


Solace studies in therapeutic work with refugees and asylum- seekers

No. 5

Working with interpreters:
a scoping study

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Editor's note: This is the fifth in a series of working papers reflecting on aspects of therapeutic work with refugees and asylum seekers undertaken by therapists and others working for SOLACE, a regional organisation based in Leeds (www.solace-uk.org.uk), and others associated with it. The views expressed here are those of the author. Anyone working in this area is welcome to submit drafts of short papers (3000-5000 words) to the series editor at Gary.Craig@galtres8.co.uk. This article originally appeared in Concept journal, to which we are grateful for permission to reproduce.



1. Introduction

This paper reports research carried out for the charity Solace in regard to the possibility of creating a shared interpreter database and training scheme in Leeds to be used for work with refugees and asylum seekers (RAS). The report outlines, and critiques, methods used in this geographical research, discuss results and key themes that emerged in the analysis, and discuss the significance of the findings in relation to existing literature. The final section reflects upon the research limitations and the implications for future project development. The Annexes provide more detailed analysis of the data collected, originally presented to the Solace Trustee Board. However, first, the framework for the introduction is guided by a short explanation of the work Solace does and why this research is important for their organisation. It then provides the project outline, key contributions and set of aims it hopes to achieve.

1.1 Solace and Interpreting

Solace is a Leeds based charity that offers psychotherapy to RAS suffering from mental health issues. The therapy and advocacy support they provide is aimed at survivors of persecution, “many of whom have been traumatized by torture, rape and the death or disappearance of loved one” (Solace, 2019) prior to or during their migration to the UK. A large proportion of RAS suffer from mental health problems, yet the provision of care is limited, hence why the work Solace carries out is so important. Solace requires interpreters in their sessions to effectively support clients with limited English, however, as an organisation, they struggle to recruit well-trained and qualified interpreters.

1.2 Project Outline

The work-placement project involved vital and stimulating research into the possibility of rationalising interpreter availability in Leeds and storing their information in a shared database, hopefully to be managed collaboratively by Solace and another organisation. The project soon evolved into researching the additional need for a shared interpreter training platform which organisations could utilise. This research is may be of great importance to organisations which work with vulnerable RAS populations.

1.2.1. Specific Contributions

The research aimed to solve the problem of recruiting and retaining reliable and well-trained interpreters using geographical methods. Semi-structured telephone and face-to-face interviews proved an effective approach in working towards a solution. After being given the project outline and initial guidance, the 100-hour placement was carried out independently. Contact during the placement was in the form of email updates regarding: research progression; preliminary findings; next step advice; a report for Solace (see Appendix 8.2); and a presentation to the Solace Trustee board. The work was jointly supervised by Solace and Leeds University geography department.

1.3. Aims

The aims below illustrate the scope of this research by outlining the practical steps needed to explore the issue; these project aims take into consideration time allocated and resources needed. They are escalating as the first is very achievable, the second needs greater intellectual analysis and applied ability, and the third is more challenging but any progress towards it would be regarded as an accomplishment.

1. To identify organisations in Leeds that work with RAS and use interpreters. Create questions for telephone interviews to understand their use of interpreters, major language proficiencies, rates of pay and further in-depth questions.
2. Critically to analyse telephone and face-to-face interview data. Examine results and write up a report for Solace, discuss preliminary conclusions and potential leads.
3. To rationalise the availability of interpreters. Create a system that holds key information regarding interpreters, draw upon other successful models, and work towards a collaborative sharing platform model.

2. Literature Review

The following section provides the academic context for this research. It demonstrates how themes in the literature such as interpreter training, RAS mental health and vicarious trauma are applicable to geography.

2.1. Training

Interpreting has historically been disregarded as a respected form of employment (Tribe and Morrissey, 2004) despite arguably being the most vital component in interactions with vulnerable RAS populations (Holmgren et al., 2003) with limited English. Improving training programme standards will help in recognising their work as a “strong and respected profession” (Mikkelson, 1996, no page) and could potentially help attract more people to become interpreters. In terms of actual training, many scholars have emphasised the need for robust programmes which provide suitable information and certification to interpreters (Mikkelson, 1996; Tribe and Lane, 2009; Tribe and Thompson, 2009; Ozolins, 2010). Completion of a training programme with supporting certification would aid interpreters in gaining employment contracts in the future. The effectiveness of interpreting is improved by using qualified interpreters (Kirmayer et al. 2011) who work efficiently to “bridge language and cultural gaps between the service provider and the client” (Engstrom et al. 2010: 56). It has been identified however, that training is meaningless without ongoing supervision, practical and emotional support from organisations for interpreters working with RAS clients (Tribe and Morrissey 2004; Guhan and Liebling-Kalifani 2011; Barrington and Shakespeare-Finch 2013).

2.2. Interpreter Competencies

Interpreters facilitate the transfer of language between the client and the service provider. Bridging the language gap between these two parties (Paone and Malott 2008) requires skills that extend past the necessity of being fluent in both languages (Tribe and Morrissey 2004). Competencies include the ability to interpret in therapeutic settings and having an understanding of ethics and confidentiality (Ibid.).

Both Björn (2005) and Rosenberg et al. (2008) emphasise the importance of accuracy in communicating the meaning of spoken language effectively, hence the need for skilled and impartial interpreters. Yet, as highlighted by Resera et al. cultural differences may mean that to successfully transmit information “the cultural and emotional context of the words” (2015: 203) must be expressed.

