

# Still a Matter of Interpretation

People from culturally and linguistically diverse communities still do not have equitable access to accredited interpreters in a range of services in Queensland.

**Queensland Accessing Interpreters Working Group** October 2012

### **Picture on front cover:**

Khina-Maya and Chandra showing an interpreter card. Photo provided by Centacare Cairns.

The *I need an interpreter* card is provided free of charge and can be obtained from the Department of Immigration and Citizenship TIS National Client Liaison and Promotions team on 1300 655 820 or at www.immi.gov.au.

The Queensland Interpreter card is provided free of charge and can be obtained from the Department of Aboriginal and Torres Strait Islander and Multicultural Affairs at 13 QGOV (13 74 68), email MAQ@datsima.qld.gov.au or at www.datsima.qld.gov.au.

## Report development and consultations were facilitated by QCOSS with invaluable input from members of the Queensland Accessing Interpreters Working Group, stakeholders from community and government sectors, and the language services industry.

# Accessing Interpreters

QUEENSLAND ACCESSING INTERPRETERS WORKING GROUP

## The Queensland Accessing Interpreters Working Group

comprises the following organisations concerned with equitable service provision for people from culturally and linguistically diverse communities in Queensland:

## Queensland Council of Social Service Inc.



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## **AMPARO Advocacy Inc.**



## Multicultural Development Association Inc.



## **Ethnic Communities Council of Queensland**



#### Nambour Community Centre Inc.



#### **Centacare Cairns**



## **Immigrant Women's Support Service**



I M M I G R A N T W O M E N 'S S U P P O R T S E R V I C E a domestic violence and sexual assault service for women of non-english speaking backgrounds

## **Mater Health Services**

## Published October 2012 by:

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# **Executive summary**

The Queensland Accessing Interpreters Working Group is pleased that the Queensland Government is committed to implementing the *Queensland Government Multicultural Policy* and the *Queensland Government Language Services Policy*.

Provision of quality language services is central to the principles of access, equity and social justice, which contribute to an inclusive society. Engaging accredited interpreters for people who are not proficient in English significantly improves the efficiency and effectiveness of frontline services, improves outcomes, and reduces the long-term costs of poor service delivery.

There is limited literature and data available on access to interpreters in Queensland. *Still a Matter of Interpretation* is the result of the work undertaken by the Queensland Accessing Interpreters Working Group from 2010 to 2012. It provides a contemporary snapshot of the state of access to interpreters for culturally and linguistically diverse communities in some services in Queensland. This report follows the Working Group's release of *A Matter of Interpretation* report in 2008.

While there has been progress in engaging accredited interpreters when accessing services in Queensland, the Working Group has identified ongoing policy and practice gaps. This report is informed by the practice experience of members of the Working Group, feedback from service providers and available literature. In 2011, the Working Group initiated a statewide consultation which included surveys and forums with service providers to explore their clients' experiences in accessing interpreters.

The information presented in this report is intended to be a catalyst for further discussion and investigation into the state of language services provision in Queensland. The Working Group is aware that systemic barriers that hinder effective interpreting service provision are widespread across other service systems and geographical areas than those that are covered by this report. Further research should be undertaken in these areas to better understand the extent of the issues and to identify strategies to implement a more equitable language services provision system for Queensland's culturally and linguistically diverse communities.

The report presents background information, consultation findings and discussion on five areas:

- Queensland Government funded community services
- · the justice system
- health services
- disability services
- interpreter workforce

A summary of priority areas for action to improve access to some frontline services for people who are not proficient in English are as follows:

# Queensland Government funded community services

**Issue:** Some state-funded community services are unaware that they are able to access fee-free interpreting services. **Priority area for action**: The Queensland Government to consider ways to increase awareness about the provision to access fee-free interpreters by state-funded services, such as:

- communicating the arrangements to state-funded community services (for example by incorporating information in service agreements, or in the communication from contract managers, regular communiqués or newsletters)
- supporting the development of community organisation language services policies and procedures
- supporting access to ongoing cultural competency training for community services staff, including working effectively with interpreters
- promoting the *Queensland Government Multicultural Policy and* the *Queensland Government Language Services Policy* and their application to organisations across Queensland, including mainstream funded organisations.

## The justice system

## Courts

**Issue:** There is inadequate access to accredited interpreters in domestic and family violence hearings in courts. **Priority area for action**: Queensland courts to review arrangements for language support in domestic and family violence hearings in courts, including investigation of whether current arrangements are sufficiently and equitably supporting people from culturally and linguistically diverse communities who are not proficient in English.



## **Queensland Police Service**

**Issue:** There are limitations in legislative provisions to enable police officers to access accredited interpreters. **Priority area for action:** The Queensland Police Service to review arrangements for language support when engaging with people from culturally and linguistically diverse communities, including consideration of whether the *Police Powers and Responsibilities Act 2000 (Qld)* needs to be revised to extend the circumstances in which an interpreter is engaged, such as:

- in the early investigative stages (before it is clear whether an offence has been committed)
- whether an indictable or simple offence has been committed
- whether the person is a suspect, witness or victim
- in domestic and family violence situations.

## Justice of the Peace services

**Issue:** Justice of the Peace programs do not have access to fee-free interpreting services.

**Priority area for action:** The Department of Justice and Attorney-General to extend access to TIS National interpreting services (phone or face-to-face) for the Justice of the Peace in the Community Program.

## **Health services**

## Hospital and Health Services

**Issue:** There are poor cultural competency practices in some Hospital and Health Services which hinder consistent access to accredited interpreters.

**Priority area for action:** Hospital and Health Services to review the adequacy of current cultural competency approaches to meet the needs of culturally and linguistically diverse clients, including consideration of whether additional or mandatory training should be implemented for relevant staff and monitored through performance development and data collection of client access.

## **General practices**

**Issue:** There is inadequate access to accredited interpreters in general practices.

**Priority area for action:** Relevant professional bodies, Medicare Locals and practitioners to implement a culturally competent service delivery framework for general practices which includes training for staff to access the TIS National Doctors Priority Line.

## Private allied health services

**Issue:** There is a lack of access to fee-free interpreting services for some private allied health services (such as dentists, optometrists and psychologists).

**Priority area for action:** Relevant allied health professional bodies to explore appropriate options and mechanisms with language service providers to provide access to accredited interpreters for private allied health services that are currently ineligible for the TIS National fee-free interpreting service.

## **Disability services**

**Issue:** The interpreting service provision system for statefunded disability community services supporting people from culturally and linguistically diverse communities is inefficient and inequitable.

**Priority area for action:** The Department of Communities (Disability and Community Care Services) to review arrangements for funded disability community services to access interpreters, including consideration of making access to accredited interpreters available 24 hours a day, seven days a week, and the implementation of a one-step booking system.

## **Interpreter workforce**

**Issue:** The interpreter workforce lacks professional recognition, development and industry support. **Priority area for action:** The Queensland Government to initiate action with the Australian Government to review the language services system in Australia, and establishing a language services workforce development plan that is implemented and supported through appropriate state and national mechanisms.

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# Introduction

Queensland is a state that is rich in cultural and linguistic diversity. According to the 2011 Census, one in five Queenslanders were born overseas, and one in 10 spoke a language other than English at home. There were over 270 languages spoken throughout Queensland. One in 20 people who were born overseas spoke a language other than English at home and spoke English 'not well or not at all'.<sup>1</sup>

There are ongoing policy discussions about supporting people from culturally and linguistically diverse (CALD) communities to learn English. Acquisition of a new language is not an easy journey and is one that may exist amidst other challenges such as the need to seek employment, lack of education, low literacy in a native language and lack of social connections and opportunities to practice the new language. Moreover, it is common for people who speak multiple languages to revert to their native language in times of stress and in old age.

Supporting people to learn English is important but does not replace the need to provide access to accredited interpreting services for those who are not proficient in English. Equitable access to accredited interpreters is an integral part of quality service provision for people from CALD communities.

Some Australian and Queensland policies and practice directions make provision for access to accredited interpreters when providing information and services to people who are not proficient in English. Engaging accredited interpreters in service provision has some cost implications. However, these costs are minor in comparison to the consequential costs of not engaging accredited interpreters.

