Spoken language interpreters in social work

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Key points

- Social workers regularly work with individuals, families and groups where there is no shared language
- Professional interpreting services can help to overcome language barriers and enable people to access and engage with services
- People who require interpreters may be discriminated against and can face barriers when accessing services
- Serious Case Inquiries – that investigate into the deaths and injuries of children – have highlighted the importance of spoken language interpreters in social work
- Ad hoc arrangements in interpreting exist and the availability of skilled interpreters is an issue
Introduction

This *Insight* explores policy, research and practice issues about spoken language interpreting in social work, focusing on people who speak limited English. Interpreting refers to spoken language and translation refers to written material. People who speak limited English are referred to as ‘emergent bilinguals’.

There is a host of literature and specialist legislation that focuses on sensory impairment (visual, hearing impairment, or a combination of the two and those who have lost their voice or have difficulty speaking). This review specifically focuses on spoken language interpreters and will cover the following themes:

- Why are interpreters needed in social work?
- Forms of interpreting provision
- Legislative and policy context
- Research and practice issues about interpreters in public services
- Implications for the social services workforce

Why are interpreters needed in social work?

On a daily basis social workers are required to listen to, observe and communicate effectively with service users and carers. Effective communication lies at the centre of successful social work intervention, and interpreting and translation services have the potential to facilitate communication and secure people full access to their rights. However, there can be difficulties accessing interpreters and concern about how to work effectively with them during social work intervention and assessments.

While there exists no data to determine the number of people who use interpreting provision, we know that over 300 languages are spoken in Scotland (National Records Scotland, 2013b), and just over one per cent (73,000) of people aged three and over are reported as being ‘unable to speak English well or at all’ (National Records of Scotland, 2013a). Given these data, it is likely that social workers will work with people who require interpreting provision.

It is social workers’ responsibility to ensure that service users and carers receive the services they
are entitled to. This involves determining whether interpreters are needed to facilitate communication. The availability of quality, independent and timely interpretation and translation services is a key part of safe and effective engagement in social work. Interpreters contribute to assessment and intervention processes by facilitating communication, and by doing so, they gain insight into service users and carers’ experiences, perspectives, wishes and feelings. This is important because communication is a central aspect of existence, human rights and social justice.

Discrimination and oppression are common experiences for emergent bilinguals, thus facilitating communication is an anti-racist and anti-oppressive practice issue. Ensuring that services are provided in a suitable format and facilitating communication is helpful to recognising people’s language, history, culture, traditions and religion (Keating, 2000). It also challenges the dominance of the English language, and limited or inadequate interpreting provision.

**Forms of interpreting provision**

Interpreting can be offered face-to-face or through telecommunication, using a three-way telephone call with the interpreter and service user. In addition to interpreting services, social workers may use additional communication support strategies, such as pictograms, videos and online instant translation platforms.

Interpreting may be provided by informal interpreters; community interpreters and staff who speak the same language as service users. ‘Intercultural mediators’ play a composite role, they are members of a migrant community and while they are not qualified to interpret at degree or diploma level, they are employed to offer linguistic and cultural guidance.

**THE INTERPRETING PROFESSION**

Interpreters, like social workers, belong to an identifiable profession. The National Register of Public Service Interpreters (NRPSI)\(^1\) is a voluntary regulator of the interpreting profession and ensures that interpreters are accredited in public service interpreting and that professional codes of conduct are upheld.

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\(^1\) [http://www.nrpsi.org.uk](http://www.nrpsi.org.uk)
Key principles include: confidentiality, impartiality, accuracy, competence and non-discrimination.

Codes of professional conduct provide a common understanding for practice. There are parallels between the NRPSI Codes of Conduct, the Scottish Social Services Council (SSSC) Codes of Practice and the International Federation of Social Workers principles. For example, interpreters must identify any conflicts of interest and the limits of their intervention, and social workers should respect the responsibilities of colleagues who follow different professional codes. Social workers and interpreters have a role to play in safeguarding the welfare of children and vulnerable adults. Interpreters must have a clear grasp of safeguarding processes and must not mistake impartiality as ‘non intervention’ – impartiality must be trumped by the need to safeguard individuals or groups.

