Interpreting Compassion
Interpreting for Trauma Survivors

Marjory A. Bancroft, MA
Learning Objectives

1. Assess the impact of survivor trauma on the interpreted encounter.

2. Evaluate strategies for providers and interpreters to prevent or reduce the impact of interpreter vicarious trauma on the encounter.
My “Dual Identity”

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Board Chair, The Voice of Love
Are we who we are?
Interpreting Compassion
A Needs Assessment Report on Interpreting for Survivors of Torture, Trauma and Sexual Violence

The Interpreter’s Role?
Learning Objective 1

1. Assess the impact of survivor trauma on the interpreted encounter.

2. Evaluate strategies for providers and interpreters to prevent or reduce the impact of interpreter vicarious trauma on the encounter.
What three things are taken away from victims of major trauma?

- Trust.
- Safety.
- The ability to impact the world.
These Brutal Facts Include Ourselves—and Our Interpreters

1 IN 3 WOMEN WILL BE RAPED, BEATEN OR ABUSED IN HER LIFETIME.
How Would YOU Feel About Interpreting for Sexual Assault Survivors?
Role Play
Interpreting for Refugees

- Medical/mental health
- Educational
- Social Services
- Legal
- Refugee Resettlement
QUIZ

Is It All Right for the Interpreter…

- To share with the survivor, “It happened to me, too”? 
- To tell the provider, “She doesn’t understand”?
- To tell the survivor, “It’s safe to talk to the therapist”?
- To ask for a break during an intense moment of the session?
- To cry?
- To cry if both the survivor and the therapist are also crying?
- To tell the provider, “She needs to talk to a woman, it’s not culturally acceptable for her to speak to you”? 
Stress refers to any state of mental or emotional strain or tension resulting from adverse or demanding circumstances.

- Stress is part of everyday life (fight, freeze, flee).
- Stress can motivate positive behavior.
- Stress can come from many areas of our life.
- It can be beneficial, energizing—or overwhelm and paralyze us.
Compassion Fatigue/Burnout

- Compassion fatigue: professional burnout and secondary traumatic stress.
- You stop caring. It’s all too much.
- You’re drained.

I act like I don't care, but deep down I swear it kills me.
What Is Trauma?

Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being.

U.S. Substance Abuse and Mental Health Services Administration
The Impact of Trauma

The survivor could
- Cry.
- Fall silent.
- Giggle.
- Shake.
- Blow up in anger.
- Be distant, numb, vague, confused…

This could be true whether the trauma happened an hour ago—or 70 years ago.
Post-traumatic Stress Disorder

- Reliving the Event
- Avoidance
- Hyperarousal
What Is Vicarious Trauma?

VICARIOUS TRAUMA

A buildup of exposure to clients’ trauma.

U.S. Substance Abuse and Mental Health Services Administration
Symptoms of Vicarious Trauma

Vicarious trauma means sharing some of the trauma symptoms of the survivor. You might notice you feel:

- Anxiety
- Intrusive or distressing thoughts
- Depression
- Insomnia
- Recurring health problems like infections
- Fear for your own safety (e.g. fear of parking lots or dark places)
- Fear for the safety of your loved ones
<table>
<thead>
<tr>
<th>Immediate response</th>
<th><strong>Job stress</strong>*</th>
<th><strong>Vicarious trauma</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Irritation</td>
<td>Dizziness/light-headedness</td>
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<td></td>
<td>Impatience</td>
<td>Nausea</td>
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<td></td>
<td>Feeling “fed up”</td>
<td>Heart pounding</td>
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<td></td>
<td>Fantasies of revenge</td>
<td>Distress or sadness</td>
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<tr>
<td></td>
<td>Anger</td>
<td>“Spacing out”</td>
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<td></td>
<td></td>
<td>Inability to continue</td>
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<tr>
<th>Short-term response</th>
<th><strong>Taking it out on colleagues</strong></th>
<th><strong>Shaken or shaking</strong></th>
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<tbody>
<tr>
<td></td>
<td><strong>Venting to friends/family</strong></td>
<td><strong>Confusion</strong></td>
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<td></td>
<td><strong>Problem-solving</strong></td>
<td><strong>Emotional numbness</strong></td>
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<tr>
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<td><strong>Revisiting job description</strong></td>
<td><strong>Flashbacks</strong></td>
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<td></td>
<td><strong>Reporting problems</strong></td>
<td><strong>Intrusive thoughts</strong></td>
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<td></td>
<td><strong>Desire to quit</strong></td>
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</tbody>
</table>

