A therapeutic intervention will be useful only if it makes sense within the context of the client's experiences and worldview, which are best understood if the interpreter goes beyond literal translations (Raval, 2013a). Although their role is to translate spoken language without their personal views altering the exchange, interpreting literally may cause certain nuances to be missed (Mudarikiri, 2013). This includes non-verbal expressions or gestures that are important in the client's language. Translating just the words may not adequately capture these nuances and the interpreter may need to take into account the client's wider context, with which they may be familiar, in choosing the most appropriate interpretation.

#### **6 Communication**

#### 6.1 Pre-session discussion

You may wish to meet the interpreter prior to the session to establish an understanding of your roles and responsibilities, and familiarise the interpreter in your therapeutic model. This can help the interpreter to understand the intent of your questions or reflections, which would help to render a meaningful translation (Mudarikiri, 2013). This is also a good opportunity to discuss the interpreter's level of comfort with topics such as suicide, self-harm, hallucinations or dissociation, issues of trauma, sexuality or intimacy, or with expressions of emotions and associated behaviours such as weeping, anger, shouting, swearing or using blasphemous language.

### 6.2 Do I need to change my communication style?

Processes involved in verbal communication, such as taking turns and the flow of conversation are different when communicating via an interpreter (Raval, 2013b).

In consecutive translation, interpreters will need to follow your communication and retain it in their mind while they translate it accurately to the client. Use of lengthy sentences will make this difficult.

Simultaneous translation is used for sign languages, and occasionally with verbal languages.

While this method may allow conversational flow to be retained to a greater degree, counsellors may need time to acclimatise to someone speaking at the same time as them.

Use of direct speech and active, rather than passive, forms of verbs are recommended (Tribe and Lane, 2009).

It is important to be cautious when using metaphors or colloquialisms. Use metaphors that utilise common objects and experiences, bearing in mind that what is familiar to you may not be familiar to the client. In such cases the interpreter, as a bi-cultural professional, plays a valuable role in translating not just the literal meaning, but the closest possible meaning.

### 6.3 What if the interpreter is saying more/less than I did?

Working with an interpreter can leave any one person feeling left out of the exchange at any given time (Messent, 2013) and create doubts about accurate interpretation. Interpreting in counselling is a complex task. Interpreters may have to simplify or clarify messages, take the speaker's linguistic and cultural context into account, allow clients to speak uninterrupted and use summary feedback to maintain the flow of conversation (Raval, 2013b). Additionally, structural differences across languages mean that a particular sentence may not be of equal length across languages.

On rare occasions, an interpreter's attitudes towards the subject matter may influence their translation. If you believe the interpreter is deliberately withholding or altering communication, this issue should be addressed at the earliest opportunity.

# 6.4 What if there isn't a word for what I am saying in the client's native language?

The counselling professions have been developed largely in the Western, English-speaking world and counsellors ordinarily use terminology that may not have an equivalent in another language.

You should assume that the interpreter and client have not had exposure to clinical or counselling terminology. Instead of using a technical term, offer a description that refers to lived experiences rather than psychological theory or models.

### 7 Training, support and supervision

## 7.1 I am concerned about the emotional impact of the session on the interpreter. What should I do?

Interpreters often witness difficult or traumatic stories and are susceptible to vicarious traumatisation (Tribe and Morrissey, 2004). Moreover, unlike mental health professionals, interpreters would not typically have received training in self-care. As professionals holding clinical responsibility for the session, counsellors should ensure that any vicarious trauma experienced by the interpreter is elicited and addressed. In most cases, offering interpreters an opportunity to debrief after a difficult session is sufficient to minimise the risk of vicarious trauma. It is not within the counsellor's remit to offer therapeutic support to the interpreter. Where necessary, this should be arranged by the interpreter's agency/employer, who have a duty of care towards them.

#### 7.2 Reflective practice for therapists

Although clinical supervision is essential for all counselling professionals, some suggest that a greater reflexivity is required when working with interpreters (Mudarikiri, 2013). Therapy via interpreters involves a relational process of three people arriving at a shared understanding of the client's distress and how to support them. It is good practice for therapists to consistently evaluate how their context (social, cultural, training) affects the three-way relationship, as well as the impact of the 'triad' on the practitioner. Commonly reported aspects that warrant ongoing reflection are issues of power, feeling excluded, and conscious or subconscious alliances between two members of the triad that may affect the therapeutic work (Mudarikiri, 2013).

### 8 Working with refugees and asylum seekers

Refugees and asylum seekers differ from other migrant populations in important respects including a history of traumatic experiences, loss of social support, difficulties throughout the process of re-settlement, variations in help-seeking behaviour and access to psychological services (Tribe and Morrissey, 2013).