2.2.1. Mental Health Interpreters

In the mental health sector, it is imperative that interpreters have an in-depth knowledge of medical terminology, an awareness of the cultural background of the client, and the “ability to convey accurately the meaning of the emotions expressed” (Tribe and Morrissey 2004:136). It is widely acknowledged that mental health settings require greater participation from the interpreter over a substantial time period, and to have strong, positive relationships with their clients (Miller et al. 2005; Tribe and Thompson 2009; Resera et al. 2015; Gallagher et al. 2017).

2.2.2. Refugee and Asylum Seeker Mental Health

There are strong scientific links between experiencing traumatic events prior to or during migration and RAS suffering from poor mental health (Carswell et al. 2011; Kirmayer et al. 2011; Resera et al. 2015). Together with a language barrier, this could potentially “exacerbate feelings related to displacement” (Tribe and Morrissey 2004: 129) and have negative knock-on effects on their mental health. Academics have identified that communication barriers can be extremely disempowering for RAS and that interpreters offer substantial support by acting as a language transmitter, this in turn empowers RAS (Tribe and Keefe 2009; Tribe and Thompson 2011).

2.3. Vicarious Trauma

Mental health interpreters are exposed to distressing information on a regular basis (Tribe and Morrissey 2004; Engstrom et al. 2010) and having to interpret the client’s words in the first person can be traumatic for even the most experienced interpreters (Resera et al. 2015). Vicarious trauma can have huge emotional impacts (Miller et al. 2005) on interpreters, therefore appropriate measures need to be implemented to “ensure that the risks of trauma work are minimised” (Barrington and Shakespeare-Finch 2013:103).

Guhan and Liebling-Kalifani (2011) have commendably recognised the need to raise awareness of vicarious trauma and guarantee individual support for interpreters.

2.3.1. Refugees as Interpreters

Scholars have raised concerns regarding the use of interpreters in mental health from similar cultural and ethnic background to the client (Tribe and Morrissey 2004; Pugh and Vetere 2009), however little academic work has investigated this (Holmgren et al. 2003). Mental health interpreters who are RAS themselves may have experienced similar traumas to their clients (Björn 2005; Miller et al. 2005; Engstrom et al. 2010; Green et al. 2012): this increases the intensity therapy settings for the interpreter.

3. Methodology

This section discusses key phases of research and various methods used including semi-structured telephone and face-to-face interviews. Independent preliminary online research was conducted to identify organisations in Leeds which work with RAS and may use interpreters: this resulted in a sample population of 25 organisations, reproduced in a table below.

3.1. Sampling and Semi-Structured Interviews

The early stages of this study involved a significant amount of time, energy and resources spent making initial contact with the 25 organisations. This involved sending out emails (see Appendix 8.1) with key information regarding the project and requesting to arrange a short qualitative telephone interview. Having a clear and informative email as the first-contact is critical in receiving high response rates (Carr and Worth 2001) and this was successfully achieved. Follow-up emails were sent after two weeks of no contact resulting in 16 successful telephone interviews; those who did not respond tended to be larger organisations (see Appendix 8.2). A list of questions (see Appendix 8.3) guided the telephone interviews. This semi-structured style is popular in qualitative research as it allows for flexible answers whilst ensuring key themes and topics are covered (Clifford et al. 2016). Open-ended and simple questions at the beginning of interviews make the interviewee feel at ease, meaning a connection can successfully be built (Dillman 1978; Marcus and Crane 1986; Lavrakas 1987).

3.2. Telephone Interviews

Telephone interviews have often been discounted in qualitative research (Block and Erskine 2012), however they can be very effective depending on “safety considerations... available budgets and time constraints” (Irvine 2011: 215). In addition to the original 16 telephone interviews, another was conducted with ‘Voices in Refuge’ which has created a successful interpreter-sharing platform and training model in Nottingham; this interview was not structured. Academics who use qualitative interview methods in health settings agree that telephone interviews provide comparably high quality and valuable results to face-to-face interviews (Carr 2001; Sweet 2002; Novick 2008; Irvine 2011; Block and Erskine 2012). Telephone interviews were a suitable method to use in this project as time restraints meant it would have been unachievable to visit each organisation and talk face-to-face. Consequently, a larger body of data was collected as telephone interviews required less time to execute and were more cost effective than face-to-face (Sweet 2002; Block and Erskine 2012).

3.3. Face-To-Face Interviews

Two non-structured interviews were carried out in person. The first was with Azam Imani who recruits and trains interpreters for Solace, and the second with Michael Bould at an interpreter training session set up by himself for the Worker’s Educational Association (WEA). Both interviews proved fruitful, the face-to-face contact allowing development of a rapport which was aided by visual cues that are absent in telephone interviews (Robson 1993; Sweet 2002; Novick 2008) and which facilitated the development of a possible ongoing project.

4. Results

This section reviews the results from 17 telephone and two face-to-face interviews. The qualitative interviews were coded into themes; below is a selection of dominant themes that arose. It is not exhaustive of the entire data set but covers key issues for discussion.

4.1. Settings That Require Interpreters

The question 'what settings are interpreters used in?' (see Appendix 8.2) was answered during the telephone interview stage.

