### **Breaking Silence**

#### **Interpreting for Victim Services**



Marjory A. Bancroft, MA

### **Learning Objectives**

1

 Discuss three major concerns when working with interpreters and survivors of sexual assault, domestic violence and child abuse.

 Analyze effective culturally and linguistically appropriate techniques for providing traumainformed care when working with interpreters and trauma survivors.

### **Learning Objective 1**

 Discuss three major concerns when working with interpreters and survivors of sexual assault, domestic violence and child abuse.

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2

## Concern #1: Interpreting Traumatic Content



## Testing, Testing: A Teen Rape Story



## Why Is This Field So Painful to Interpret? Look at the Impact of Violence and Trauma...

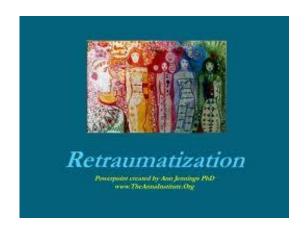
Physical Effects	Psychological Effects
<ul><li>Burns</li></ul>	<ul><li>Shame</li></ul>
<ul><li>Damaged Organs</li></ul>	<ul><li>Sadness and depression</li></ul>
<ul><li>Bone Fractures</li></ul>	■ Guilt
<ul><li>Damage to the Genitals</li></ul>	<ul><li>Anger and rage</li></ul>
<ul><li>Musculoskeletal Problems</li></ul>	<ul> <li>Post-traumatic stress disorder</li> </ul>
<ul><li>Headaches</li></ul>	<ul><li>Difficulty trusting</li></ul>
<ul><li>Loss of Hearing</li></ul>	<ul><li>Intrusive thoughts and images</li></ul>
<ul><li>Cognitive Problems</li></ul>	<ul><li>Flashbacks</li></ul>
<ul><li>Scars</li></ul>	<ul><li>Insomnia</li></ul>
	<ul><li>Memory and concentration problems</li></ul>

#### **Interpreting Traumatic Content**

Relevant concerns: the interpreter should...

- Meet with the service provider first—or at least as much as possible beforehand.
- Be ready to interpret intimate body parts, acts of violence/abuse and obscene language.
- Avoid helping, comforting and above all TOUCHING the survivor.
- Have a "distress" signal for the provider.
- Plan for self care.

## **Concern #2 Role Boundaries**



- Honor the message: do not explain it, but instead make sure it is clearly understood.
- Interpreters may want to "help" the victim: resist that temptation.
- Victim service providers are trained to provide services to survivors of crime: the interpreter is trained and qualified to interpret.

#### **Communicative Autonomy**

The capacity of each party in an encounter to be responsible for and in control of his or her own communication.

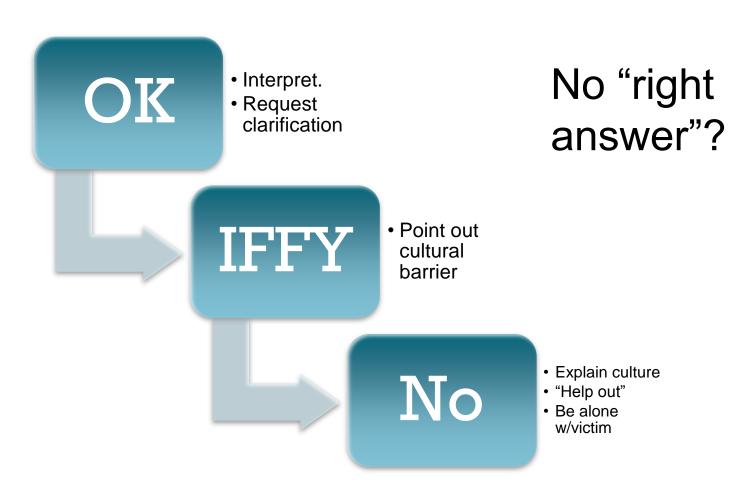
## Our Thesis: Interpreters Should GIVE Voice—Not Take It Away



#### THE PRE-HISTORIC ERA

"Interpreter Can Do Anything" syndrome.

#### The Interpreter's Role



#### Language, Power and Interpreters



#### The TRAUMA-INFORMED Interpreter

## Social worker at a nonprofit legal service, Washington, DC

(August 2014 interview)

- It is really important to have that trauma-informed perspective, because there are many things that can be triggering and so many things in sexual assault and domestic violence are related to power and control--and the interpreter.
- A lot of trauma is about power and control [but] especially domestic violence and sexual assault. Any sort of issue can retrigger a client into falling back into the same feelings that they had.
- An interpreter can trigger those feelings again because there is a control issue. The interpreter has control over the clients' words and how they are conveyed and has control over the service provider's words and how they are portrayed to the client.