Public service interpreting and translation are essentially unregulated activities in the UK at present. There is currently no guidance about the requisite qualifications for interpreters in social work and no requirement for social work to use interpreters registered with the NRPSI (interpreters working in criminal justice, courts and police stations must be registered with the NRPSI).

**Legislative and policy context**

Law and policy relating to interpreting support in public services can be found directly and indirectly in Scottish, UK, European and international law and practice guidelines.

The Care Inspectorate is responsible for the regulation and inspection of care services in Scotland and incorporates the Health and Social Care Standards (2014) into its approach to scrutiny, assurance and improvement. The Standards are designed to empower people to identify and claim their rights, and to ensure that those responsible are confident in, and accountable for, delivering high quality care and support. A number of the Standards focus on communication needs:

- 2.8. I am supported to communicate in a way that is right for me, at my own pace, by people who are sensitive to me and my needs
- 2.9. I receive and understand information and advice in a format or language that is right for me
- 2.10. I can access translation services and communication tools where necessary and I am supported to use these
• 3.12. I can understand the people who support and care for me when they communicate with me

The Scottish Translation, Interpreting and Communication Forum (2004)\(^2\) sets out good practice guidelines for public services and the Convention of Scottish Local Authorities (CoSLA) recommends that these guidelines are used by Scottish integration authorities. The guidelines state that public services need to:

• Make a commitment to provide accessible information and appropriate communication support
• Know their communities – language use, literacy, culture, gender etc
• Ascertain communication needs in relation to individual services
• Ensure access to interpreting and translation support
• Make sure communities are aware of their rights and entitlements
• Allocate resources – identify appropriate funding sources

• Consult regularly with service users to ensure communication support facilities are meeting their needs

The Patient Rights (Scotland) Act 2011 states that NHS employers must uphold a set of healthcare principles, one of which focuses on communication: ‘... patients should be communicated with in a way that they can understand and healthcare staff should make sure that the patient has understood the information given’. This means that interpreting provision should be provided to patients.

In terms of childcare legislation, the Children (Scotland) Act 1995 indicates that information should be available in languages other than English, and that interpreters should be arranged by service providers. The national guidance for child protection in Scotland (2014) states that effective communication is based on taking account of the reactions, perceptions, wishes and feelings of the child.

Social workers should know how to access interpreters who have the skills, knowledge and experience to interpret highly sensitive matters including specialist social work vernacular.

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\(^2\) [https://s.iriss.org.uk/2wHpYCL](https://s.iriss.org.uk/2wHpYCL)
However, specialist training for interpreting in social work settings is limited (or non-existent) in the UK.

The national guidance also stipulates that care should be exercised when identifying interpreters from the same local community as the service user, to maintain confidentiality and to avoid bias or collusion. In addition, service users should not be expected to use family members or friends to interpret. If service users insist that family members are used, steps must be taken to explore why professional interpreters are declined and assurance given that interpreting services are impartial and confidential (see Interpreters’ codes of conduct).

At an international level, Article 12 of the United Nations Convention of the Rights of the Child 1989, focuses on communication and is designed to promote opportunities for children to be consulted about matters that affect them – interpreting is one way to facilitate such communication.

People have the right to express themselves according to their own linguistic and cultural norms and values. The Race Relations Act 1976 and Race Relations (Amendment) Act 2000 requires public bodies to ensure public access to the information and services which they provide, which includes communication support. The Human Rights Act 1998 sets out the right to provide information in a language that a person understands, when he or she is subject to legal processes. The European Charter for Regional or Minority Languages 1992 is designed to protect and promote regional and minority languages and to enable speakers to use them in private and public life.

In Scotland there is protection and support for the promotion of Gaelic (Gaelic Language (Scotland) Act 2005). The New Scots: refugee integration strategy (2018) states that integration is a two-way process. This means that local authorities and public services must ensure universal access to human rights so that people can participate in society, enjoy their rights and fulfil their duties.