Over half the organisations which answered use interpreters in one-to-one consultation settings. From speaking to organisations, it is clear that there needs to be a high degree of professionalism and respect of confidentiality in consultations as the client often expresses sensitive and private issues:

“Clients need to feel safe to ensure they will open up, organisations like us endeavour to create a non-threatening environment without confidentiality issues.”

In addition to consultations, the next highest use of interpreters is in drop-in sessions, these are informal and deal with less confidential issues:

“The main setting is our drop-in service ... interpreters offer advice to clients around housing, benefits, food vouchers and things like that, they also give referrals to other agencies if needed.”

4.2 Need for a Shared Database and Training Platform

Across both telephone and face-to-face interviews there was general agreement of the need for a shared database of interpreter information and complementary training scheme. Various smaller organisations stated how they found it difficult to recruit and retain new interpreters at short notice:

“We find it extremely challenging finding interpreters for new languages, I think a shared database would make the process much easier.”

However, one worker had reservations about a shared platform:

“This is very idealistic and purely a dream. It would require a full team of people who are very experienced in interpreting to create this sharing platform as a full-time job.”

4.3 Training of Interpreters

Specific interpreter training was not discussed in telephone interviews as it was not on the question template, however after meeting the WEA and Voices in Refuge it was apparent that Leeds needs an effective training platform as organisations often struggle to recruit appropriately qualified interpreters:

“Being an interpreter you are going into very sensitive situations, it is important that they know what tone to conduct themselves in, hence it is vital to have professional training.”

The training platform that Voices in Refuge have created produces skilled interpreters who can offer the best possible support to both service provider and client. Their holistic programme offers high quality training:

“It creates a space where interpreters can come together and gain similar training across various areas, this boosts their chances of future employment.”

4.4. Mental Health Interpreting and Vicarious Trauma

The majority of organisations spoken to do not specialise in mental health issues for RAS, however as Solace works in this sector it was important to envisage how mental health interpreting would fit into a shared model. One worker experienced in training interpreters said:

“Mental health interpreter training should be strictly supervised, observed and regulated. Mental health services are very different as you need a close relationship with the client, so I don’t think you could just pick a name from a shared database, there would have to be a separate model for mental health.”

Qualitative results show that mental health interpreting is emotionally challenging: during both face-to-face interviews the need to support interpreters to reduce vicarious trauma was emphasised:

“They share the trauma with the client, and it can often trigger painful memories for them, so it is really important they are well-trained, experienced and have a supportive network around them.”

5. Discussion

Findings from this study demonstrate that the use of interpreters for work with RAS clients, especially in the field of mental health, is becoming increasingly important to study academically.

The results from this research reflect the difficulties organisations in Leeds experience when recruiting and retaining well-qualified and highly skilled interpreters due to “scheduling difficulties and interpreter unavailability” (Engstrom et al. 2010: 57). As outlined in the report (see Appendix 8.2) linguistic diversity in Leeds is increasing. Supporting this is a Migration Yorkshire report that states the city will subsequently have to improve interpreting services as demand significantly increases (Jamroz and Tyler 2016) particularly as Leeds hosts part of the Syrian Resettlement Programme. The important work that charities like Solace do with RAS in mental health would not be achievable without the use of interpreters (Miller et al. 2005; Ozolins 2010). This further identifies the necessity to create a shared database which rationalises interpreter availability and supports the provision of more inclusive interpreting services.

In the results, it was acknowledged that training is of great importance as “working as an interpreter frequently requires skills, knowledge and training beyond the ability to speak two languages fluently” (Tribe and Morrissey 2004: 135). Data from face-to-face interviews supports and adds to existing academic literature that emphasises the importance of robust interpreter training structures in providing a high-quality service and future employment prospects (Rosenberg et al. 2008; Tribe and Lane 2009; Engstrom et al. 2010). Findings illustrate that if Solace could mirror Nottingham’s Voices in Refuge, the professional level of interpreters it would produce could improve the integration of RAS clients within Leeds. Data collected reinforces concepts discussed in academia that an ‘untrained’ interpreter who lacks effective communication skills might unintentionally damage an already precarious situation, such as a therapy session (Tribe and Morrissey 2004). Organisations which stated they source interpreters internally (see Appendix 8.2) may put clients at risk if staff are not qualified or have limited interpreting practice. This discovery is reinforced academically as significant concerns regarding ethics and confidentiality have been raised when organisations decide to use untrained interpreters (Paone and Malott 2008; Bischoff and Hudelson 2010). However, it is important to recognise that charities with restricted budgets often use untrained interpreters as it is the only available option (see Appendix 8.2).

This insight adds weight to the argument that a training platform for organisations from which to recruit interpreters is critically needed, but perhaps at a subsidised cost to smaller organisations. Reflecting upon the face-to-face meetings with the WEA and Solace, it is evident that mental health interpreting is very different to other forms of interpretation. It requires a lot more input from the interpreter to provide “important cultural and contextual information which may have a significant bearing on the psychological issue being discussed” (Tribe and Lane 2009: 235). Findings from these face-to-face interviews align with extensive scholarly work regarding key characteristics of mental health interpreting which make this profession so different. These mainly include the ability to forge trusting relationships within therapy settings that facilitate positive relationships between the service provider, the client and the interpreter (Mirdal et al. 2012; Resera et al. 2015; Gallagher et al. 2017). This study provides an insight into how emotionally laborious mental health work is for the interpreter, hence the need for extensive training within the field of psycho-therapy to help support them (Tribe and Thompson 2009).

