

ST. CATHERINE  
UNIVERSITY  
CATIE Center

with Doug Bowen-Bailey  
April 12, 2015



**NCIEC**

National Consortium of Interpreter Education Centers

Kapi'olani Community College ASL/English Interpreter Education Program  
HIDOE Comprehensive Student Support Services Section,  
Hawai'i Registry of Interpreters for the Deaf  
The Disability and Communication Access Board,

# Introductions

- Name
- Work location
- What is your biggest joy and biggest challenge of interpreting in medical settings?



# Changing Paradigms

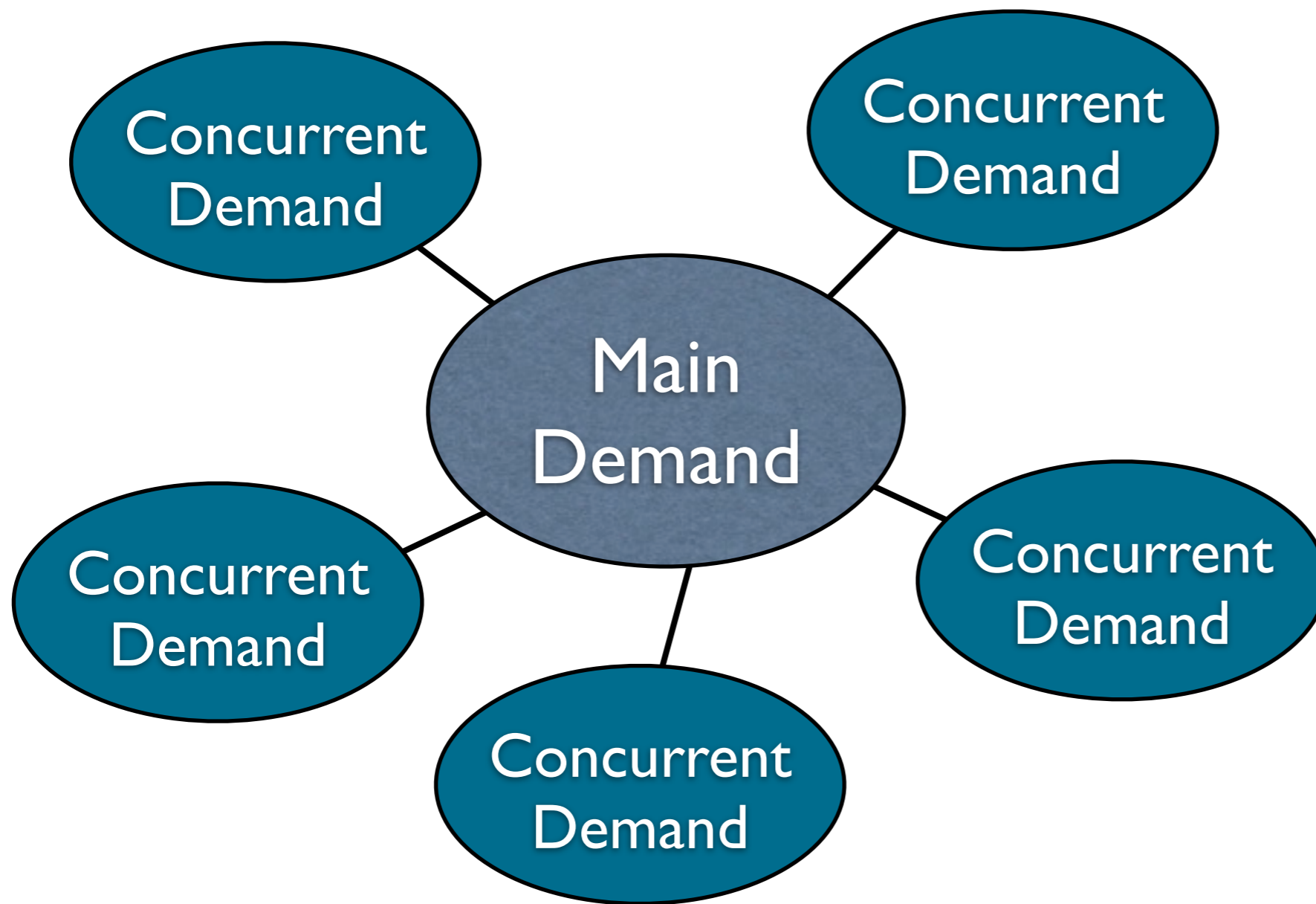
Focus on  
Interpreter's Actions



Focus on  
Consequences  
for Participants

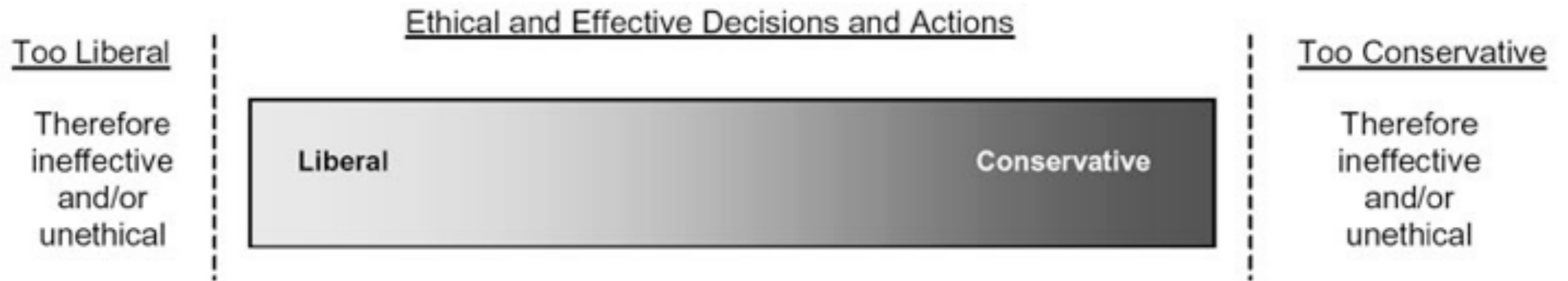
*Witter-Merithew, Nicodemus, & Johnson*

# Identify Constellation of Demands



*Environmental*  
*Interpersonal*  
*Paralingual*  
*Intrapersonal*