Despite reference to interpreting and translation services in law and policy, ad hoc arrangements to interpreting persist in social work, and often informal interpreters with no qualifications or formal training provide interpreting services in public services (Lucas, 2016; Townsley, 2007).
Research and practice issues about interpreters in public services

Interpreting is key to enabling people to access and engage with services, however, there are concerns that there are not enough sufficiently skilled interpreters to meet the linguistic needs of the population. Moreover, the linguistic profile of Scotland is difficult to determine. Among the 300+ languages that are spoken in Scotland, there exist many non-standard varieties, meaning that there are potentially even more language varieties spoken in Scotland than official records suggest. People use different languages for different reasons and functions. For example, people may be more proficient in speaking than writing, and may prefer to speak in certain languages in particular circumstances. Moreover, language proficiency may vary within a household; often migrant children speak more English than their parents given their exposure to speaking English on a daily basis.

Language is a key barrier to accessing services across public services. There are advantages and disadvantages to informal interpreters. Social workers have indicated that additional information may be shared if family members interpret for one another, in contrast to unknown professional interpreters, who service users may mistrust (Lucas, 2014). Nevertheless, issues of collusion and accuracy have been identified when informal interpreters have been used in public services, resulting in errors and compromised meaning (Lucas, 2015; Dorner and colleagues, 2010). Serious Case Inquiries have highlighted the importance of professional interpreters and have criticised the use of family interpreters, particularly in cases where they have prevented opportunities for intervention and support, by restricting information, intentionally and unintentionally.

Qualitative studies have examined the way that interpreters and social workers work together and have highlighted positive and negative practices. Social workers and services users are required to mobilise trust in interpreters (Nawyn and colleagues, 2012; Edwards and colleagues, 2006). However, social workers have raised concerns related to linguistic relativity and uncertainty about meaning during translation. There are also concerns about interpreter’s availability and confidentiality
breaches (Sawrikar, 2013). Lucas (2014) found that statutory time-demands meant that social workers were unable to postpone visits when interpreters were unavailable, which meant that they had to ‘get by’ without an interpreter or rely on informal interpreters such as bilingual colleagues.

Positive practice revolved around a trusting relationship between social workers and interpreters. Often social workers would work with the same interpreter and have confidence that their own and the service users’ messages would be translated accurately. In addition, adequate time to prepare for the session, outlining the forthcoming issues, specialist terminology and debrief, are recognised as effective practice (see figure 1 below).

Social workers have been found to carry out skilled and unskilled practice with interpreters (Westlake and Jones, 2018). Skilled practice includes:

• Clear instruction
• Use of the first person when speaking with service users
• Confidence to challenge and clarify meaning

Interpreters have also raised concerns about their partnerships with social workers, particularly in regards to being treated as an ‘occupational other’ rather than key participant in the encounter (Tipton, 2014). There is further concern that the emotional impact of interpreting on the interpreter may be overlooked, particularly where traumatic events are concerned (Doherty and colleagues, 2010; Valero-Garcés, 2005). Barrington and Shakespeare-Finch (2014) suggest that interpreters may not have formal support mechanisms such as supervision to make sense of feelings and issues raised during the interpreting.

Issues relating to interpreters are not unique to social work. Concerns about accuracy and effectiveness from professional interpreters have been highlighted across public services: in police investigations (Wakefield and colleagues, 2014) and mental health services (Tilbury, 2007). Aspinall (2007) found that language barriers resulted in limited uptake of healthcare services and associated this with persistent health inequalities among minority ethnic groups. In maternity care, Crowther and Lau (2019) found that despite needing interpreters, women were not always aware they could request one
PREPARING FOR WORK WITH INTERPRETERS

• Are there any opportunities to develop inter-professional practice?
• Are interpreters qualified and registered with the NRPSI?
• How do you book interpreters?
• How long does it take to get documents translated?
• How do you make three-way phone calls?
• Can you request male or female interpreters?
• Are there mechanisms to provide feedback to interpreting agencies/individual interpreters? Can service users provide feedback on their experiences of interpreter-mediated communication?

BEGINNING WORK WITH SERVICE USERS & INTERPRETERS

• Determine whether an interpreter is needed. Be aware that service users may not want to use an interpreter and may prefer to use a family member or friend. Be clear about the benefits and disadvantages of informal interpreters.
• Remember that language needs are dynamic and may change over time. Determine whether interpreters are needed throughout the assessment and intervention process.
• Are interpreting services consistently offered between services? Are there any gaps in service provision?