Failure to engage accredited interpreters in the provision of information or services for people who are not proficient in English can lead to a range of undesirable outcomes including miscommunication and misunderstanding of important information. In some cases, such as in the healthcare, disability and legal settings, miscommunication and misunderstanding can be detrimental and life threatening. The consequences of not engaging interpreters can place unnecessary financial and emotional burdens on the individuals and families involved, as well as incur additional costs for government and community service organisations. Since 2008, the Queensland Accessing Interpreters Working Group (Working Group) has been working with the Queensland Government towards a more equitable system to access accredited interpreters that is embedded in a culturally competent service framework. In December 2008, the Working Group released *A Matter of Interpretation*<sup>2</sup>, a report highlighting the critical need for more equitable access to accredited interpreters in Queensland. *Still a Matter of Interpretation* provides a snapshot of current issues as well as the opportunities to improve access to interpreters for people from CALD communities accessing services in Queensland.

**Queensland's rich cultural and linguistic diversity** At the time of the 2011 Census:

- 888,636 people (20.5 per cent of the population) in Queensland were born overseas.
- 423,841 people (9.8 per cent of the population) in Queensland spoke a language other than English at home.
- Over 270 languages are spoken at home in Queensland. The top three languages other than English spoken at home were Mandarin, Cantonese and Vietnamese.
- Almost 46,000 people in Queensland who were born overseas spoke a language other than English at home and spoke English 'not well or not at all'.<sup>3</sup>

<sup>3</sup> Office of Economic and Statistical Research. (2011). *Census 2011: Diversity in Queensland.* 

<sup>&</sup>lt;sup>1</sup> Office of Economic and Statistical Research. (2011). *Census 2011: Diversity in Queensland.* 

<sup>&</sup>lt;sup>2</sup> Queensland Accessing Interpreters Working Group. (2008). *A Matter of interpretation.* 

# About this report

There is limited literature and data available on access to interpreters in Queensland. *Still a Matter of Interpretation* is the result of the work undertaken by the Working Group from 2010 to 2012. This body of work is a follow up to the Working Group's release of *A Matter of Interpretation* report in 2008.

The Working Group met regularly over the course of early 2010 to 2012 with renewed membership and focus. The group is recognised by colleagues in the community services and government sectors as having expertise on matters pertaining to accessing interpreters and as an important mechanism to influence policy change in these areas. The Working Group members work with CALD communities in a range of areas including disability, domestic and family violence support, and health services. This report takes into consideration changes to the political and policy environment, including the release in July 2011 of the *Queensland Government Multicultural Policy*<sup>4</sup> and the *Queensland Government Language Services Policy*<sup>5</sup>. Significantly, there was also a change of government in March 2012. The Working Group is pleased that the Queensland Government is committed to implementing the Multicultural Policy and the Language Services Policy.

This report is focused on interpreting, rather than translation services for CALD communities as this is the primary focus of the Working Group. In practice the delivery of interpreting and translation services are closely linked as an integral part of culturally competent service provision. However, interpreting and translation services are two different professions that play distinct roles in bridging communication gaps with people who are not proficient in English. The Working Group acknowledges that there is limited access to translation services in Queensland. While the Queensland Government Language Services Policy<sup>6</sup> contains some guidelines on translation services, there is no indication of how agencies can access funding for these services. The Working Group also recognises that significant improvements to accessing interpreters are also needed for Deaf communities and for some Aboriginal and Torres Strait Islander communities in Australia.

The Working Group is informed by ongoing feedback from stakeholders and service providers about the quality of access to interpreters. This feedback pointed to inconsistent provision of accredited interpreters when accessing services in Queensland. For this reason, the Working Group initiated a statewide consultation in 2011 to further investigate these issues and gaps. A limited consultation was undertaken to gather stories and data about the experiences of people from CALD communities when they access services in Queensland:

- 40 organisations were represented in four forums held in Brisbane, Cairns, Mackay and Nambour from May to August 2011. The majority of participants were staff and volunteers of community services and to a lesser extent, interpreters and government agency staff. Discussions focused on issues with accessing accredited interpreters in government and community services, and issues that stemmed from the language services industry. A range of practical solutions were proposed to address the issues raised.
- More than 50 case studies were collected through an online survey and emails during May to August 2011. The majority of the case studies were submitted by community organisations, and a small number were from interpreters and government agency staff.
- 131 responses were received for a separate online survey that was conducted amongst community service organisations to gather their experiences with access to interpreters and translators.

This report presents background information, consultation findings and discussion on four service areas accessed by people from CALD communities. The final section of the report is a discussion about issues in the interpreter workforce and how these impact on the delivery of services in Queensland.

The Working Group is aware that the systemic barriers that hinder effective interpreting service provision are widespread across other service systems and geographical areas than those that are covered by this report. Further research should be undertaken in these areas to better understand the extent of the issues and to identify strategies to implement a more equitable language services provision system for Queensland's CALD communities.

<sup>&</sup>lt;sup>4</sup> Department of Communities. (2011). *A multicultural future for all of us – Queensland Multicultural Policy 2011*.

<sup>&</sup>lt;sup>5</sup> Department of Communities. (2011). *Queensland Government Language* Services Policy – A multicultural future for all of us.

<sup>6</sup> Ibid.



# Queensland Government funded community services

The availability of fee-free interpreter services in most Queensland Government funded community services ceased in 2005 when the Australian Government restricted Translating and Interpreting Service (TIS) National fee exemptions to apply only to federally funded services.<sup>7</sup> The Working Group highlighted this critical gap in service delivery and worked with community services and the former government to address this issue.

The former government led a policy change in December 2008 and delivered a directive that required all Ministers to make provision to access interpreters for all state-funded community services. This directive has been included in the *Queensland Government Language Services Policy*, released in 2011. In relation to state-funded community services, the policy states: 'Queensland Government agencies will implement this policy by implementing appropriate budgets and assistance for funded non-government organisations to engage interpreter services for service delivery'.<sup>8</sup>

Furthermore, since 2010, some state-funded community services have access to a more streamlined process to book interpreting services with TIS National, the main language service provider for most services in Queensland. A statefunded community service or program is allocated a unique TIS National code with which to book an interpreter. TIS National keeps an account of costs incurred for interpreting services provided to that service or program and charges the funding body periodically.

**Issue:** Some state-funded community services are unaware that they are able to access fee-free interpreting services.

While the policy change (described above) is a welcome development, the consultation findings revealed that one third of the survey respondents were unaware they are able to access fee-free interpreting services. This suggests that roughly one in three state-funded community services in Queensland are less likely to engage accredited interpreters to communicate with people from CALD communities who may access their services.

Anecdotal feedback as to why some state-funded community service staff are not aware of the provision to access interpreters include the lack of communication about this arrangement within an organisation, absence of a language service policy in the organisation, and most commonly, the lack of communication from the funding body about the provision to access interpreters. It is also a common observation that there is a high level of awareness about the *Queensland Government Multicultural Policy* and the *Queensland Government Language Services Policy* amongst 'specialists' that provide services for people from CALD communities. In contrast, there is a general lack of awareness of these policies among mainstream organisations.

**Priority area for action:** The Queensland Government to consider ways to increase awareness about the provision to access fee-free interpreters by state-funded services, such as:

- communicating the arrangements to state-funded community services (for example by incorporating information in service agreements, or in the communication from contract managers, regular communiqués or newsletters)
- supporting the development of a community organisation language services policies and procedures
- supporting access to ongoing cultural competency training for community services staff, including working effectively with interpreters
- promoting the *Queensland Government Multicultural Policy and* the *Queensland Government Language Services Policy* and their application to organisations across Queensland, including mainstream funded organisations.