# Continuum of Ethical Behavior



*Graphic and concept developed by  
Robyn Dean & Robert Pollard*

# Relational Autonomy

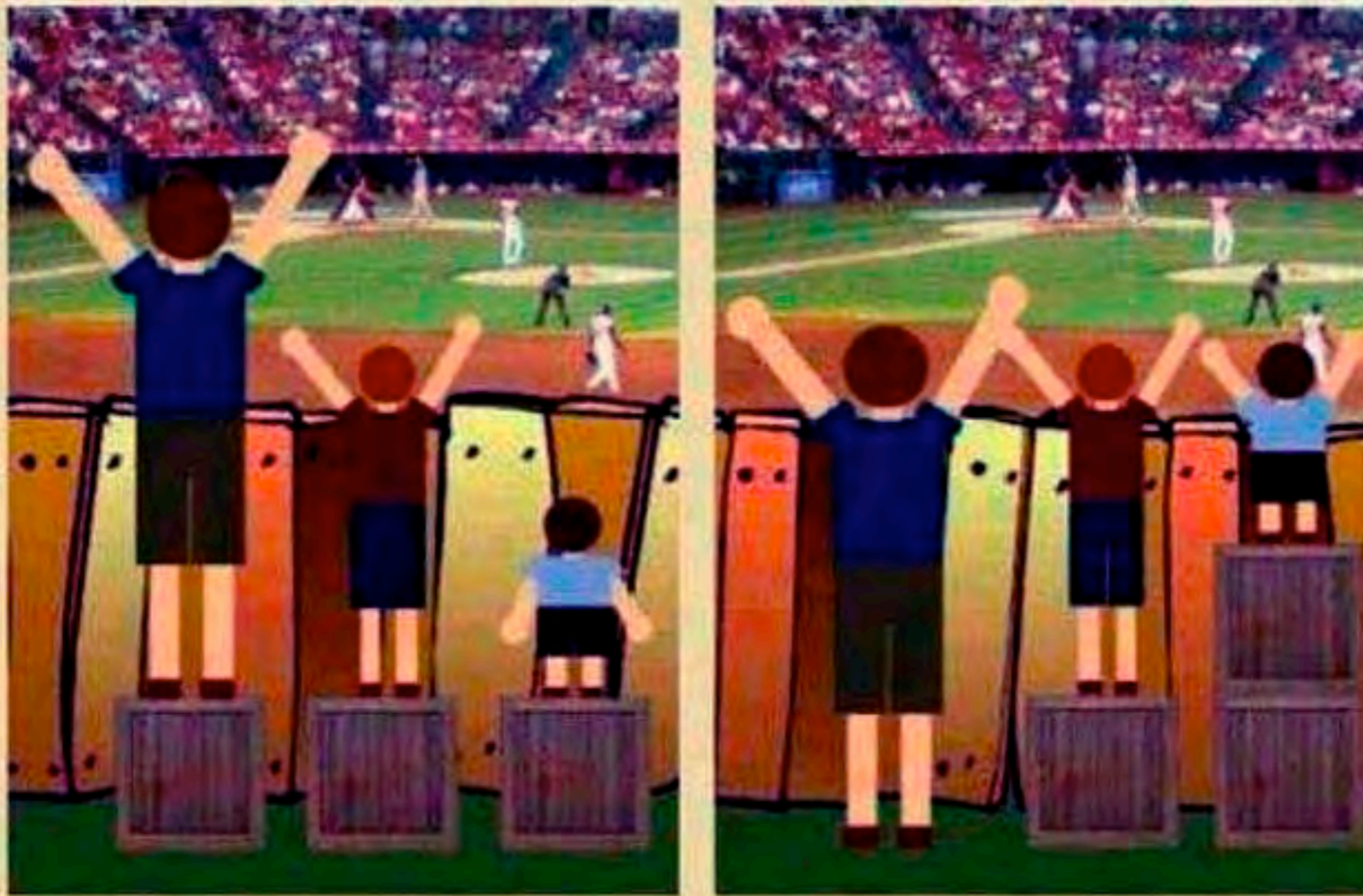


# Power Dynamics



# The Work of Justice

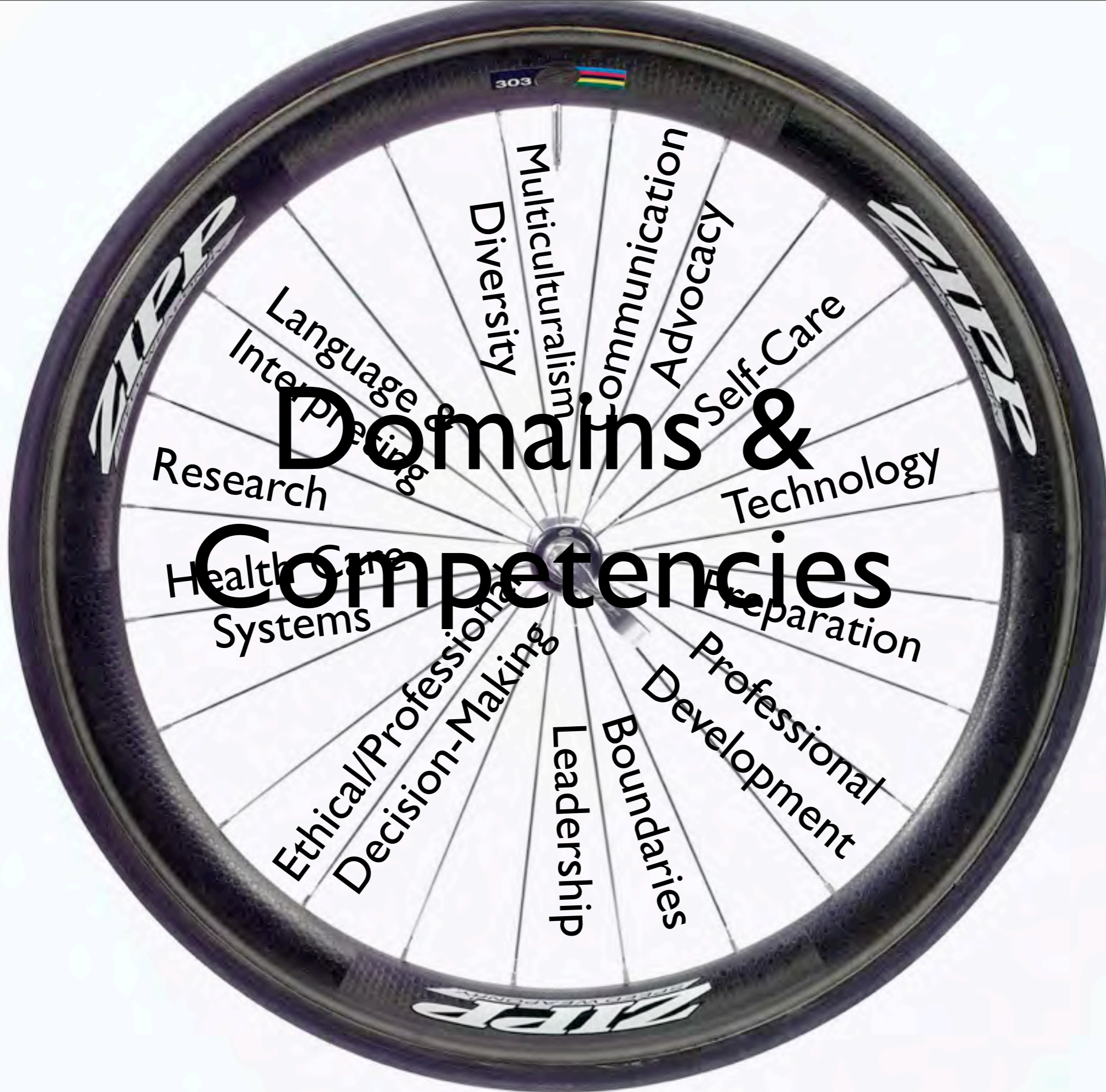
Equality doesn't mean Justice



This is Equality

This is Justice





# Domains & Competencies

You have interpreted for a 15-year-old Deaf girl in various settings, and she recently confided in you that she was pregnant, and hadn't told her mother yet because, "my mom will kill me! She doesn't even know I've had sex yet."

A few weeks later you are at the hospital where the girl is attending with her mother. She has been having back pain and she has been sent for an X-Ray. The technician asks the girl if there is any chance she might be pregnant. She glances up at her mother, then responds, "no, I'm not pregnant."

# Domains & Competencies

You interpret for a Deaf couple. The wife has pancreatic cancer. The doctor tells them that they have exhausted all possibilities, and no other treatment is suggested at this point. He tells them to go home, and enjoy what time remains with their family. The couple leaves looking very happy and smiling. You have a strong sense that they did not understand that this was actually bad news.

# Domains & Competencies

You are interpreting for a deaf patient who has the following symptoms:

- Experiencing terrible heartburn after eating.
- Used to get it every once in awhile, especially if ate spicy foods, but in the last month it is happening at least 3 times a week.
- Using Tums but now they don't seem to be helping.
- Is frustrated that can't enjoy eating and worried about what is wrong.