DURING AND AFTER WORK WITH SERVICE USERS AND INTERPRETERS

• Factor in sufficient time! Including preparation time with the interpreter; ask the interpreter to translate word-for-word, rather than paraphrase, clarify and explain terminology that will come up in the conversation, discuss seating arrangements.
• Throughout the encounter, give the interpreter enough time to translate. Use short, clear questions and instructions. If there are any renditions that are unclear, ask the interpreter to clarify meaning.
• At the end of the encounter schedule in a private de-brief; check the interpreter’s experience and any difficulty that they experienced.
• Reflect on the encounter – what could be done better/differently? Is it possible to request the same interpreter for consistency? Can you get feedback from the service users?
and were embarrassed to ask, for fear of perpetuating existing negative stereotypes about minority ethnic groups. A review into interpreting in the House of Commons revealed significant misunderstandings and poor quality interpreting provision (House of Commons, 2013). Such issues have resulted in poor outcomes for clients, in particular asylum seekers (Gibb and Good, 2014).

**Conceptual meaning**

There are inherent complexities involved in the interpretation of language and behaviour. There are many words, proverbs and idioms that have no equivalent across language systems, so expression can be limited when people communicate in their non-preferred language.

‘Linguistic relativity’ is an important conceptual and pragmatic issue in interpreting encounters. Wadensjö (1998) states that miscommunication often remains an ‘off-the-record matter’ between the interpreter and interlocutor, given the difficulties of selecting suitable words in the process of translation (Temple and Young, 2004).

As we cannot guarantee meaning across language systems, there needs to be robust processes to facilitate communication and promote trust between speakers. One way to achieve this is by skilled practice with interpreters.

In the process of preparing for interpreter mediated encounters, social workers must develop their own skills in communication, and understand and identify the ways that they conceptualise, understand and make choices about generating, analysing, interpreting and reporting information when more than one language is involved. Books by Koprowska (2014) and Woodcock-Ross (2016) are useful starting points. Stringer and Cassiday (2009) provide exercises to improve cross-cultural communication. Betsy Rymes’ blog: *Citizen sociolinguists* is an excellent resource which explores different aspects of communication.

**Adverse attitudes to interpreting**

Speakers of languages other than English may be discriminated against and oppressed, by virtue of inadequate or absent communication support, inadequate cultural sensitivity, stereotyping and
inappropriate provider attitudes (Phillimore, 2016). Inadequate communication support can thwart intervention and mean that disadvantaged service users do not access the services they need.

There has been an increase in hate crime and racially aggravated attacks towards emergent bilinguals, in which individuals may be positioned as ignorant, primitive and inferior for not speaking in English (Procurator Fiscal, 2019; EHRC, 2016). Piller (2016) argues that language skills are evaluated differently depending on the identity of the speaker and people may be disadvantaged by their language proficiency, legal status, gender, race or class.

Social work involvement with individuals and families who require interpreting and translation provision inevitably requires additional time and this work is not always recognised by employers (Lucas, 2014). Social workers may inadvertently privilege monolingual practices by avoiding work with interpreters. Inadvertently, they may contribute to the promotion of the linguistic hegemony of the English language and reinforce barriers for emergent bilinguals (Holmes and colleagues, 2013). Political discourse and popular media tends to characterise translation and interpreting services as an unnecessary burden. Discriminatory and oppressive outlooks towards interpreting may stem from organisational frameworks and strained resources, which influence practice and consequently discourage social workers from organising provision, in order to meet broader cost-saving demands. Therefore, social workers can be thought of as ‘gatekeepers’ of interpreting support, given their responsibility to arrange provision and uphold codes of conduct.