**G** Interpreting services should readily be offered first as a standard best practice and not as something extra-ordinary or especially difficult that leaves vulnerable clients feeling shame, fear, guilt, unsure or an imposition when they just want to fit in. Sometimes these clients just want to fit in and don't want to be an inconvenience or an imposition so they try their best to look like they understand – even when they may not comprehend everything. This is why interpreting services that are offered in a way that is streamlined, standard part of service delivery will help reduce stigma for these people and protects their dignity and self worth **q** 

– Forum participant

<sup>&</sup>lt;sup>7</sup> Queensland Accessing Interpreters Working Group. (2008). *A Matter of Interpretation.* 

<sup>&</sup>lt;sup>8</sup> Department of Communities. (2011). *Queensland Government Language Services Policy – A multicultural future for all of us.* 

# The justice system

For many people from CALD communities, the Australian justice system differs markedly from that of their country of origin.<sup>9</sup> Prior to arriving in Australia, it is not uncommon for people from refugee backgrounds to have experienced years of persecution and injustice from corrupt police and government authorities. These experiences give rise to a wariness and distrust of police and government authorities causing some people from refugee backgrounds to be reluctant to report a crime or admit to legal problems due to misunderstandings about the potential consequences.<sup>10</sup>

People from CALD communities with low English proficiency experience significant difficulties understanding legal information or advice when they are not assisted by accredited interpreters. Some legal terminology and concepts can be complex and difficult to understand, even for fluent English speakers.

There are compelling reasons to engage accredited interpreters, provide appropriately translated information and to build an understanding of the cultural, heritage and religious contexts for CALD communities in the justice system. The Australian Law Reform Commission report, *Multiculturalism and the Law,* released in 1992, identified a range of issues faced by people from CALD communities when accessing the Australian legal system, including:

- a lack of information about the law, including information in languages other than English
- poor access to suitable interpreters and a lack of skills amongst those administering the legal system to identify the need for an interpreter in individual cases
- a perception among ethnic communities that there is widespread cultural insensitivity in the operation and administration of the law. This includes both stereotyping individuals and the failure of courts, lawyers and others involved in the legal system to acknowledge the role of the culture in a person's behaviour.<sup>11</sup>

**C** Despite having *Work with Interpreters* posters on the walls of court house waiting rooms, obtaining an interpreter proved more difficult than expected

– Support worker

## Courts

**Issue:** There is inadequate access to accredited interpreters in domestic and family violence hearings in courts.

People from CALD communities who are not proficient in English are significantly more vulnerable when they do not have full understanding of court proceedings without interpretation into their preferred language. Being able to understand and be understood in one's own hearing or trial is a human and legal right. People who are not proficient in English should have the right to access interpreters to understand the proceeding, communicate their case or understand its outcomes.<sup>12</sup>

We have regularly raised the issue about the court's poor use of interpreters. The 'interpreter test' conducted in the Magistrates court is flawed because it usually involves a statement such as 'are you understanding me right now?'. It is common knowledge that a 'yes' or 'no' question is not able to qualify someone's legal understanding.

- Settlement caseworker

There is a growing rate of domestic and family violence incidences amongst some CALD communities. One South East Queensland service reports 30 per cent of local domestic violence takes place in CALD communities, with 54 per cent of that violence occurring in families from a refugee background.<sup>13</sup> People affected by domestic and family violence experience high levels of emotional and physical vulnerability. Those who are not proficient in English are even more vulnerable when they find themselves in a justice system they are unfamiliar with.

Domestic and family violence incidences are heard as civil matters in court. There are no provisions in the practice directions of courts to engage interpreters for civil matters.<sup>14,15,16</sup> Practice directions for the Magistrates, District and Supreme courts make provisions for engaging interpreters which only apply to criminal proceedings and bail applications.

According to the *Domestic and Family Violence Protection Act 2012 (Qld)* 'a professional interpreter or the telephone interpreter service (but not a relative or friend of the aggrieved or respondent) may be used to explain the order to an aggrieved or respondent'.<sup>17</sup>

However, it is difficult for people from CALD communities to obtain an interpreter for their hearing in court. Bilingual friends or family members are commonly asked to stand in as interpreters. Anecdotal evidence suggests that it is rare to have requests for interpreters approved by the court, especially for mentions, and most of the time, court officers and Magistrates do not acknowledge these requests for domestic violence hearings. There has also been feedback from service providers that in some cases perpetrators of domestic violence have been asked to interpret for the victim (aggrieved) in court.

**Priority area for action**: Queensland courts to review arrangements for language support in domestic and family violence hearings in courts, including investigation of whether current arrangements are sufficiently and equitably supporting people from culturally and linguistically diverse communities who are not proficient in English.

 <sup>9</sup> Schetzer, L., Mullins, J., Buonamano, R. (August 2002). Access to Justice and Legal Needs, A project to identify legal needs, pathways and barriers for disadvantaged people in New South Wales – Background Paper.
<sup>10</sup> Refugee Council of Australia. Legal and Financial Issues. Retrieved 20 June

2012, from <u>www.refugeecouncil.org.au/settlement/legal\_financial.php</u>. <sup>11</sup> Australian Law Reform Commission. (1992). *Multiculturalism and the law.* 

Retrieved 25 August 2012 from

http://www.austlii.edu.au/au/other/alrc/publications/reports/57/

<sup>12</sup> Hale, S. (2011). Interpreter policies, practices and protocols in Australian courts and tribunals – A national survey.

<sup>13</sup> Queensland Council of Social Service. (2009). Violence Prevention – QCOSS Policy Position.

<sup>14</sup> Magistrates Courts Practice Directions No. 7 of 2010. Interpreters – Magistrates Court Criminal Proceedings. Retrieved 20 June 2012 from <u>http://www.courts.qld.gov.au/\_\_\_\_\_data/assets/pdf\_\_file/0007/85687/mc-pd-\_\_\_\_\_70f2010.pdf</u>

<sup>15</sup> Practice Direction Number 1 of 2010, District Court of Queensland. Interpreters: District Court. Retrieved 20 June 2012 from <u>http://www.courts.qld.gov.au/\_\_\_\_\_\_data/assets/pdf\_\_file/0005/85307/dc-pd-</u> 1of2010.pdf

<sup>16</sup> Practice Direction Number 3 of 2010, Supreme Court of Queensland. Interpreters: Supreme Court. Retrieved 20 June 2012 from <u>http://www.courts.qld.gov.au/\_\_\_\_\_\_data/assets/pdf\_\_file/0005/86432/sc-pd-3of2010.pdf</u>

<sup>17</sup> Domestic and Family Violence Protection Act 2012, , Part 3 Domestic Violence orders, Division 9, Section 84, Clause 4.

<sup>18</sup> Hale, S. (2011). Interpreter policies, practices and protocols in Australian courts and tribunals – A national survey.

## Some case study examples:

- A request was made by a woman to have an interpreter at the mention of a domestic violence protection order hearing at a Magistrates court. This request was denied by the court. The woman attended court, however she was unable to understand the proceedings. She was also not given the chance to provide her side of the story. As it became evident that the woman could not understand the proceedings, the case was adjourned until an interpreter could be arranged. The woman had to sit in the court room with the perpetrator to wait for the case to be adjourned causing additional and significant distress to the woman. *(South East Queensland, August 2011)*
- A neighbour reported an incident of domestic violence to the police. A female friend of the woman happened to be visiting when the police arrived at the house. The friend was asked to interpret for the woman who did not speak English well. The police applied for a domestic violence protection order and returned to the house to serve the relevant documents to the named respondent (man). The couple was required to present in court. The female friend of the woman was also present and she was asked to be the interpreter. The Magistrate issued the order to the couple, asking the friend to interpret its meaning to the couple. Instead of interpreting for the couple, the friend answered the Magistrate directly based on her knowledge of the incident. (Far North Queensland, March 2010).

Being able to understand and be understood in one's own hearing or trial is a human and legal right. For those who do not speak the language of the legal system that right can only be exercised through the provision of adequate and competent interpreting services.<sup>18</sup>

## **Queensland Police Service**

**Issue:** There are limitations in legislative provisions to enable police officers to access accredited interpreters.

It is important for members of the Queensland Police Service (QPS) to engage accredited interpreters to communicate with people who are not proficient in English. The *Queensland Government Language Services Policy* states

'engaging a professional interpreter will be crucial in certain circumstances such as obtaining informed consent (health, mental health, aged care assessment), raising a record of interview (police), or for the swearing of affidavits or statutory declarations. Costly mistakes leading to complaints or litigation may result from an agency neglecting to provide an interpreter in these situations'.<sup>19</sup>

The *Queensland Government Language Services Policy* also acknowledges that a person's ability to converse in English does not necessarily indicate that he or she can comprehend the English spoken by police, recommending that 'if there is any doubt about a person's ability to communicate in or comprehend English, an interpreter should be engaged'. It further advises that it is acceptable for an officer to engage an interpreter to ensure clear communication even if the person, family member or carer considers that they do not need one.<sup>20</sup>

The *QPS Multicultural Action Plan 2011-2012* states that the department will 'ensure policies and procedures in relation to the use of interpreters and translators are monitored and identified issues are rectified'. The *QPS Operational Procedures Manual* stipulates that it is policy for interpreters to be used when investigating criminal offences, complex legal matters and during court proceedings.<sup>21</sup>

While the aforementioned policies and procedural documents make reasonable provisions to engage accredited interpreters, in reality, there is consistent evidence from members of CALD communities to suggest that these policies are not consistently reflected in practice.

