IDEA and Use of Interpreters
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Law and Ethics

It is important for Speech-Language Pathologists (SLPs) to understand both legal and ethical requirements. Here we highlight the legal requirements for assessment and intervention with English Language Learners (ELLs) and the ASHA Code of Ethics and how it relates to Culturally and Linguistically Diverse (CLD) population.
IDEA and Use of Interpreters

IDEA 2004 states that:

• Assessment and other evaluation materials used to assess children are:
  • Selected and administered so as not to be discriminatory on a racial or cultural basis; and are provided and administered in the language and form most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is not feasible to so provide or administer.

IDEA does not make the same requirement about language of administration for intervention. However, the ASHA Code of Ethics (2010a) states:

• that services be provided competently with all available resources, including referral when appropriate. Principle of Ethics 1, Rule C, prohibits discrimination on the basis of race or ethnicity, a provision that eliminates the option of refusing treatment without ensuring that the child receives proper services.

IDEA and Use of Interpreters

This provision is further specified in an *Issues in Ethics Statement on Cultural Competence*, which notes, "When a clinician is not proficient in the language used by the client and family, a suitable interpreter [should] be used" (ASHA, 2005a, p.2). It also states, "Bilingual skill (understanding and speaking the language) does not equate to bicultural skill (understanding and respecting the culture)," and that both of these skills are required for service to be culturally competent.

Using an Interpreter in assessment and treatment
Sources for finding an interpreter

• The family
  – Extended members preferred
  – The family is the most accurate source for their language and dialect. Ask for a member of the family that is not immediate to limit bias

• The Professional Community
  – Nurses, healthcare professionals
  – Also, inquire as to their community. They will be the first to tell you if there is a cultural center, religious center, or a medical professional they know that speaks their language. The nursing/nursing home community is incredibly diverse. If the family can direct you towards a medical professional that speaks their language you have a leg up on someone that is probably familiar with translating.
Sources for finding an interpreter

• Community Volunteers
  – Cultural centers
  – Religious groups

• On-line resources
  – www.professionalinterpreters.com
  – These tend to be pricey but in dire circumstances, there are online interpreters that you can conference in to a meeting to translate. The hospital/post tr conference in interpreters. It is also common when there is a la
Interpreter bias

• It is human nature to want a member of your culture to perform well

• An interpreter should:
  – Maintain Neutrality
  – Translate verbatim statements
  – Maintain confidentiality

• Bias can be avoided simply by explaining bias to the interpreter. Empower them to do a good job by explaining how common bias is to all of us. This causes them to monitor themselves to provide the best interpreting.

• Bias is dramatically increased the closer the interpreter is to the client. i.e immediate family.
How to train an interpreter

The encounter with the family should not be the first time you speak with an interpreter

- Ask that they interpret *consecutively* (not concurrently)
- Explain the format
- Explain your job and what you are looking for
How to work with an interpreter

• Talk to the family, not to the interpreter
• Sit across from client and interpreter takes a mediating position
• Use yes-no questions
• Provide pauses for interpreter
• Avoid ALL professional jargon

Note: An inexperienced interpreter may talk more or less than you do.
Debriefing and writing the report

• Debriefing
  – Ask the interpreter their impressions of the interaction and client after the interaction

• Reporting
  – Annotate that an interpreter was used
  – Suppliment testing with other data
    • observations
    • Teacher/family input