## **Concern #3 Managing Emotional Reactions**

- Grounding
- Abdominal breathing
- Imagery



#### Why Interpreters Need Special Training



Asian Pacific Islander Institute on Domestic Violence http://www.apiidv.org/img/lifetime-spiral-lg.png

## **Training? Who, Me?**



## **Specialized Training for Interpreters**



Healing Voices and Breaking Silence
Two trainings (five days and four days)
about how to interpret for survivors of extreme trauma

### **Learning Objective 2**

 Discuss three major concerns when working with interpreters and survivors of sexual assault, domestic violence and child abuse.

> Analyze effective culturally and linguistically appropriate techniques for providing traumainformed care when working with interpreters and trauma survivors.

2

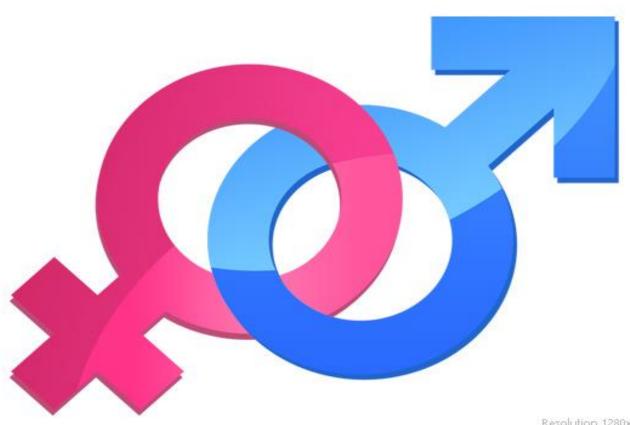
## **Examples of Specialized Techniques**

- 1. Building trust.
- 2. Professional interpreter introductions.
- 3. Positioning
- 4. Supporting the therapeutic alliance (for therapy).
- 5. Maintaining accuracy
- 6. Addressing cultural misunderstandings.

#### **But First... Plan Ahead**



## Interpreter: Be Ready for Anything

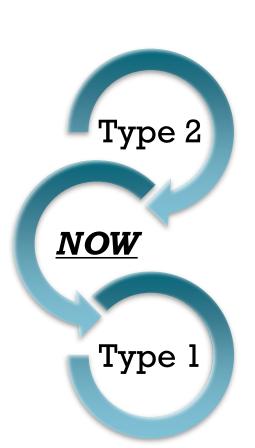


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## Why Interpreters Need to Plan Ahead

#### TYPE 1 thinking:

- Here, now
- "On your feet"
- Spontaneous



#### TYPE 2 thinking:

- Think ahead
- Slow, private
- Deep reflection

## **Building Trust: The Interpreter Arrives**

#### Shock, confusion, chaos?

Some [rape victims] at one moment seem perfectly fine, cracking jokes and even through the exam, and others start that way and melt down, and other people say hardly anything.

Always, as an interpreter, you have to take it all in before you react.

Rape survivor advocate

### Rapport and Trust-Building

- In your opinion, with transparency and if feasible, should:
- a) The interpreter engage in a little social chitchat with the survivor before the session?
- b) The provider engage in a little social chitchat with the survivor <u>and</u> the interpreter before the session?

## **Activity:** What If the Interpreters Sees the Survivor?



## **Activity: Establish Warmth**





### Confidentiality



- The introduction with the interpreter can reduce survivor fears about confidentiality and show the interpreter's professionalism.
- Emphasize that the interpreter's notes will be destroyed.
- Decide in advance whether to give full or first name.

### Sample Introduction

- Hello. My name is ... and I will be interpreting for you today.
- Everything I interpret is kept <u>strictly</u> confidential.
- I'm going to interpret everything you say [or sign].
- I may write a few things to help me interpret accurately, but I'll destroy my notes before I leave.
- If you can, please speak slowly and pause when I make a signal.
- If you don't understand anything, please ask.
- Do you have any questions?

# "Where Are You From?" One Innocent Question Can Derail the Session



### **Nonverbal Judgment**



- Our body language reveals us.
- The interpreter might be thinking, "Why doesn't she leave him," or, "But why did she dress like that and then drink so much?"
- The survivor sees the interpreter's face and body, hears the tone. If s/he feels judged, s/he might not open up to the service provider.

### **Positioning**

- Question: Do you find positioning makes a difference in therapy for survivors?
- Therapist: I absolutely do. I look directly at the client and have the interpreter off to the side so she's not in the range of our direct visual [sight lines]. I speak directly to the clients, and they speak to me in their language because [therapists] are reading the facial expression.

## **Positioning Activity**



## **Eye Contact**



## Whom Should the Survivor Build a Relationship With?



# The Therapeutic Alliance: Don't Intrude on the Provider's Role

- Some interpreters tell the clients, "It's okay, you're safe, speak up!", "You need to share your story with the therapist," "Don't cry, dear, everything will be all right." Interpreters need to know (even for lawyers, case managers and other providers) that:
- Often the service provider's behavior may seem harsh, distant, peculiar or just wrong. But such behaviors are typical for therapists and some other service providers.
- 2. The interpreter is probably not trained in the provider's job.
- 3. Interfering with the provider's strategy may harm the survivor, the integrity of the session and the outcomes.