At the top of Queensland's policing legislative hierarchy is the *Police Powers and Responsibilities Act 2000 (Qld)*, which does not adequately provide for access to accredited interpreters for people from CALD communities to engage

with the police. While the Act provides for the right to an interpreter, these provisions are only limited to 'powers and responsibilities relating to investigations and questioning for indictable offences'<sup>22</sup> and to 'matters relating to performing forensic procedures'<sup>23</sup>. The Act does not provide for any other situations in which a person might come in contact with the police, such as simple offences, when the person is a suspect, witness or victim, any domestic and family violence situations, or during early investigative stages to ascertain whether an offence has even been committed.<sup>24</sup>

**C** There are many cases of interactions between police officers and members of the ethnic community where interpreters would have enabled better communication and therefore better outcomes. I know the (Police Powers and Responsibilities) Act specifics when an interpreter should be used, but it is important that interpreters are engaged at the earliest stages of communication... otherwise, how are you going to know if the person is guilty or innocent?

- Forum participant

Although the QPS employs Cross Cultural Liaison Officers and Police Liaison Officers to better engage with cultural communities, some of these specialist roles do not have the same powers as police officers.<sup>25</sup> In some instances, liaison officers may be called to assist police officers when dealing with people from CALD communities, however they may not be appropriate interpreters as they may not speak the same language or may not have the fluency in both English and the other language to accurately interpret.

The feedback from clients of community services is that police officers rarely access accredited interpreters even when it is obvious that people have very low English proficiency. Instead, they 'grab whoever they can find' such as a family member, friend or a worker, to do the interpreting. In some cases, police officers have asked perpetrators to interpret for the aggrieved when they are called to domestic and family violence situations. **Priority area for action:** The Queensland Police Service to review arrangements for language support when engaging with people from culturally and linguistically diverse communities, including consideration of whether the *Police Powers and Responsibilities Act 2000 (Qld)* needs to be revised to extend the circumstances in which an interpreter is engaged, such as:

- in the early investigative stages (before it is clear whether an offence has been committed)
- whether an indictable or simple offence has been committed
- whether the person is a suspect, witness or victim
- in domestic and family violence situations.

<sup>19</sup> Department of Communities. (2011). *Queensland Government Language Services Policy – A multicultural future for all of us.* 

<sup>20</sup> Ibid.

<sup>21</sup> Multicultural Development Association. (May 2011). *Responses to Draft Police Powers and Responsibilities and Other Legislation Amendment Bill.* Retrieved 20 June 2012 from <u>www.eccq.com.au/wp-</u>

content/uploads/2011/12/MDA-Response-to-PPRA-draft-Bill-May-2011.pdf. <sup>22</sup> Power Powers and Responsibilities Act 2000 (Queensland). Chapter 15, Part 3, Division 6, Section 433.

<sup>23</sup> Power Powers and Responsibilities Act 2000 (Queensland). Chapter 17, Part 8, Section 512.

<sup>24</sup> Centacare Migrant Services. (May 2011). Submission on the Power Powers and Responsibilities Act 2000. Retrieved 20 June 2012 from www.eccq.com.au/wp-

content/uploads/2011/12/1105010 CMS\_PPRAsubmission\_FINAL.pdf. <sup>25</sup> Police Liaison Officers. Retrieved 25 June 2012 from http://www.police.qld.gov.au/join/plo/default.htm.

## Some case study examples:

- An African woman rang the police to report a domestic violence assault from her Anglo-Australian husband. The police did not engage an interpreter to elicit information from her. Instead, they spoke to her husband. The woman felt she was not able to convey her side of the story. The police put in a cross application where both husband and wife were respondents as well as aggrieved. (Wide Bay-Burnett Region, March 2011)
- A woman called the police to report violence at home. Although she did not speak English proficiently she was not offered an interpreter by the police. The woman's case worker reported that she felt misunderstood by the police when she tried to report her case. Eventually, the woman was charged with domestic violence assault. (*Central Queensland, March 2010*)
- A man with a disability who had come to Australia as a refugee several years ago had been physically assaulted. He was very distressed and phoned a disability advocacy organisation to inform them what had happened, through the assistance of a phone interpreter. He said that after being treated by his general practitioner, he went to the local police station to lodge a complaint. When he asked for an interpreter, the sergeant on duty informed him to return with a friend or someone who spoke English. The man returned with a friend, however, he was told his friend's English was also not adequate. The police informed him that he would be contacted with an interpreter in the following week. This did not happen. When a worker from the disability advocacy organisation contacted the police station and asked the sergeant on duty why an interpreter had not been engaged to take a report from this man, she received the following reply '99 out of 100 have someone that can speak English and who can come with them to tell us what happened'.

(South East Queensland, late 2011)

## Justice of the Peace

**Issue:** Justice of the Peace programs do not have access to fee-free interpreting services.

The Justice of the Peace (JP) program is a good resource for members of the community. As volunteers, JPs play a significant role in the justice system by dealing with routine measures that would otherwise be burdensome on legal practitioners and officers. There are more than 90,000 JPs across Queensland.

Members of CALD communities often require the services of JPs. The JP handbook includes advice to engage an interpreter when assisting a person who is 'a non-English-speaker'.<sup>26</sup> Furthermore the *Queensland Government Language Services Policy* states that 'engaging a professional interpreter will be crucial in certain circumstances such as.... for the swearing of affidavits or statutory declarations. Costly mistakes leading to complaints or litigation may result from an agency neglecting to provide an interpreter in these situations'.<sup>27</sup> The swearing of affidavits.

However JPs do not qualify for fee exemption to access interpreting services through TIS National. Anecdotal feedback suggests that when a person who cannot speak English proficiently presents to a JP, he or she may be referred to another JP who speaks their language. If this is not possible, JPs 'get by' communicating with people with low English proficiency by using friends and family members as interpreters, using drawings or hand signals. Using these forms of communication are highly subjective and significantly increase risks of misunderstanding and misrepresentation, which could lead to unfavourable outcomes for the person. In some cases people have been turned away from JPs services because of language barriers.

**Priority area for action:** The Department of Justice and Attorney-General to extend access to TIS National interpreting services (phone or face-to-face) for the Justice of the Peace in the Community Program.

## Case study example:

 A Justice of the Peace expressed difficulties understanding some clients from culturally and linguistically diverse backgrounds. She tried to overcome this by 'creatively' communicating through encouraging pictures to be drawn. (North Queensland, July 2011)

**G** Existing video conferencing facilities could be utilised to provide better access to interpreters, particularly for people in rural and remote areas<sup>28</sup>

<sup>26</sup> Department of Justice and Attorney-General. *The duties of Justices of the Peace (Qualified).* 

<sup>27</sup> Department of Communities. (2011). *Queensland Government Language* Services Policy – A multicultural future for all of us.

<sup>28</sup> Queensland Council of Social Service. (2011). *Access to interpreters forum report.* 

## Health services

Engaging accredited interpreters in health consultations improves quality of care, client safety, promotes access to health care, reduces unnecessary health expenditure and stress on families, and minimises the risk of litigation. Effective communication between a health practitioner and a client, where both parties understand each other clearly, is critical to ensure the safety, quality and effectiveness of care.