It has been widely recognised in the literature and partly in this research project that trauma work can have negative impacts on interpreters (Holmgren et al. 2003; Tribe and Morrissey 2004; Engstrom et al. 2010; Guhan and Liebling-Kalifani 2011). Thus, if a training platform was implemented to increase the volume and quality of interpreters, it would have to incorporate a substantial support network for interpreters to utilise to “ensure that the risks of trauma work are minimised” (Barrington and Shakespeare-Finch 2013: 103).

The results of the telephone and face-to-face interviews imply that organisations are interested in the creation of a shared interpreter database and training platform, however comparatively little attention has been paid to the feasibility of this project in terms of funding available to Leeds. In conclusion, the results of this research indicate some important factors to consider should this hypothetical sharing model materialise in the future.

6. Concluding comments

6.1 Implications of the Research

This project involved significant groundwork in its initial stages as this is the first research development Solace had taken regarding interest in a shared interpreter database and training programme. The study is extremely important as RAS populations across the UK are increasing rapidly, including in areas with little previous experience of inward migration of any kind, hence the urgent need to provide trained and qualified interpreters to support them in their resettlement. It has raised awareness of how mental health interpreting is different from other forms of the profession and this needs to be held firmly in view in future developments.

6.3. Conclusions

]Following a successful presentation to the Solace Board of Trustees of the findings of this study, it was felt that the next logical step would be to carry out quantitative and further qualitative research into the feasibility of implementation, looking specifically at funding availability and cooperation of organisations at management level. As presented in Section 1.3 above, the first two aims were successfully achieved and the third partially achieved as the successful Voices in Refuge model was analysed and interest in working collaboratively was shown by some organisations.

The research findings are supported by a wealth of literature regarding the importance of trained interpreters, mental health of RAS and emotional support interpreters require. To conclude, this project has revealed to Solace the need for a shared interpreter platform and that the creation of such a model will require collective action led by an experienced team dedicated to improving interpreting services. It is intended that this will be explored further to try to create the conditions for such a platform to come into being.

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8. Appendices

8.1. Email

Dear (name of the organisation/name of the contact),

I am a third-year social geography student at the University of Leeds. As part of my course I am working on a research project with Solace - a Leeds-based charity which provides therapy and advocacy support for refugees and asylum seekers. I am working with Professor Gary Craig, a trustee for Solace, and my university supervisor Andy Turner.

Solace requires the use of interpreters in a lot of their therapy sessions, they are a vital part of the process and seen as an equivalent partner to the therapist. It seems to them that the current system in place for booking and organising interpreters is not as effective as it could be, interpreters are not always available and there are difficulties in matching clients and interpreters together. The aim of my research project is to discover if it is possible to rationalise the availability of interpreters. The goal is to create a system possibly managed by one or more organisations, where, for example, an online booking system would hold information for each interpreter regarding their language proficiencies, availability and rate of pay. I believe this would be beneficial for interpreters by giving them reliable and consistent work and would also support the functioning of your organisation.

I would love to organise a 15-minute telephone call with your organisation to gather some information for my research project. This would include questions regarding your organisation's use of interpreters, major ethnic groups and languages which you work with, and rates of pay for the interpreters or if they are volunteers.

If you have any concerns or questions regarding my project please feel free to ask myself or Professor Craig, his email is gary.craig@garyc.demon.co.uk

I look forward to your response and to arranging a time to speak.

Kind regards
Amelia Crowther

8.2. Solace Report on interview analysis

During the initial research stage of this project I found a total of 25 organisations in Leeds which may use interpreters in their work with refugees and asylum seekers. Following this I sent out emails to all 25 organisations, I then followed up with telephone calls if I had received no response after two weeks. Here is a table outlining the organisations which I had successful telephone interviews with:

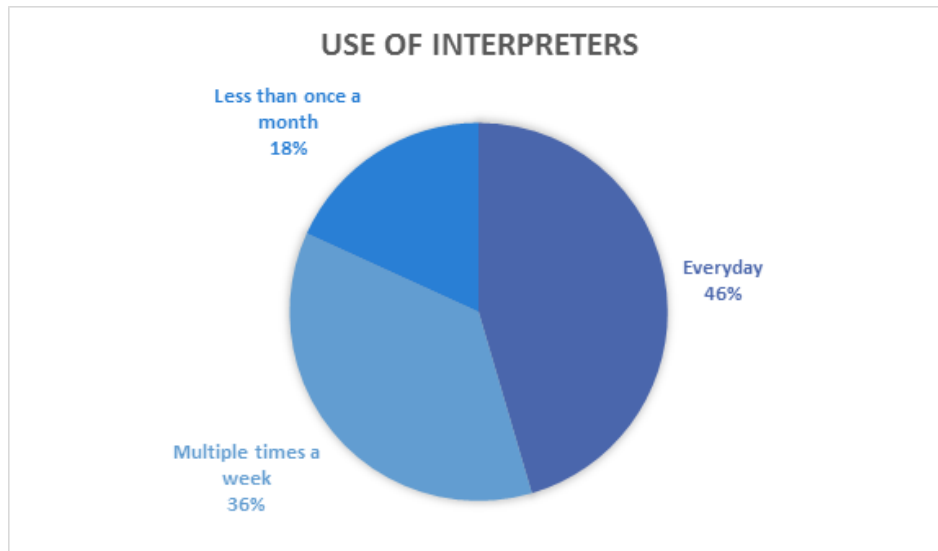
ORGANISATION	OUTCOME	USE INTERPRETERS
LASSN	Interview	Yes
Leeds Refugee Forum	Interview	Yes
Manuel Bravo Project	Interview	Yes
PAFRAS	Interview	Yes
Together Women Project	Interview	No
Bevan Healthcare York Street Practice	Interview	Yes
RETAS	Interview	Yes
Abigail Housing	Interview	Yes
Leeds City of Sanctuary	Interview	No
Meeting Point Leeds	Interview	No
Palm Cove Society	Interview	Yes
The Children's Society	Interview	Yes
Migrant Access Project Plus	Interview	No
Learning English in Leeds	Interview	No
Skyline	Interview	Yes
Refugee Council	Interview	Yes
St Vincent's	No response	n/a
Advonet	No response	n/a
Leeds City Council	No response	n/a
Immigration Legal Advice Centre	No response	n/a
Leeds Community Healthcare NHS Trust	No ethical approval	n/a
Leeds Combined Court Centre	No response	n/a
West Yorkshire Police	No response	n/a
British Red Cross	No response	n/a
Leeds Unity Centre	No response	n/a