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<tr>
<th>Longer-term response</th>
<th><strong>Desire to make changes</strong></th>
<th><strong>Insomnia or nightmares</strong></th>
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</thead>
<tbody>
<tr>
<td></td>
<td><strong>Re-evaluating the job</strong></td>
<td><strong>Disruption of eating patterns</strong></td>
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<tr>
<td></td>
<td><strong>Changing jobs</strong></td>
<td><strong>Depression</strong></td>
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<tr>
<td></td>
<td></td>
<td><strong>Anxiety</strong></td>
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<td></td>
<td></td>
<td><strong>Fear for safety of self/family</strong></td>
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</tbody>
</table>
Learning Objective 2

1. Assess the impact of survivor trauma on the interpreted encounter.

2. Evaluate strategies for providers and interpreters to prevent or reduce the impact of interpreter vicarious trauma on the encounter.
Interpreting—It’s Easy, Right?
But the Interpreter Processes Trauma at Least *Four Times*

1. Listening
2. Understanding and analyzing
3. Converting the Message
4. Delivering the message in another language

The interpreter is the only person in the room who is *cognitively processing the traumatic content at least four times for each and every statement made.*
Oops! We Forgot the Interpreter…
Interpreter Stress and Trauma

- Stress or trauma may be aggravated for interpreters by:
  - Interpreting obscenities, intimate body parts and sexual acts.
  - Having had a similar experience themselves.
  - Having unresolved past trauma.
  - Being a refugee interpreting for refugees.
  - Having many life stressors and pressures.
Causes of Interpreter Trauma

Graphic, violent, distressing content

Being the “voice” of pain and suffering

Using first person (can make you feel the trauma happened to you)

One’s own past trauma (refugees, abuse survivors)

Community and work pressures
Empathy

- Empathy is the ability to feel, understand or imagine the feelings or the emotional experience of another person or another being.
- Two-edged sword for the interpreter
- Can provide insight and understanding
- Can also lead to vicarious trauma
- Automatic vs. controlled empathy
Self Care

The ability to maintain physical, emotional, relational, and spiritual health in times of stress.

Self Care

Examples of self care include

- Debriefing (with healthcare or mental health providers)
- Immediate self care
- Self care plan
- Support systems

If you don’t take care of yourself, you can’t take care of anyone else.
## Long-term Wellness vs. Immediate Self Care

<table>
<thead>
<tr>
<th>Long-term plan focuses on:</th>
<th>Short-term plan focuses on:</th>
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</thead>
<tbody>
<tr>
<td>- Physical well-being</td>
<td>- The interpreting itself</td>
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<tr>
<td>- Emotional balance</td>
<td>- What to do before, during and after the encounter</td>
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<tr>
<td>- Social connections</td>
<td>- Specific techniques for managing your emotional responses</td>
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<tr>
<td>- Relaxation (e.g., breathing, meditation, prayer, progressive relaxation)</td>
<td>- A subset of your larger, long-term wellness plan</td>
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<tr>
<td>- Spiritual growth: the search for meaning and fulfillment</td>
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Long Term: “The Big Four”

- Adequate sleep
- Eating well
- Activity and exercise
- Relaxation techniques
Short-Term Techniques

- Before the encounter
- During the encounter
- After the encounter

NOTE: These are techniques are not the same as a long-term wellness plan. They support interpreters and are for use during the actual encounter.
Before the Encounter

**Preparing means** two things: preparing for the interpreted assignment itself, and preparing oneself emotionally.

**Setting boundaries means** drawing a line between our personal lives and the professional encounter.
How to Help Interpreters Prepare

- Give interpreters information to help them research the service, the assignment topic and the terminology.