Some Australian charters and standards implicitly or explicitly state interpreters should be engaged in healthcare settings, for example:

- The Australian Charter of Healthcare Rights states 'In order to obtain the best possible health outcomes the exchange of information between patients, consumers and staff must be full and open. This can be facilitated by clear, timely and effective two-way communication. In particular, staff and health service organisations are encouraged to offer and arrange access to services such as interpreters and patient support groups that might enhance the patient's or consumer's involvement with the healthcare system'.<sup>29</sup>
- The National Standards for Mental Health Services, endorsed by the Australian Health Ministers in September 2010, states consent should be obtained 'freely, without coercion, threats or improper inducements, after questions asked by the consumer have been answered, after appropriate disclosure to the patient, adequate and understandable information in a form and language demonstrably understood by the patient'.<sup>30</sup> There are three accompanying implementation guidelines that provide more detailed and clear directions for public mental health services and private hospitals; non-government community services; and private office based mental health practices.<sup>31</sup>

**C** There are inconsistencies in the use of interpreters in Queensland Health hospitals and health services... Some interpreting services are used appropriately and excellently. But there are still stories of poor interpreting use despite having the Interpreting Service in place. This has more to do with the poor cultural sensitivity of some staff than the system itself

– Forum participant

## Hospital and Health Services

**Issue:** There are poor cultural competency practices in some Hospital and Health Services which hinder consistent access to accredited interpreters.

Queensland Health policies and guidelines clearly state that accredited interpreters should be engaged when health professionals communicate with people from CALD communities. The *Queensland Health Language Services Policy Statement* states that

'bilingual health professionals communicating in the patient/client's language are effective but their availability is limited. The majority of health professionals need to work with interpreters to enhance the accuracy, impartiality and confidentiality of their communication. Interpreters assist health professionals and health consumers by reducing the likelihood of miscommunication, enabling health services to obtain valid consent and allowing joint participation in decision-making'.<sup>32</sup>

The *Queensland Health Working with Interpreter Guidelines* specifically state that 'an accredited interpreter should be engaged where the information to be communicated to the patient is significant for health and/or health outcomes, the person has a Queensland interpreter card, the person requests an interpreter or the person's English skills are assessed to be inadequate for the situation'.<sup>33</sup>

The Queensland Health Interpreting Service (QHIS), established in 2007, has been instrumental in improving access to accredited interpreters in public health services. For instance, approximately 20,000 interpreter services were provided across Queensland Health services in 2007-08, and this increased to approximately 59,000 in 2010-11.<sup>34</sup> However the QHIS is only accessible for Queensland Health services, not for private allied health services and general practices.

Although Queensland Health services can access accredited interpreters through the QHIS, there are ongoing gaps in service provision for CALD communities that stem from poor cultural competence of some health service staff. In some cases, even when interpreters were requested by clients or by their support workers, health service staff have turned down these requests. In some cases family members, including children, have been asked to be interpreters, which is an unprofessional practice and can seriously jeopardise the quality of health advice provided.

Anecdotal feedback suggests that the reluctance of some health service staff to engage accredited interpreters is underpinned by the following perceptions:

- the simplicity of the task does not warrant an interpreter (e.g. taking blood, making an appointment)
- it is too troublesome to book an interpreter
- it takes too much time to wait for an interpreter
- having an interpreter in the session would lengthen the consultation time
- the client appears to speak English well enough
- the client would be more comfortable to have their family member interpret for them, rather than a stranger.

**Priority area for action:** Hospital and Health Services to review the adequacy of current cultural competency approaches to meet the needs of culturally and linguistically diverse clients, including consideration of whether additional or mandatory training should be implemented for relevant staff and monitored through performance development and data collection of client access.

## Some case study examples:

• A woman presented at a hospital to have a cyst removed. Even though she asked for an interpreter when she made the booking, she was not given an interpreter for the appointment. Instead, hospital staff asked her 11 year-old daughter to interpret for her mother.

(South East Queensland, date not provided)

• A newly arrived man needed a tooth extraction. He was of African background and French was his native language. A support worker accompanied the man to a dental service. The man's settlement case worker made the appointment for him, and had informed the dental service that the man would need a French interpreter.

Upon arrival at the dental service, the support worker asked the receptionist if a French interpreter had been booked for the man's appointment. The receptionist was surprised by this request. Instead of confirming if an interpreter had been booked, she said 'we have a French-speaking dentist'. The support worker did not stay with the client during the appointment. The man went through his appointment without an interpreter, and the dentist only spoke English with him throughout the session.

The support worker picked up the man after his appointment. He had a sheet of paper with him but did not know what that was about. It turned out that it was the aftercare instructions. The support worker asked the man if he wanted to have an interpreter explain the aftercare instructions to him, but he was not interested. After a few hours, when the anaesthetic wore away, the man found himself in a lot of pain and was bleeding very badly, but he did not know what to do. The support worker visited the man in his home and explained the aftercare instructions to him and advised that painkillers could be obtained from the supermarket.

(Far North Queensland, December 2010)

## Good practice example:

In response to the increasing cultural diversity of both patients and staff, Mater Health Services recognised that developing cultural competence and delivering culturally responsive services is an organisational and clinical responsibility. They also recognised that for this to occur there needed to be human resources dedicated to embed cultural responsiveness within the organisation. As a result, a Cultural Diversity Unit was established. Its principal function is to provide strategic and practical advice, support and education to staff to continually improve Mater's cultural responsiveness to patients.

The unit plays a significant role in building long-term relationships with CALD communities to facilitate feedback on patient experiences and to enhance communication between patients and staff regarding the diverse cultural needs. The core business of the unit includes language services, cultural responsiveness education and resources, and community engagement. Mater's language services works within the Queensland Health Interpreting Services framework. The unit is staffed with a full time coordinator, a Vietnamese Interpreter and a Mandarin/Cantonese Interpreter. The unit also manages 30 contract interpreters who provide interpreting services on a needs basis.

▲ There have been occasions when an interpreter has been requested by clients, but when they turned up to appointments, no interpreter had been arranged for them. The clients then have to wait for some time (sometimes up to a few hours) for an interpreter to be arranged before they can attend their appointment. Some clients lose their appointment due to having no interpreter available, so they have to wait another three or more months to get another appointment with a specialist or health professional.

– Forum participant

## **General Practice**

**Issue:** There is inadequate access to accredited interpreters in general practices.

Many people from CALD communities access their local general practitioner (GP) for medical consultations and health checks. Although people from CALD communities tend to visit GPs who speak their language, this is not always possible in some communities, particularly in regional areas.

There are guidelines to engage interpreters in codes of conduct and standards for general practices, for example:

- The Medical Board of Australia's *Good Medical Practice* A Code of Conduct for Doctors in Australia states that an important part of doctor-patient relationship is effective communication, which involves, 'making sure, wherever practical, that arrangements are made to meet patients' specific language, cultural and communication needs, and being aware of how these needs affect understanding'. Doctors are also advised to 'familiarise yourself with, and using whenever necessary, qualified language interpreters or cultural interpreters to help you to meet patients' communication needs'.<sup>35</sup>
- The Royal Australian College of General Practitioners Standards for General Practices states that GPs and practice staff need to be aware that the TIS National service is available for patients from a non-English speaking background; that GPs have a professional obligation to understand their patients' problems; patients have a right to understand the information provided by GPs and their recommendations; and practices need to know how to access interpreter services. The following indicators are included in section Criterion 1.2.3 *Interpreter and other communication services* of the RACGP *Standards for General Practices*:
  - Our clinical team can describe how they communicate with patients who do not speak the primary language of our staff or who have a communication impairment
  - Our practice has a list of contact details for interpreter and other communication services including the Translating and Interpreter Service.<sup>36</sup>

The Royal Australian College of General Practitioners' *Standards for General Practices* also includes advice about the use of friends and relatives as interpreters:

'Qualified medical interpreters should be the interpretation medium of choice. The use of patients' relatives and friends as interpreters is common. This is acceptable if it is an expressed wish of the patient and the problem is minor. However, further consideration should be given to the following: whether friends and relatives will put their own interpretation into the translated communication; the use of friends and relatives in sensitive clinical situations or where serious decisions have to be made may be hazardous, and the use of children as interpreters is not encouraged.'<sup>37</sup>

Further to these codes of conduct and standards, TIS National provides the Doctors Priority Line which gives GPs access to free interpreting services to communicate with people from CALD communities who are Australian citizens or permanent residents for consultations, and for reception staff to arrange appointments and provide results of medical tests.

Despite these provisions, there is ongoing feedback that GPs are reluctant to engage interpreters. There is a common perception among general practice staff that it is cumbersome and time consuming to book and engage an interpreter. This becomes a greater issue for GPs who bulk bill and have limited time to spend with clients. It is common practice for family and friends to be used as interpreters in general practice settings, thereby leading to a low uptake of the fee-free interpreting services offered through the TIS National Doctors Priority Line.