# **Touch: Should Interpreters Touch Trauma Survivors?**



# What If the Survivor Touches the *Interpreter*?



# A Psychiatrist's Answer



### **Promote Accuracy**

Relevant techniques for interpreters:

- ALWAYS be complete.
- Reflect tone.
- Interpret proper nouns as is.
- Switch to 3rd person...



### **Example: Victim vs. Survivor**



### **Accuracy Matters**



When we have a good interpreter, the meeting goes smoothly and I get more information from the client. We're doing better work...

In situations where the interpreter is not doing a good job, I see the client shut down. They no longer trust that person to convey the meaning, so they shut down. I can't provide the services: [survivors] are going to protect themselves by not giving the interpreter control.

Clinical social worker for victim services

## **Activity: Prepare for Tough Terms!**

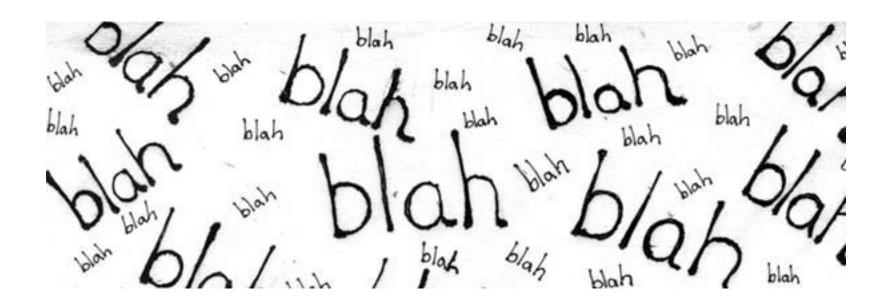


# What If the Client Speaks Too Fast?

- If the client is very emotional and making a first revelation that she was raped in prison... and you cannot keep pace...Will you:
- (a) Interrupt and ask her to slow down?
- (b) Take good notes and hope for the best?
- (c) Summarize?



### **Activity: Interpret Incoherent Speech**



#### And Do You...



- Interpret in a neutral voice? What if the survivor shouts, cries or curses?
- Explain things, e.g., "That kind of violence is normal in her culture."
- Always interpret in direct speech (first person)?
- Clarify ambiguous pronouns (example, he, she, it).
- Mediate with the survivor first or the survivor?

#### **Culture and Mediation**



There is only one cultural expert on the survivor.

And that is...

### What Interpreters Do and Say

At times an interpreter's face, body language or tone of voice show judgment or disgust for patients (e.g., LGBT).

Or the interpreter might say, I'm sorry, that's too much jargon for the patient. He comes from a small village. If you could use shorter words and simple language, that would help a lot.

But to the patient, he might say, I just asked the provider to explain some terms.

Why? Imagine how this would sound: I just told the caseworker that I'm sorry, but she's using too much jargon for you. I said you come from a small village and if she could use shorter words and simple language that would help a lot.

## Intervening vs. Mediation



### **Examples of "Scripts"**

Excuse me, the interpreter is concerned that what I'm interpreting about [the service] isn't clear. As the interpreter, I see a possible break in communication about [the meaning of "flashbacks].

Excuse me, as the interpreter may I suggest you ask the client about [the next steps] you discussed.

 The interpreter senses a possible cultural misunderstanding about [the meaning of "evil eye"].

#### **Culture Brokering: Wise Words from IMIA**

- [The interpreter's] role in such situations is not to 'give the answer' but rather to help both provider and patient to investigate the intercultural interface that may be creating the communication problem.
- Interpreters... have no way of knowing where the individual facing them in that specific situation stands along a continuum from close adherence to the norms of a culture to acculturation into a new culture.

- International Medical Interpreters Association

erpreters Association



Standards of Practice, 1995

#### **Back to Power and Control**

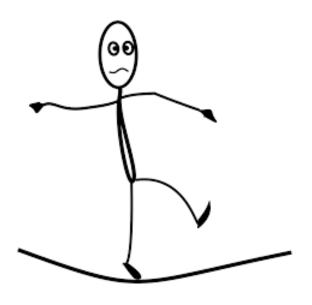
■ We're not just talking about survivors of domestic violence, not just this power and control piece, but anyone who's been a victim has been taken over and controlled in some way. So allowing them to make decisions even if you don't agree with them [is critical] because it's giving them a safe place to make decisions. It's important for interpreters to understand that their role, the way they inflect and control what they say, can make the client feel safe or stable [or the opposite].

Victim service provider, Washington, DC

# Please: Do Not Take Away the Survivor's Voice



# We Hope This Helped You...







#### **Questions?**

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