Does their organisation work with interpreters?

From the 16 organisations which I interviewed a total of 11 confirmed that they use interpreters in their work, and five organisations said that they did not use interpreters. I have outlined in the above table which organisations use interpreters and which do not by writing either 'YES' or 'NO' next to their interview.

How often do they use them?

This bar chart outlines how often the 11 organisations which use interpreters require their services. In most of the interviews the organisations noted that their frequency of use really depended varying on the type of clients they have.



What settings are interpreters used in?

The way in which these organisations use interpreters really varies, however, key themes often emerged. Many used interpreters for consultations with refugee and asylum seeker clients in one-on-one scenarios. They explained a lot of these sessions have to be carried out in a private setting to respect the confidentiality of the client. This is the case for example in the Manuel Bravo Project as they provide legal assistance for those who cannot get legal aid. Many of the issues they discuss need to be interpreted accurately if witness statements or legal claims are being made, hence why their interpreters need to be well-qualified in all the legal terminology. Confidentiality is also key in Skyline who offer advice and support to those suffering from HIV. Their interpreters need to be well trained in medical terms during initial assessments with clients. Palm Cove Society use interpreters in consultations with new clients, it is extremely important that their interpreters are sensitive to the issues and trauma many of their clients have experienced during their journey to the UK. RETAS, The Children's Society 'connecting opportunities' service and Bevan Healthcare York Street Practice said they use interpreters in one-on-one consultation sessions as well. The remaining organisations informed me that they use interpreters in a variety of settings, such as the Refugee Council who need interpreters for telephone, face-to-face appointments and drop-in services. LASSN in their 'English at Home' service need interpreters for the initial assessment which takes place over a telephone call, they then help in matching teachers and refugee pupils together. The Leeds Refugee Forum need interpreters for a whole range of services including: their volunteer and community interpreting teams; advocacy sessions; job centre work; and social justice programmes around the city.

PAFRAS are very similar in this as they use interpreters to: provide support for housing and payments; helping refugees to access food vouchers; health support; case workers; and in-depth advice and referrals to other organisations. Equally Abigail Housing carry out similar work just in the housing sector, the interpreters provide help by informing refugees of their rights to claim benefits, organising housing license agreements and general form filling.

Do the organisations recruit interpreters through an agency?

Of the 11 organisations which use interpreters in their work, six explicitly stated that they do not use an agency to find them. LASSN shares a database of interpreters with Solace and the Refugee Council, or they contact the volunteer manager for both Manuel Bravo Project and PAFRAS who have their own database. The Refugee Council, Abigail Housing and RETAS in their interviews said they have their own bank of interpreters which they regularly use, or they source languages internally. Organisations such as the Leeds Refugee Forum do not find the need to use an agency as their organisation is more community-led, so interpreters from the community offer their services or they have people from outside the community wanting to be a volunteer interpreter. However, recruiting and retaining interpreters is still a huge struggle. Of the five organisations which use an agency to recruit interpreters there is a large range which they use. As well as having their own database the Manuel Bravo Project in certain cases use 'Language Expertise Agency' if necessary. Bevan Healthcare York Street Practice is supplied with volunteer and paid interpreters from 'Language Line' or the 'Clinical Commissioning Group' (CCG). The Palm Cove Society use 'The Big Word', however they noted this was an expensive service to use. The Children's Society recruit interpreters for their connecting opportunities programme from the Leeds City Council, however for their 'HEARTS' service, social care arranges an interpreter. In the interview they spoke about that fact that they have had a lot of issues with social care often supplying the wrong languages for interpreters. Finally, Skyline also use the Leeds City Council as they have a good database of well-qualified interpreters, however to save funds they often recruit community interpreters from their prevention team. Overall there is a real mix with the majority choosing not to use an agency, and those that do use an agency often still source internally through staff who speak many languages or community interpreters found through their projects.