**Priority area for action:** Relevant professional bodies, Medicare Locals and practitioners to implement a culturally competent service delivery framework for general practices which includes training for staff to access the TIS National Doctors Priority Line.

## Some case study examples:

A young woman with a 6-month old baby visited a general practice. Upon arrival at the appointment, the woman's housing support worker asked if an interpreter could be arranged for the woman because her English was not proficient. The doctor seemed flustered and said she was unable to book an interpreter because she had never done so before. The support worker offered to use her community organisation's TIS National code to arrange a phone interpreter for the woman. The doctor accepted this offer, and an interpreter was arranged for this woman's appointment with the doctor. This interpreter session was paid out of the housing support service rather than from the Doctors Priority Line Service.

(South East Queensland, October 2010)

• A man attended a medical appointment to support his elderly parents, who spoke no English. The man also spoke very little English. The parents attended the general practice to receive an injection, as requested by their doctor. The man sat with his parents to wait for the nurse to give the injection to his parents. When the nurse came out, she looked directly at the man and beckoned him to get the injection. The man, with his limited English, tried to tell the nurse that the injection wasn't for him. However, the nurse insisted that he should get the injection. The man pointed to the paperwork and asked the nurse to check the age and tried to tell her again that he was not Shane\* (the name on the paperwork). The nurse did not listen to him and proceeded to give him the injection. After the injection, she asked him, 'Are you Shane?' The man told her that he was Dave\*, not Shane'. (\*Not their real names)

(Far North Queensland, January 2011)



## Private allied health services

**Issue:** There is a lack of access to fee-free interpreting services for some private allied health services (such as dentists, optometrists and psychologists).

Some private allied health services such as optometrists, dentists and psychologists are frequently accessed by people from CALD communities who are not proficient in English. However, these services are not eligible to access fee-free interpreting through TIS National and the QHIS. TIS National only provides free interpreting services to private medical practitioners (defined as general practitioners and medical specialists) that provide Medicare-rebateable services. When interpreters are needed for clients in private allied health service settings, they either have to pay for one themselves, or more commonly, they are requested to bring along a friend or family member to interpret for them. Lack of access to feefree interpreting services for allied health services limits the accessibility of people from CALD communities to these important services and may jeopardise the quality of services they receive.

**Priority area for action:** Relevant allied health professional bodies to explore appropriate options and mechanisms with language service providers to provide access to accredited interpreters for private allied health services that are currently ineligible for the TIS National fee-free interpreting service.

## Some case study examples:

- After experiencing neo-natal death, a woman suffered significant grief and loss. She was advised to see a psychologist but neither the woman nor the psychologist could afford to pay for an interpreter. (*Location and date not provided*)
- A client was referred by a general practitioner to see a psychologist. The psychologist called TIS National to enquire if she could access an interpreter, however she was ineligible for fee-free interpreting. The GP offered to use his TIS National provider number for the psychologist appointment but TIS did not allow this arrangement.

(South East Queensland, October 2010)

▲ A multicultural organisation frequently takes people from refugee background to the optometrists without having access to interpreters. At times, the organisation is able to pay for an interpreter to support their client although this is not always possible.

– Forum participant

<sup>29</sup> Australian Commission on Safety and Quality in Healthcare. *Roles in realising the Australian Charter of Healthcare Rights*. Retrieved 22 June 2012 from <a href="http://www.safetyandquality.gov.au/wp-content/uploads/2012/01/Roles-in-Realising-the-Australian-Charter-of-Healthcare-Rights-PDF-1232-KB.pdf">http://www.safetyandquality.gov.au/wp-content/uploads/2012/01/Roles-in-Realising-the-Australian-Charter-of-Healthcare-Rights-PDF-1232-KB.pdf</a>
<sup>30</sup> Department of Health and Aging. (2010) *National Standards for Mental Health Services*. Retrieved 22 June 2012 from

http://www.health.gov.au/internet/main/publishing.nsf/content/DA71C0838BA6411BCA2577A0001AAC32/\$File/servst10v2.pdf

<sup>31</sup> Department of Health and Aging. (2010) *National standards for Mental Health Services - Implementation Guides*. Retrieved 22 June 2012 from <a href="http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs-n-servst10">http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs-n-servst10</a>

<sup>32</sup> Queensland Health. (2000). *Queensland Health Language Services Policy Statement*. Retrieved 21 June 2012 from

http://www.health.qld.gov.au/multicultural/policies/language.pdf

<sup>33</sup> Queensland Health. (2007). Working with Interpreter Guidelines. Retrieved 23 June 2012 from

 $\underline{http://www.health.qld.gov.au/multicultural/interpreters/guidelines\_int.pdf.$ 

- <sup>34</sup> Queensland Health. (2011). Annual report 2010-2011. Retrieved 20 September 2012 from
- http://www.health.qld.gov.au/multicultural/policies/language.pdf.

<sup>35</sup> Medical Board of Australia. (2009). *Good Medical Practice: A Code of Conduct for Doctors in Australia*. Retrieved 22 June 2012 from <a href="http://www.medicalboard.gov.au/documents/default.aspx?record=WD10%2f1277&dbid=AP&chksum=eNjZ0Z%2fajN7oxjvHXDRQnQ%3d%3d">http://www.medicalboard.gov.au/documents/default.aspx?record=WD10%2f1277&dbid=AP&chksum=eNjZ0Z%2fajN7oxjvHXDRQnQ%3d%3d</a>.

<sup>36</sup> Royal Australian Colleague of General Practice. (2010). *Standards for general practices,* 4<sup>th</sup> Edition. Retrieved 25 June 2012 from

http://www.racgp.org.au/Content/NavigationMenu/PracticeSupport/StandardsforGeneralPractices/Standards4thEdition.pdf.

<sup>37</sup> Ibid.

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# **Disability services**

**Issue:** The interpreting service provision system for statefunded disability community services supporting people from culturally and linguistically diverse communities is inefficient and inequitable.

People from CALD communities who have a disability often experience discrimination, extreme isolation and are highly vulnerable. There is a lack of support available for them.<sup>38</sup> There is a significant disparity in accessing services and supports for people from CALD communities who have a disability, compared with those from an English speaking background. Accessing services can be more challenging for people from CALD communities who have a disability when they cannot equitably engage accredited interpreters.

In late 2008 the former Disability Services Queensland funded a non-government organisation to broker an interpreting and translating assistance strategy. This resulted in the establishment of Support with Interpreting, Translating and Communication (SWITC) as an interim service to address the diverse communication needs of people with disability, including interpreting needs for those from CALD communities. This was welcomed by disability community services supporting people from CALD communities as it significantly improved access to accredited interpreters for these people.

SWITC continues to be the main language service provider for disability community services. Due to funding restrictions there are a number of limitations to the effectiveness of the SWITC service. These include:

- the booking service only operates from 9am to 5pm, Monday to Friday
- limitations to access interpreters outside of business hours and on weekends
- the lengthy process involved in booking a phone interpreter
- lengthy delays in accessing phone interpreters as compared to other communication services.

One disability community service funded by Department of Communities (Disability and Community Care Services) accesses interpreting services on a daily basis. This community service reported that it generally takes fifteen minutes to two hours to obtain a phone interpreter through SWITC. The following steps are involved to book a phone interpreter through SWITC:

- 1. Community service staff completes an online booking form to request a phone interpreter on the SWITC website.
- 2.SWITC receives this request and forwards it on to the interpreting agency with a confirmation email.
- 3. Community service staff wait for the interpreting agency to notify SWITC that an interpreter is available.
- 4.SWITC notifies the community service staff by email or phone that an interpreter is available and provides a booking reference number.
- 5. Community service staff phones the interpreting agency with the booking reference number.
- 6. The interpreter agency facilitates the phone link-up between community service staff, client and interpreter.

In comparison, other state-funded community services have access to TIS National interpreting service through a onestep booking system, which is available 24 hours a day, seven days a week, is relatively easy to use and generally provides timely access to accredited interpreters. Community services and clients are usually connected with a phone interpreter within a few minutes. The following steps are involved to book a phone interpreter through TIS National:

- 1. Community services staff member phones TIS National and makes a request for an interpreter.
- 2. Community services staff and client are connected with the phone interpreter.