Assimilationist policies and practices assume that migrants will ‘blend in’ and adopt the same language, culture, dress and customs (Williams and Graham, 2014). However, there are decreasing opportunities for English language learning, with cuts to English for Speakers of Other Languages (ESOL) classes. There is also a misconception that migrants from ‘integrated’ or ‘settled’ communities do not need interpreting provision (Threadgold and colleagues, 2008) Flynn and Kay (2017) found that migrants in rural regions of Angus and Aberdeenshire struggled to improve their English, despite in some cases, having lived and worked in the area for over five years.
Serious Case Inquiries concerns about interpreting

Serious Case Inquiries offer detailed insight into cases where children have died or been injured in England and Wales. The NSPCC database of inquiries indicates multiple concerns about interpreters in social work, some of which are outlined, with reference to four specific reviews where family members were emergent bilinguals: Child H, Child D, Baby F, Charlie and Sam.

• There was a scarcity of interpreters for all service providers, even in ethnically diverse inner London boroughs. Booked interpreters did not always show up for pre-arranged visits.
• Professionals anticipated problems with interpreting and translating services and this discouraged them from organising interpreters for casework.
• Engagement can be compromised without interpreters. Practitioners were unable to gain informed consent for procedures and interventions or identify a coherent chronology, history and circumstances. Professionals were unable to communicate effectively with children and parents alike, leaving children at greater risk of harm.

‘The current range, availability and quality of interpreters is problematic; for planned work, it is variable and, in emergency situations, it is so poor that it risks leaving non-English language service users without support, making it extremely difficult for professionals to make an effective assessment or diagnosis in a timely fashion’ (Child H, Lambeth, 2014, p15).

• Records did not always indicate whether interpreters or translated materials were needed or used.
• Interpreting provision was formulated for the benefits of agencies and not for the wellbeing and best interests of the parents and child.
• Family members and neighbours acted as interpreter for agencies. Such arrangements raised confidentiality issues and restricted opportunities to discuss personal or intimate issues.
• Professionals made various assessments of service user’s English language comprehension, and information about service user’s need for interpreting provision was not always shared among agency departments.

These issues highlight the importance of interpretation and translation services for the social work profession.
Implications for the social services workforce

- The benefits of multilingualism are profound and social workers should, therefore, promote language rights and celebrate the languages that are spoken in the community and workplace.
- Social workers should keep track of the languages that are spoken in the community and workplace, as this will continually change.
- Agencies should have coherent policies about interpretation and translation services, and learning and development should be available to support practice.
- Social workers should know how to access interpreting and translation provision, and actions taken to facilitate communication (via interpreters or translated material) should be recorded.
- Professionals should consider the need for an interpreter even when one is not requested. Lack of interpreting services may also disproportionately affect minority groups through poor assessment of need.
- Conceptual matters, such as linguistic relativity mean that the translatability of some concepts and their expression in a given language can be problematic. Such issues should be considered when social work intervention is principally conducted and reported in a language that is not used by the service user or carer.
- Language intersects with power and inequality. Effective interpreting is part of social workers’ commitment to anti-discriminatory and anti-oppressive practice.
- Social workers have an ethical duty to be aware of the emotional impact that interpreting sensitive information may have on the interpreter.
References


Barrington AJ and Shakespeare-Finch J (2014) Giving voice to service providers who work with survivors of torture and trauma. *Qualitative Health Research*, 24, 12, 1686–1699


National Records of Scotland (2013a) 2011 census: key results on population, ethnicity, identity, language, religion, health, housing and accommodation in Scotland – Release 2A. https://s.iriss.org.uk/3bdXAax

National Records of Scotland (2013b) Scotland’s census 2011: language used at home other than English (detailed). https://s.iriss.org.uk/3cl7vLy

National Register of Public Service Interpreters. https://s.iriss.org.uk/2XGSfVc


Phillimore J (2016) Migrant maternity in an era of superdiversity: new migrants’ access to, and experience of, antenatal care in the West Midlands, UK. Social Sciences Medicine, 148, 152–159


Rymes B (nd) Citizen sociolinguists (Blog). https://s.iriss.org.uk/3bdqCXV

Sapir E (1956) *Selected writings in language, culture and personality*. Berkeley: University of California Press


Scottish Social Service Council (2016) Codes of practice for social services workers and employers. https://s.iriss.org.uk/3eszniv


Temple B and Young A (2004) Qualitative research and translation dilemmas. *Qualitative Research*, 4, 2, 161–178


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