Fact Sheet 4:
Interpreters and Medical Practitioners in Private Practice

Engaging an Interpreter

Free interpreting, especially by telephone, is rapidly available for most consultations in private practice (GP or specialist, urban or rural). This Fact Sheet outlines the importance of interpreters to communication, and explains how to get one.

- When treating patients who only speak a language that you do not speak, the use of professional interpreters is important for the provision of optimal health care.
- In stressful situations such as illness, a person's fluency in a second language often decreases. Furthermore, English use at a social level does not necessarily mean that a person can understand, or convey, medical information.
- Friends, relatives or bilingual staff are often used but each presents their own problems. The responsibility of interpreting can place unreasonable pressure on a child in particular, and disturbs the power relationship within a family.
- In the case of refugee families, the potential for miscommunication is heightened by the impact of psychological trauma.

Professional interpreters
- Interpreters are bound by a professional code of ethics to maintain patient confidentiality.
- As trained professionals they should receive the same respect as any member of your staff.
- The professional interpreter’s role is to convey information between the health professional and the patient. They are not cultural experts or counsellors, but can sometimes provide useful advice if asked.
- In certain circumstances political, religious or cultural sensitivities may influence an interpreting interaction. It is important to establish whether the patient has a preferred gender of interpreter. As refugees have commonly suffered abuse and persecution, sensitivity regarding differing religious or ethnic groups may also be needed.
- To ensure that the most appropriate interpreter is chosen, simply ask the patient, or ask the interpreter service for advice.
- Telephone interpreting can present the added advantage of anonymity, particularly in small communities.

Practical points
- A hands free phone is the best way of using a telephone interpreter. Both you and the patient will need to sit close to the microphone. Converse with the patient as you normally would.
- With an on-site interpreter, arrange seating so that all three participants are in a triangular formation. This enables appropriate communication and invites full participation from all parties.
- Always look at the patient when asking a question, as in any consultation, and use the second person i.e “Do you have...”. Do not address the interpreter with “Does he/she have...”

Doctors’ Priority Line
The TIS Doctors’ Priority Line is a 24-hour, fee-free telephone interpreting service for medical practitioners in private practice and their clients. It can be accessed 7 days a week on 1300 131 450 for the cost of a local call from anywhere in Australia. Calls to this number are given priority over other TIS calls.

The service is designed for use when a consultation is Medicare-claimable and provided to a non-English-speaking permanent resident or Australian citizen. TIS is encouraging doctors to use the priority line over their on-site interpreting service as it is more accessible and cost-effective.
To register with TIS call 1300 131 450. They will supply a client number and appropriate information.

**On-Site Interpreter:**
- Complete a “Request for On-Site Interpreter” form.
- Specify language required, preferred gender of interpreter, etc.
- Fax form to TIS
- Sign Service Delivery form carried by interpreter

**Pre-booked Telephone Interpreting**
- Complete a “Request for pre-booked telephone interpreter” form
- Specify: Language required, special requirements
- Fax form to TIS

**Telephone Interpreting**
- Phone 1300 131 450

* Under the current guidelines, Translating & Interpreting Service (TIS) provides free of charge on-site (limited number) and telephone interpreting for general practitioners in the cases when their patient has a Medicare Card and the medical consultation is not related to compensation or litigation claims. This free service is subject to a daily quota and availability of interpreters. The Settlement Program, Department of Immigration and Citizenship covers the cost of this service. If an on-site interpreter is needed and the quota is full, the appointment may need to be re-scheduled or a private interpreter sought. See the Yellow Pages for private interpreter services.


Updated/09
Each year more than six thousand men and boys of refugee background settle in Australia, making up half of our humanitarian intake. Some have been combatants in war; others have been imprisoned and/or tortured because of their roles as community leaders, activists or professionals. A small number have been child soldiers or arrived as unaccompanied minors. As refugees, all have escaped actual or threatened persecution.

As a result of these experiences, refugee men may have a range of health issues additional to those of men in the wider Australian community.

**Physical impacts of torture & trauma**

Injuries from war and torture are the most common sources of physical trauma for refugee men. They may not have received adequate treatment in the past.

Estimates of torture survival rates among refugee groups vary widely depending on the country of origin, minority group to which they belong and other factors.