Limitations in accessing interpreters when needed can compromise the quality of service and support provided to clients and their families. It can be difficult to reschedule important discussions or appointments with clients and their families. Therefore it is important that the system to engage accredited interpreters for people from CALD communities with a disability is as accessible and reliable as possible.

**Priority area for action:** The Department of Communities (Disability and Community Care Services) to review arrangements for funded disability community services to access interpreters, including consideration of making access to accredited interpreters available 24 hours a day, seven days a week, and the implementation of a one-step booking system.

Community organisation staff members reported that they have been asked to 'bring an interpreter along' for clients they support when they access government services. In one case, the government staff reasoned that community service organisations are funded to access interpreters but government agencies are not.

– Forum participant

<sup>38</sup> AMPARO Advocacy. (2007). Language and Culture Matter - Remove the Barriers Now. Retrieved 25 June 2012 from <u>http://www.amparo.org.au/Downloads/AMPARO\_Language&CultureMatter.pdf</u>.

## Some case study examples:

 On Friday midday, a booking was made through SWITC for a face-to-face interpreter for 12:30pm on the following Monday. The booking was made over the phone and a fax request was sent. The worker explained that the booking was to be for Monday and requested confirmation as soon as possible. The worker explained that she would be attending to appointments out of the office on early Monday morning and she would like to be contacted on her mobile phone. No confirmation was received on Friday.

The worker phoned SWITC on early Monday morning to check if an interpreter had been organised, as she still had not received a confirmation of this booking. She rang just a little before 9am because she had to leave the office to attend to appointments out of the office. However, there was no response as SWITC office hours are between 9am to 5pm.

On Monday SWITC phoned the office and left messages at 9:58am and 10:30am to inform the worker that no interpreter was available. No one was in the office to pass these messages onto the worker and she was not contacted on her mobile phone. No interpreter arrived for the appointment with the client. *(South East Queensland, late 2011)* 

 An advocacy worker booked an onsite interpreter for an important meeting with a number of stakeholders who were assisting a young boy with disability from a refugee background. The interpreter was booked two weeks ahead of the meeting and the availability of the interpreter had been confirmed. However, when the day of the meeting came around, SWITC contacted the worker approximately 30 minutes before the meeting commencing to inform her that there was no interpreter available for the meeting. When the worker investigated further, it turned out that the interpreter had informed the interpreting agency that he was no longer available few days prior to the appointment. However, the interpreting agency did not engage a replacement interpreter, nor did they inform SWITC there was no interpreter available for the meeting. (South East Queensland, February 2011)

# Interpreter workforce

**Issue:** The interpreter workforce lacks professional recognition, development and industry support.

Interpreters perform a vital service and contribute their unique expertise in a diverse range of settings. An accredited interpreter is not simply someone who is bilingual. A bilingual person who is not an accredited interpreter may not have the required proficiency or tools to undertake an interpreting assignment. Accredited interpreters often have access to specialist dictionaries, web-based language aids, professional indemnity insurance, modern computer equipment, and they need to have an understanding of professional ethics, as well as a vast and specialised vocabulary.<sup>39</sup>

In essence, the quality of information and service provision for people who are not proficient in English relies on equitable access to good quality interpreting services. Although the National Authority for Accreditation of Translators and Interpreters (NAATI) plays an important role in the initial provision of accreditation for interpreters, the language services industry has been eroding due to a lack of an overarching industry-based governing body or standards to improve the quality of work conditions, provide professional support and workforce development.<sup>40</sup>

Since the late 1980's when many of the services were outsourced by the public sector, interpreters have faced reduced pay and poorer working conditions, resulting in a rapid deprofessionalising of the industry. Most interpreters work as contractors whose services are brokered through language service providers.<sup>41</sup>

There is not a lot of incentive for interpreters to get their accreditation because it is expensive and there is not a lot of pay increase for accredited interpreters. In the last two years, one of the language service providers only increased the hourly wage by \$2 per hour for accredited interpreters compared to unaccredited interpreters. In Queensland and elsewhere in Australia, the demand for interpreting services is greater than the supply in the accredited interpreting workforce. Female interpreters and interpreters in both new and emerging languages as well as established community languages such as Greek, Italian, Vietnamese and Cantonese are particularly insufficient compared to community interpreting needs.<sup>42</sup> A myriad of issues negatively impact on the supply of accredited interpreters in Queensland and in Australia. These include:

- High 'out of pocket' costs compared to income individuals wanting to gain NAATI qualifications have to pay a significant fee to sit for the test. Interpreters usually have to travel for face-to-face interpreting jobs, and have to pay for parking and travel costs without being reimbursed. These costs are significant considering the infrequent and contractual nature of most interpreting jobs.
- Low pay rates the Western Australian Government found interpreter pay rates are considered low and many interpreters can earn a higher income working in business and other industries.<sup>43</sup>
- Poor working conditions most interpreters are contractors who do not have access to the benefits of sick leave and recreation leave.
- **High attrition rate** it is not uncommon for interpreters to take on other jobs in addition to interpreting in order to 'make ends meet'. In some cases, they leave the interpreting profession altogether to take on work that provides a more consistent income.
- Limited training to work in specialised areas some interpreters do not have access to specialised training to work in areas such as mental health, health and legal settings.
- Limited debriefing and professional support interpreters often have to interpret very sensitive and confronting information with little opportunity to access professional support. In some cases, interpreters have experienced retraumatisation after an interpreting session.
- Professional isolation there are inadequate opportunities for professional development opportunities and career pathways for interpreters. Many interpreters work in isolation and have limited opportunities for peer support and professional input.
- Little incentive to gain qualification Language service providers are increasingly contracting unaccredited interpreters to meet demands for interpreting services. Unaccredited interpreters are usually paid at the same rate, or only marginally less than accredited interpreters.<sup>44,45</sup>

- An accredited interpreter



There is anecdotal evidence that these interpreting workforce issues negatively impact on the quality of language service provision in Queensland. When service providers and clients experience poor quality interpreting services, it can reinforce the common perception that it is challenging to access interpreters.

Despite these challenges, the Working Group found that many accredited interpreters are dedicated to professionalism and excellence, have a strong sense of responsibility and care for the clients they work with. The Working Group's survey found that the experiences of community services with accredited interpreters have largely been positive:

- 85 per cent said the accredited interpreters they engaged make interactions with clients from CALD communities more effective.
- 84 per cent said the interpreters they engaged are professional and ethical in their conduct.

Issues in the language service industry are complex and they need to be addressed with urgency. The growing number of new and emerging communities and the increase in the ageing refugee and migrant populations require the development of a more sustainable language services industry in Queensland and Australia. Coordinated efforts between the Australian Government and state and territory governments are needed to ensure appropriate strategies are in place to build a more sustainable language services industry.

Money is not a big motivation for me to do interpreting. I do it for the love for it. But having said that, it is not like I can do it for food, to feed my family and pay the bills. Ethnic communities are so diverse it's hard to have bargain power to ask for increased pay [in this industry]

- An accredited interpreter

**Priority area for action:** The Queensland Government to initiate action with the Australian Government to review the language services system in Australia, and establishing a language services workforce development plan that is implemented and supported through appropriate state and national mechanisms.

I have been interpreting for over 30 years and I still love every minute of it! Community interpreting is not a glamorous job, say compared to conference interpreting where you get paid a lot more, but I love my job here (in this hospital) because I know that I'm making a difference to people's lives in very real ways.

- A Spanish interpreter, South East Queensland 2011

Translators and interpreters in Victoria have approached the Association of Professional Engineers, Scientists and Managers, Australia (APESMA) to develop an industry-based approach to addressing the long-term threat to the quality and professionalism of translating and interpreting services in Victoria.

APESMA has released a report *Lost in Translation – Barriers to building a sustainable Australian Translating and Interpreting industry* which details a range of serious barriers to the development of a stable, skilled national translating and interpreting workforce with the capability and capacity to meet the needs of the community over the next decade.<sup>46</sup> <sup>39</sup> Australian Institute of Interpreters and Translators. (June 2012). *Why do I need to employ a qualified translator or interpreter when so many people in Australia are bilingual?* Retrieved 26 June 2012 from

http://ausit.org/national/?page\_id=946.