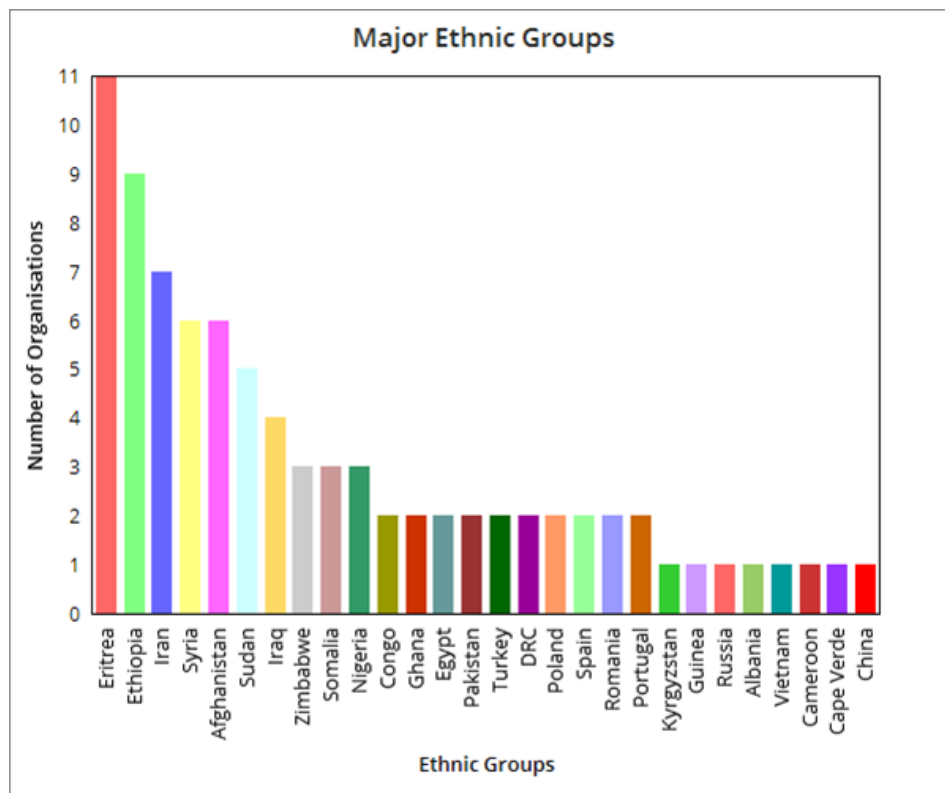
Reasons for not using interpreters

Of the five organisations who do not use interpreters in their work with refugees and asylum seekers they mostly gave similar answers as to why they do not require their services.

The Together Women Project, Migrant Access Project Plus and Learning English in Leeds all said that their clients must be proficient in at least level 1 English to use their services. Hence the people they work with do not tend to have language issues and can support themselves without the services an interpreter offers. The Leeds City of Sanctuary informed me that currently they do not have any active programmes in Leeds that require interpreting services as they have not found a need to focus in that area. Finally, Meeting Point Leeds interestingly gave a multitude of reasons for not needing interpreters, these included: having volunteers who speak a range of languages; that they could never afford the services that Big Word offer; and as their work is non-confidential clients do not mind using their friends to translate for them as they are not dealing with sensitive issues.

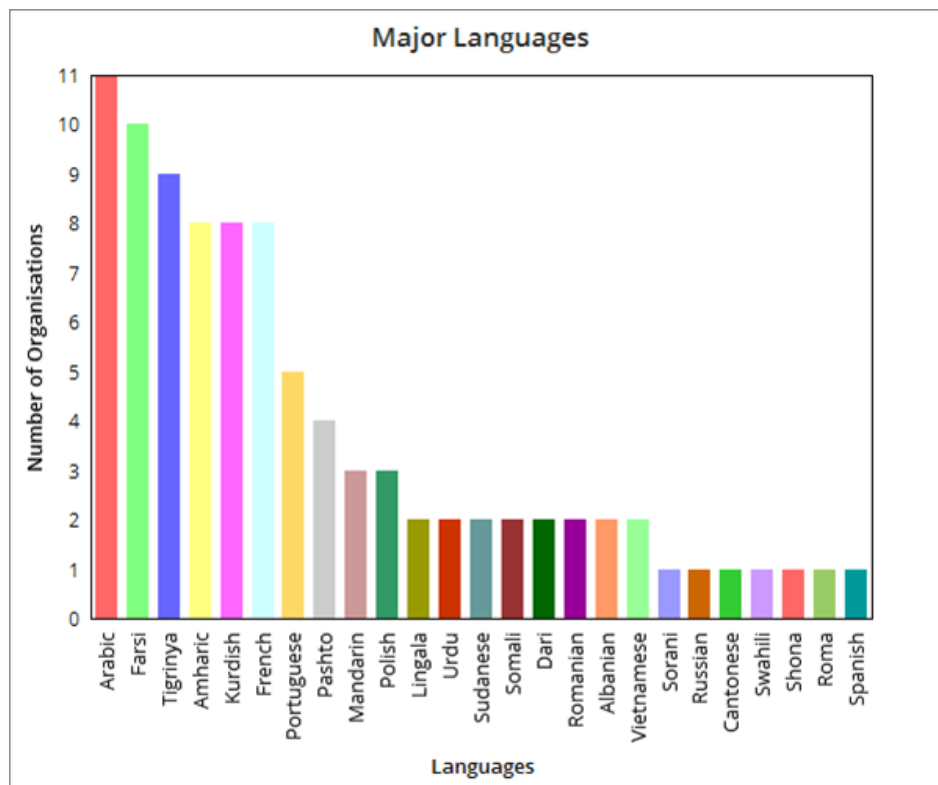
Major Ethnic Groups:

Out of the 16 successful interviews, 13 organisations gave me information regarding the ethnic mix of clients they have. There are clear visible trends in terms of where most of the asylum seekers and refugees are originally from. Each count on the 'Y axis' refers to the number of organisations who in the interview said that they work with clients from that country.