- Coordinate to get information, documents and forms to interpreters \textit{in advance}.

- Arrange for two different signals for the interpreter to give the provider for when:
  
  - Interpreters cannot keep up with the pace (a neutral signal, e.g., raise a palm)
  
  - The interpreter is deeply distressed and MUST have a break soon (this would be a discreet distress signal)
Setting Boundaries

- Objects
- Visualization
- Rituals
- Mental preparation
Teach The Relaxation Response

Sit quietly in a comfortable position.

Close your eyes.

Deeply relax all your muscles, beginning at your feet and progressing up to your face. Keep them relaxed.

Breathe through your nose.

Become aware of your breathing.

As you breathe out, say the word, "one"* silently to yourself. For example, breathe in ... out, "one"; breath in .. out, "one", etc.

Breathe easily and naturally.

Continue for 10 to 20 minutes.

You may open your eyes to check the time, but do not use an alarm.
Staying Calm During the Session

- **Grounding**
  - Helps interpreters not to experience client/own past trauma.

- **Breathing**
  - Breathe from the diaphragm, not the throat

- **Visualization**
  - Develop techniques to avoid visualizing traumatic content; go to a calm, soothing place; visualize a peaceful scene.

- **Relaxation techniques**
  - Advise them to find a quick technique and make it automatic.

- **Take a break!**
  - But the provider, not the interpreter, should schedule it.
I want to learn to live in the moment... just not this moment. Some other moment. Like a moment on the beach.
Switching from 1st to 3rd person
- Helps interpreters not to feel the trauma.

Staying focused on the message
- Paying attention to syntax, chaining of ideas, etc.

Observing their performance
- Keeps them focused on the act of interpreting.

Paying attention to note-taking
- Notes are concrete and can distract from trauma.
After the Encounter

1. Debrief if possible!
2. Remind interpreters to use any of the techniques for before and during the encounter.
3. Refer interpreters to their self-care plan.
4. Consider interpreter social support system: family, friends, acquaintances and colleagues in particular, but also:
   - Congregants in a church, temple or mosque.
   - Other groups they may belong to.
   - Social activities they may engage in.
Debriefing

Debriefing is a common resource in the “helping and healing professions.”

Interpreters get overlooked and excluded.

NOTE: Debriefing with a therapist or counselor should be limited to debriefing the specific encounter. The provider is NOT the interpreter’s therapist.
Self Care

The ability to maintain physical, emotional, relational, and spiritual health in times of stress (SAMHSA)

Interpreters need TWO plans:

- A **general wellness** plan addresses self care in *all* areas of your life in general.

- A specific **self-care** plan will focus on interpreting in particular and what you can do to help reduce or prevent vicarious trauma.
Research shows…

*If we write plans down, and especially if we write them in the form of specific, measurable objectives, we are much more likely to act on those plans.*
SMART Objectives

S  Specific
M  Measurable
A  Appropriate action
R  Realistic
T  Time-bound
How to Write Objectives

**Not SMART**

“I will spend more time with my friend/significant other.”

Appropriate but…

- Too vague
- Cannot be measured
- If it’s less than 70% likely to happen, it’s unrealistic.

**SMART**

“If every other weekend, I will go to a fun event like a theater performance, a restaurant or a baseball game with my significant other.”

- Specific
- Can be measured
- But is it realistic? Try to be REAL.
The Realism Rule

- Your objective is realistic only if you think it’s 70% likely you will DO it.

#KEEPING IT REAL
Interpreters Should
Write a Self-care Plan!

Self-Care is a priority and necessity - not a luxury - in the work that we do.
Be a Faithful Voice

The *best* way interpreters can help survivors is to be a *faithful voice*. 
Questions?

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