Long term physical problems resulting from torture can include:

- Headaches or brain damage from head injuries
- Musculo-skeletal pain from old fractures or damage to joints and other tissues
- Ruptured ear drums with hearing loss
- Damaged or missing teeth from forced extractions or electric shocks
- Genito-urinary or rectal abnormalities, STDs and impotence due to sexual torture

Many refugees have been emotionally traumatised by being forced to flee their homes, losing loved ones and living for years in exile, before having to start a new life in a new country. They have frequently been subjected to fear, intimidation, violence, poverty, insecurity and racism.

**Psychological symptoms may include:**

- Depression and feelings of hopelessness
- Nightmares and other sleep disorders
- Flashbacks and intrusive thoughts of trauma
- Inability to trust others
- Difficulty retaining information
- Anxiety
- Irritability and anger

Feelings of guilt or shame because they were unable to prevent violence happening to their family can be particularly disabling, especially if the man or boy is the sole survivor.

Heavy smoking, alcohol abuse, problem gambling and chronic anger may signify underlying anxiety, depression or PTSD. Domestic violence and family breakdown can ensue.

Men may be reluctant to access counselling services, in particular where this form of therapy is an unfamiliar concept. Adequate social support and assistance with settlement may be more effective in helping them work through traumatic experiences.

Trauma counselling, if desired, can be arranged through STARTTS, Community Health Centres or the Transcultural Mental Health Centre.

**Beware of procedures or questioning that may remind them of interrogation or torture.**

Emphasise confidentiality.

Show that you believe the patient’s story.

Explain testing or treatment procedures thoroughly to give the patient more control of the situation.

Male patients may speak of physical symptoms such as “heat”, “tiredness” or non-specific aches & pains to express emotional distress.

Updated 2009
Specific Groups at risk

- **Asylum Seekers**
The majority of asylum seekers in Australia, either in detention centres or living in the community, are men. Local studies have indicated high rates of depression and PTSD. This has been attributed to uncertainty about their future, separation from families, prolonged incarceration, and limited access to health and other services. (See Fact Sheet: Asylum Seekers).

- **Former soldiers**
Exposure to imprisonment, torture and physical injury may be higher among former soldiers. The physical and emotional development of boy soldiers may have been affected by under-nutrition, separation from their families, mistreatment and exposure to trauma.

- **Elderly men**
Physical and mental consequences of the refugee experience may first present in old age. Painful memories can resurface at times of illness or other stress (see Fact Sheet 7: Older Refugees)

Other health-related issues

- **Loss of identity**
Resettlement often involves a loss of traditional male roles and exposure to a society that offers women and children improved rights compared with their home country. Loss of identity may be associated with low self-esteem and threatens psychological well-being.

- **Social health**
Other psychological factors that can impact on the health of refugee men include:
  - Being separated from their families (who may have disappeared or still be in camps)
  - Being more focused on learning English and finding work than on their health
  - Lack of recognition of prior qualifications
  - Dirty or unsafe work environments

Protective factors

As with women, important protective factors for refugee men’s health and well-being in Australia are:
- Obtaining permanent residency
- Employment
- Acquiring English skills
- Maintaining family and community links.

Economic participation, whether through employment or the establishment of small businesses, is also high priority for refugees on resettlement. Refugees also believe that work is a way in which they can express their gratitude and contribute positively to the new country in which they have been resettled. In surviving war, exile, camp life, and a resettlement process that can take years to resolve (if ever), refugees have shown strength, ingenuity and resilience. These are factors that can be appealed to in caring for their health and wellbeing.

Explore dental health. Consider offering advice on relevant cancers, smoking, diet, back pain, sexual health, family planning, etc. Be aware of a possible preference for seeing male health staff and interpreters.

Relevant Service and organisations

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<tr>
<th>Service</th>
<th>Phone</th>
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<tr>
<td>NSW Refugee Health Service</td>
<td>8778 0770</td>
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<tr>
<td>STARTTS</td>
<td>9794 1900</td>
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<tr>
<td>Transcultural Mental Health Centre</td>
<td>9840 3800</td>
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<tr>
<td>Men’s Health Info &amp; Resource Centre</td>
<td>4570 1713</td>
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<tr>
<td>Multicultural HIV/AIDS Hep C Service</td>
<td>9515 5030</td>
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<tr>
<td>Multicultural Problem Gambling Service</td>
<td>1800 856 800</td>
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Recommended Reading