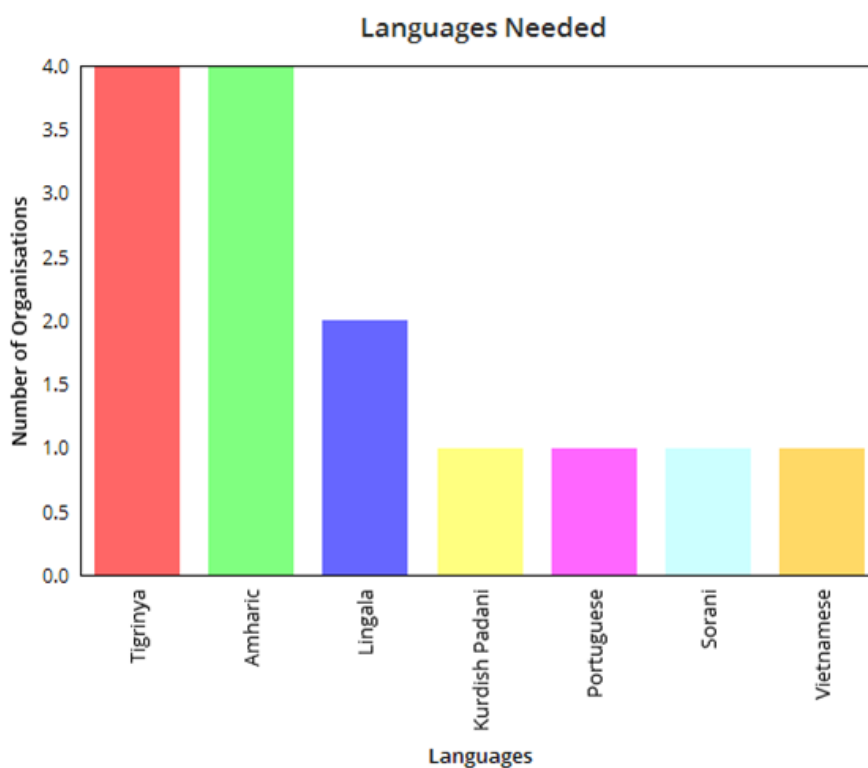
Major Languages:

The following question asked what were the major language proficiencies that were needed for interpreters in their organisations. As before, out of the 16 organisations interviewed 13 gave me information regarding the main languages their clients speak. The range is huge, which shows how diverse the refugee and asylum seeker population is in Leeds. Each count on the 'Y axis' refers to the number of organisations which said that they work with clients who speak that language. Arabic is spoken in Syria, Sudan and Iraq which are the fourth, sixth and seventh largest ethnic groups in these organisations, hence why that is the most popular language as there are large numbers of refugees and asylum seekers from those countries. Similarly, Farsi is the spoken language of people from Iran and Afghanistan which are the third and fifth most prominent ethnic groups. Amharic is the most spoken language in Ethiopia, closely followed by Tigrinya, and Tigrinya is the most widely spoken language in Eritrea. This correlation can clearly be seen in both charts. Eritrea won independence and separated from Ethiopia and was officially named the 'State of Eritrea' in 1997. Many people who live in Eritrea still speak Amharic as they live in an area which historically used to be part of Ethiopia. The home office sees Ethiopia as a safe country, compared to Eritrea which they recognise as unstable. This is a complex situation and means that asylum seekers from Eritrea who seek protection are often rejected if they speak Amharic as the home office assumes they are from Ethiopia which is deemed safe. This refusal to recognise the cross-country language borders means that a lot of Eritrean Amharic speakers are at risk of their claims not being accepted.



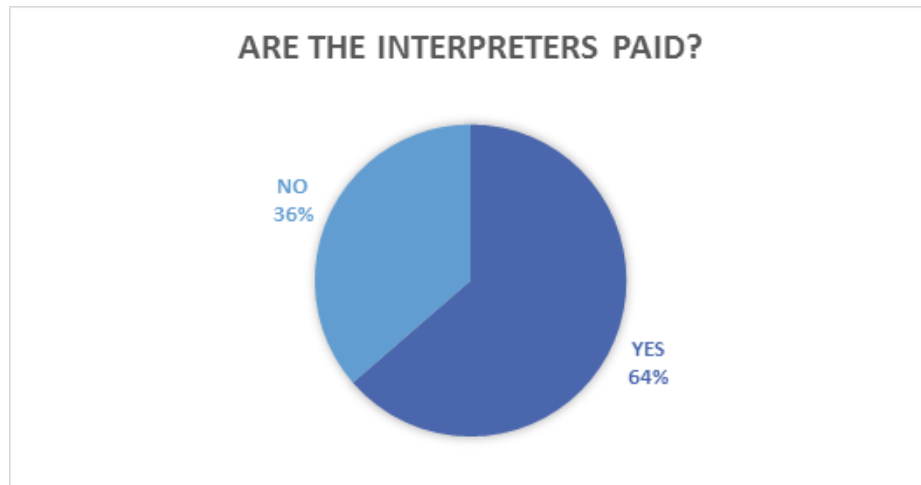
Languages needed that organisations cannot access at present:

This question was answered by fewer organisations as many simply stated they have access to all the languages they currently need. However, they recognised this could change according to the make-up of their clients which is influenced by emerging global conflicts that produce refugees and asylum seekers from different countries. Of the 16 interviews carried out, seven organisations said that at present they required the language skills of different interpreters. Clearly the languages in demand at present are Tigrinya and Amharic as they have the largest population present out of all the major ethnic groups in Leeds.