<sup>40</sup> The Association of Professional Engineers, Scientists and Managers, Australia. (2012). Lost in translation – Barriers to building a sustainable Australian translating and interpreting industry. Retrieved 26 September 2012 from

http://issuu.com/barriers/docs/lost\_in\_translation?mode=window&pageNum ber=1

<sup>41</sup> Ibid.

<sup>42</sup> Foundation House. (April 2012). *Exploring Barriers and Facilitators to the Use of Qualified Interpreters in Health – Discussion paper.* 

<sup>43</sup> Department of Health. (2008). Delivering a healthy Western Australia: Review of language services in the Western Australia health system final report.

<sup>44</sup> Queensland Council of Social Service. (2011). *Access to interpreters forum report.* 

<sup>45</sup> In 2011, four fourth year students from the Bachelor of Social Science program at the University of Queensland undertook research exploring the retention and recruitment issues in the Interpreting workforce and its impact on Queensland services. This research was conducted with QCOSS as an industry partner.

Courts and Tribunals – A National Survey.

<sup>46</sup> The Association of Professional Engineers, Scientists and Managers, Australia. (2012). *Lost in translation – Barriers to building a sustainable Australian translating and interpreting industry*. Retrieved 26 September 2012 from

http://issuu.com/barriers/docs/lost\_in\_translation?mode=window&pageNum ber=1.

# Terminology and definitions

**Interpreting** - The transmission of a message between two spoken languages, between a signed language and a spoken language, or between two signed languages. The interpreter, therefore, enables two or more parties who do not share a common language to communicate verbally or in sign by attending to what one party says or signs and repeating that message in the other party's language, transferring all components of the message that would be available to the parties as if they shared a common language.

**Translation** - The written transmission of a message from one language into another. A translator is a person who makes a written transfer of a written message or information from one language into another language to provide complete and accurate text reflecting the original material.

Accredited interpreter - Accredited interpreters are those that have demonstrated the necessary skills and knowledge and operate within a professional code of ethics. When engaging interpreting services, agencies should engage accredited interpreters as much as possible.

In Australia, interpreting accreditation is provided by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) which has responsibility for setting and maintaining the standards of interpreting and translating. There are numerous levels of accreditation for interpreters and translators. The highest levels of NAATI accreditation are Conference Interpreter (Senior) and Conference Interpreter. These levels are required if organising an international conference. However, for most government agencies and community organisations, the following NAATI credentials are usually adequate, and should be requested in this order of preference (subject to availability and interpreting task):

- **Professional interpreter** (formerly known as Level 3): This represents the minimum level of competence for professional interpreting and is the minimum level recommended by NAATI for work in most settings, including banking, law, health and social and community services. Professional interpreters are capable of interpreting across a wide range of semi-specialised situations and are capable of using the consecutive mode to interpreter speeches or presentations.
- **Paraprofessional interpreter** (formerly known as Level 2): This represents a level of interpreting for the purpose

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of general conversations. Paraprofessional interpreters generally undertake interpretation of non-specialist dialogues.

• Interpreter recognition: Recognition does not have equal status to accreditation, it is an acknowledgement that at the time of the award the applicant has had recent and regular work as an interpreter, but no level of proficiency is specified. Usually the interpreter is working in a language of low community demand for which NAATI does not yet offer accreditation testing.

This report uses the term accredited interpreters broadly to encompass professional, paraprofessional interpreters and recognised interpreters. Accredited interpreters are also referred to as qualified interpreter or professional interpreters in other documents. The terms 'qualified interpreter' and 'professional interpreter' are used where they are directly quoted from their original source. (This description is adapted from a number of sources<sup>47,48,49</sup>)

## Culturally and Linguistically Diverse (CALD) - In

Australia, the term Culturally and Linguistically Diverse officially replaced Non-English Speaking Background in 1996. However there is no single, official or state or Commonwealth-endorsed definition of the concept culturally and linguistically diverse. The Department of Human Services Multicultural Strategy Unit (2002) notes 'in the Australian context, individuals from a CALD background are those who identify as having a specific cultural or linguistic affiliation by virtue of their place of birth, ancestry, ethnic origin, religion, preferred language, language(s) spoken at home, or because of their parents' identification on a similar basis'.<sup>50</sup>

Although a commonly used term, it is important to be mindful of the limitations and cautions of CALD to describe communities and individuals who identify themselves as having a culture distinct from the general population. Not all people identify with the term CALD, and may more readily identify with other terms such non-English speaking, bi- or trans-cultural, or even Australian.<sup>51</sup>

For the purposes of this report, the term CALD is used to describe people who have arrived in Australia under various circumstances, including as migrants, refugees, international students or unaccompanied minors, who are

# Acronyms

likely to speak English as a second language, and to acknowledge that there is a proportion amongst this diverse group of people who are not proficient in English or speak no English at all.

**Cultural competency** - For the purpose of this report, cultural competency is defined as 'the ability of individuals and systems to respond respectfully and effectively to people of all cultures, classes, races, ethnic backgrounds, and religions in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each. The knowledge and skill set necessary to identify and address the issues facing your organisation that have cultural implications, and the ability to operationalise this knowledge into the routine functioning of the agency.'52

**TIS National** - Translating and Interpreting Service National. The Department of Immigration and Citizenship (DIAC) provides the TIS National Translating and Interpreting Service for people who do not speak English and for the English speakers who need to communicate with them. TIS National is the main language service provider for the majority of Queensland Government agencies and statefunded community organisations.

The Australian Government, through TIS National, provides free interpreting services to non-English speaking Australians citizens or permanent residents communicating with the following approved groups and individuals:

- private medical practitioners (defined as general practitioners and medical specialists) providing Medicarerebateable services and their reception staff to arrange appointments and provide results of medical tests
- non-profit, non-government, community-based organisations for case work and emergency services where the organisation does not receive funding to provide these services
- Members of Parliament for constituency purposes
- local government authorities to communicate with non-English speaking residents on issues such as rates, garbage collection and urban services
- trade unions to respond to members' enquiries or requests
- Emergency Management Australia
- pharmacies for the purpose of dispensing Pharmaceutical Benefits Scheme (PBS) medications.53

CALD	Culturally and Linguistically Diverse
GP	General Practitioner
JP	Justice of the Peace
QHIS	Queensland Health Interpreting Service
QPS	Queensland Police Service
NAATI	National Accreditation Authority for
	Translators and Interpreters
SWITC	Support with Interpreting, Translating
	and Communication
TIS National	Translating and Interpreting Service National

<sup>47</sup> Mater Health Services. (2011). Interpreting Policy.

http://www.naati.com.au/PDF/Misc/Outliness%20of%20NAATI%20Credenti <u>als.pdf</u>.

<sup>49</sup> Department of Communities. (2011). *Queensland Government Language* Services Policy – A multicultural future for all of us.

- <sup>50</sup> Department of Human Services Multicultural Strategy Unit. (2002).
- <sup>51</sup> Peakcare Queensland Inc. (2010). *Culture Matters*. <sup>52</sup> Seattle King County Department of Public Health. (1994).
- <sup>53</sup> Department of Immigration and Citizenship. *Free Interpreting Service*. Retrieved 20 June 2012, from http://www.immi.gov.au/living-inaustralia/help-with-english/help\_with\_translating/free-services.htm.

<sup>&</sup>lt;sup>48</sup> National Accreditation Authority for Translators and Interpreters Ltd. (2010). Outlines of NAATI Credentials. Retrieved on 7 September 2012 from



## The Queensland Accessing Interpreters Working Group

comprises the following organisations concerned with equitable service provision for people from culturally and linguistically diverse communities in Queensland:

## Queensland Council of Social Service Inc.

QCOSS queensland council of social service inc WORKING FOR A FAIR QUEENSLAND

## AMPARO Advocacy Inc.



#### Multicultural Development Association Inc.



## **Ethnic Communities Council of Queensland**



Ethnic Communities Council of Queensland

### Nambour Community Centre Inc.



## **Centacare Cairns**



## **Immigrant Women's Support Service**



I M M I G R A N T W O M E N 'S S U P P O R T S E R V I C E a domestic violence and sexual assault service for women of non-english speaking backgrounds

**Mater Health Services** 

This report was facilitated by QCOSS on behalf of the Queensland Accessing Interpreters Working Group.

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