Clients with an insecure immigration status may worry about the consequences of sharing information in therapy. Clients may fear that the interpreter, being from the same country as them, may have opposing social or political views which are often the reasons people flee their country-of-origin. Interpreters from the same country as the client may have personal feelings about the situation a client is fleeing and may need additional support to prevent over-identification with the client or avoid the pressure to act as the client's advocate.

However, being a refugee is an isolating experience and working with interpreters also carries benefits for clients. They may be a vital link for the client to their reference group (Tribe, 1999).

### 9 Telephone or web-based interpreting

In general, due to the complexity of therapy, counsellors should use face-to-face interpreting (Tribe, 2008). Although telephone interpreting is not ideal for long-term counselling, it can be useful in certain circumstances such as brief discussions to arrange appointments, or to contact a client unexpectedly.

Lack of access to visual cues means counsellors may have to be precise in the use of spoken language and make explicit certain gestures or sounds that carry a meaning when conveyed visually. For example, nodding or using sounds to indicate that you wish the client to continue with their narrative. On the phone, these gestures will need to be translated into words. The client will also not have access to your facial expressions or tone of voice, so you will need to be particularly mindful as to the choice of words you use to convey the intended meaning as well as qualities such as warmth or sensitivity.

Counsellors working online via video or type-chat may have access to automated web or application-based translation. It should be noted that the accuracy of such translation, especially within a counselling framework, may vary greatly and usually involves highly literal word-forword interpreting.

# 10 Supporting deaf clients through sign language interpreters

Practitioners supporting deaf clients should familiarise themselves with deaf culture and identity. Deaf awareness training can be arranged through national or local charities, or for professionals in the NHS, via their trust.

Due to the deaf community being relatively small, protecting confidentiality is an important issue (Fusick 2008). Boundaries should be clarified and any issues related to this elicited at the start of the work.

Check the client's preferred method of communication. Although British Sign Language (BSL) is predominant in the UK, Irish Sign Language (ISL) and Sign Supported English (SSE) are also used. If a deaf client is from another country, they may require an interpreter fluent in their particular sign language.

It is important to engage a qualified interpreter who is registered with a professional body such as the NRCPD. Deaf persons often have communicators who support them in their day-to-day life, but are not necessarily qualified to act as interpreters in therapy.

It is useful for therapists to have a rudimentary understanding of the structure of sign languages. Sign languages are visual-spatial languages with a distinctive vocabulary, grammar and structure that bear little relation to spoken English (Denmark, 1994). Interpreters are ideally suited to assess how best to translate verbal communication. Often, they may have to wait for you to finish a sentence before they can begin interpreting or resort to hybrid signs instead of literal translations in order to convey the meaning of what is said.

Counsellors should ensure adequate lighting and appropriate seating to enable the client to see the interpreter clearly. Lights or windows behind a person create shadows and make it difficult to see signs.

Written communication may not be an adequate substitute to compensate for hearing loss because sign languages do not have a written form and many deaf clients may not have fluency in any other language.

The experience of deafness has implications for how emotional distress is experienced. Interactions with the environment shape human experiences, and a client's experience of emotional distress may be profoundly impacted by deafness. Deaf clients experience special circumstances including isolation and a mistrust of mainstream society (Williams and Abeles, 2004). Issues of power need consideration due to the fact that the client will be outnumbered by 'hearing' people in the room. Issues of transference may also be complicated by the fact that deaf clients may have grown up with 'hearing' adults who did not sign.

### **Summary**

- Interpreting in counselling requires a special set of skills and interpreters should be regarded as valuable colleagues in the therapeutic enterprise.
- It is important to view the interpreter not as an adjunct to the therapeutic exchange, but as someone who provides a crucial link between you and your client, and without whom the work would be impossible.
- Careful consideration should be given to communication, confidentiality and boundaries.
- Practitioners should use supervision to reflect on how working with interpreters impacts the therapeutic relationship and interpersonal dynamics.
- The challenges of working with interpreters can be off-set by the rewards of supporting a client who would not otherwise have access to talking therapies and the richness of adapting one's practice to meet the needs of a diverse client group.

#### About the author

Content for this resource has been authored by Surabhi Chaturvedi MSc, MA. Surabhi is a BACP Accredited integrative psychotherapist and counsellor with a background in clinical psychology. She has practised counselling and psychotherapy in India and the UK in a variety of settings including voluntary sector organisations, public and private healthcare, and private practice. She has previously written for therapy magazines and been published in multiple peer-reviewed academic journals. She is based in London and works as a psychotherapist in the NHS.

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