Do the organisations pay for interpreters?

The pie chart below illustrates from the data set of 11 organisations that use interpreters, the proportion which pay the interpreters compared to the proportion which are volunteers.



Leeds Refugee Forum, PAFRAS, RETAS and Abigail Housing all use volunteer interpreters in their work and do not pay them. All four organisations said that as charities, their budget simply does not stretch far enough to be able to pay interpreters. Due to these limited funds they are more likely to internally source people and utilise members of staff who are able to speak multiple languages. For those that do pay interpreters every answer given was completely different, however, every organisation that pays interpreters said that this includes their travel time to the job. Starting with LASSN, they pay interpreters £20 per hour, and noted that for legal reasons asylum seekers who wish to offer their services as interpreters are not allowed to be paid. The Manuel Bravo Project use an agency which charge for them, so could not be sure of the exact statistics. Similarly, Bevan Healthcare York Street Practice recruits their interpreters from the CCG so did not know how much they were paid. Palm Cove Society did not wish to say how much they paid them but ensure me it was in line with accredited police standards. The Children's Society pay £82 per hour and a half for their connecting opportunities service, yet as the HEARTS service is offered interpreters by social care, they did not directly deal with paying them. Skyline did not wish to say how much they paid interpreters but informed me that it was at the per hour rate from the Leeds City Council. Finally, the Refugee Council did not wish to reveal how much they pay interpreters. The responses to this question do not allow me to effectively analyse the rate of pay for interpreters but the reasons why charities do not pay interpreters are clearer.

Further detailed findings were collected from many organisations but these are not reproduced here.

Potential Leads

The volunteer manager for both Manuel Bravo Project and PAFRAS has conducted some of her own research as she also recognises the need for a shared interpreter database for organisations in Leeds to use. Contact has already been made between Emma and Solace in terms of a potential collaborative project. It could be interesting in future stages to develop ideas together for this scheme. Michael Bould works for The Workers' Educational Association (WEA) and is the Education Co-Ordinator for the interpreting courses in Leeds. He seemed very keen to learn more about this project and agreed that a shared database would offer huge potential opportunities for people who undertake their interpreting courses in terms of future employment. I visited one of their level 2 interpreting course sessions soon to observe how the courses run, ask some questions of those taking part and to further discuss this research project with Michael. A successful model of what Solace is aiming to achieve is already in place in Nottingham called 'Voices in Refuge' which is jointly run by Nottingham and Nottingham Refugee Forum. They have their own qualified team of interpreters who are well trained in working with refugees and asylum seekers. Additionally, they note that their interpreters are also available to other organisations in Nottingham that need their services - this sharing platform is exactly what Leeds as a city needs. They started this programme as the city recognised they were spending increasing amounts of money each year on untrained and low paid telephone interpreters which is not sustainable. The training programme they have created has multiple benefits including: interpreters being fairly paid and treated as skilled workers; organisations being given a more consistent standard of interpreting; and a more professional experience. The interpreters can be used in one-to-one consultations, legal and medical work, conferences and workshops, all of which are used in organisations in Leeds. In addition, they have fully trained interpreters in a wide range of languages, many of which are needed in Leeds such as: Amharic, French, Shona, Swahili, Tigrinya, Albanian, Portuguese, Arabic, Farsi, Kurdish, Mandarin and Urdu. Their interpreting services are non-profit, and any profit made goes to funding further training and employment for interpreters. I believe this is a sustainable and effective model for training and sharing interpreters around the city which provides job security for the interpreters, a reliable service for the organisations, and professional support for the clients. The next logical step is to perhaps meet with the board of trustees at Solace to gauge in which direction is best to move forwards.

8.3. Interview schedule

1. Name of the organisation:

2. Name and position of contact:

3. Email of contact:

4. Address of organisation:

5. Use of interpreters:}

a) Does your organisation use interpreters

for work with refugees and asylum-seekers?

YES

NO

b) If YES, how often do you use them?

Every day

Multiple times a week

Once a week

Couple of times a month

Once a month

Less than once a month

or more

c) If YES, for how many hours in the above selected time frame are they used?

d) If YES, why does your organisation use interpreters and in what settings?

e) If YES, does your organisation use an agency to find them, if so which agency?

f) If NO, is there any particular reason why your organisation does not use interpreters?

g) If NO, do you think your organisation would benefit from the use of interpreters and why/why not?

6. What major ethnic/language groups does your organisation work with?

7. What are the major language proficiencies needed for the interpreters you use?

8. Are there languages you would like to have available but cannot access at present?

9. Rates of pay:

a) Does your organisation pay your interpreters? YES NO

b) If NO, is there any reason why your organisation does not pay interpreters?

c) If YES, how much does your organisation pay them?

d) If YES, is this by a recognised national salaried/hourly pay scale? YES
NO

i) If NO, how does your organisation pay them?

Fixed retainer:

Other:

e) Do you pay for the travel time of the interpreters? YES

10. Are there other organisations you think we could benefit from talking to?