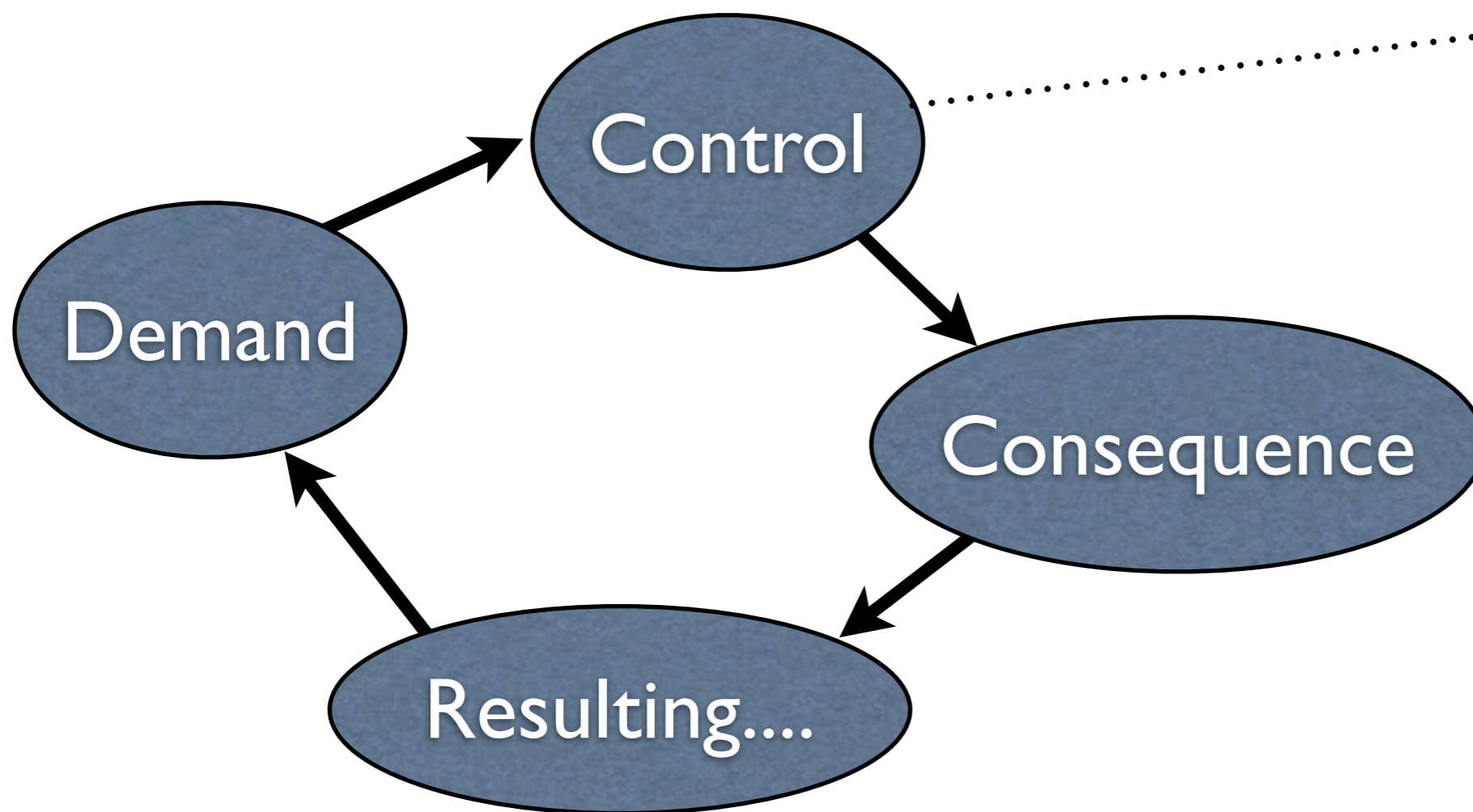
# Annotated Bibliography





- Dialogic Work Analysis

*Pre-Assignment*  
*During Assignment*  
*Post-Assignment*



# Learning from the Medical Profession



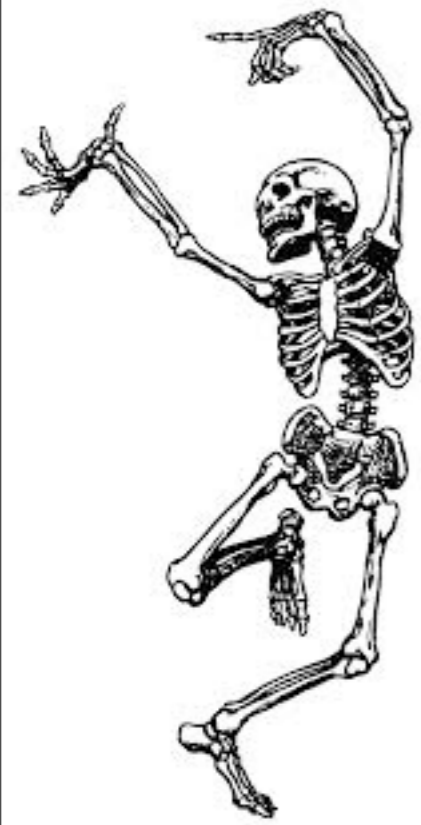


*It's my belief we developed language  
because of our deep inner need to complain.*

*~ Trudy*

The Search for Signs of Intelligent Life in the Universe





# Bare Bones of Reflective Practice

- What? (F) *Facts*
- So what? (Q) *Questions*
- Now what? (E) *Evaluation*
- from Anna Witter-Merithew “Breaking Down Silos through Reflective Practice” 2012 and Fink, 2013.

# The Case for Case Conferencing

- “Engaging in *reflective learning*, such as through supervision, are ways that many practice professionals pursue a career-long process of maintaining effective awareness and intrapersonal elements of their professional activities.” *Dean and Pollard (2011)*

# What Case Conferencing is?

- Focus on improvement of practice
- Focus on impact for people we work with
- An opportunity to develop “super-vision”
- Colleagues (peers) sharing questions & insights

# What Case Conferencing is Not?

- A gripe session
- A support group (though it can be a source of support)
- A time to seek answers from an expert

# Case Study Sample

A 70-year-old Deaf woman has had the same interpreter for many of her medical appointments at different clinics over several years. The interpreter has observed the woman's low tolerance for pain. Even as a blood pressure cuff tightens around the woman's arm, she reacts as if experiencing significant, intense pain. The interpreter remembers how, on several occasions at the lab for routine blood draws, the woman screamed loudly as the needle went in her arm. The lab staff always is startled and many staff run to respond thinking something terrible has happened.

At a new clinic, the doctor wants her to go to the lab for a blood draw after her appointment. The interpreter wonders if she should forewarn the staff about the woman's tendency to scream.

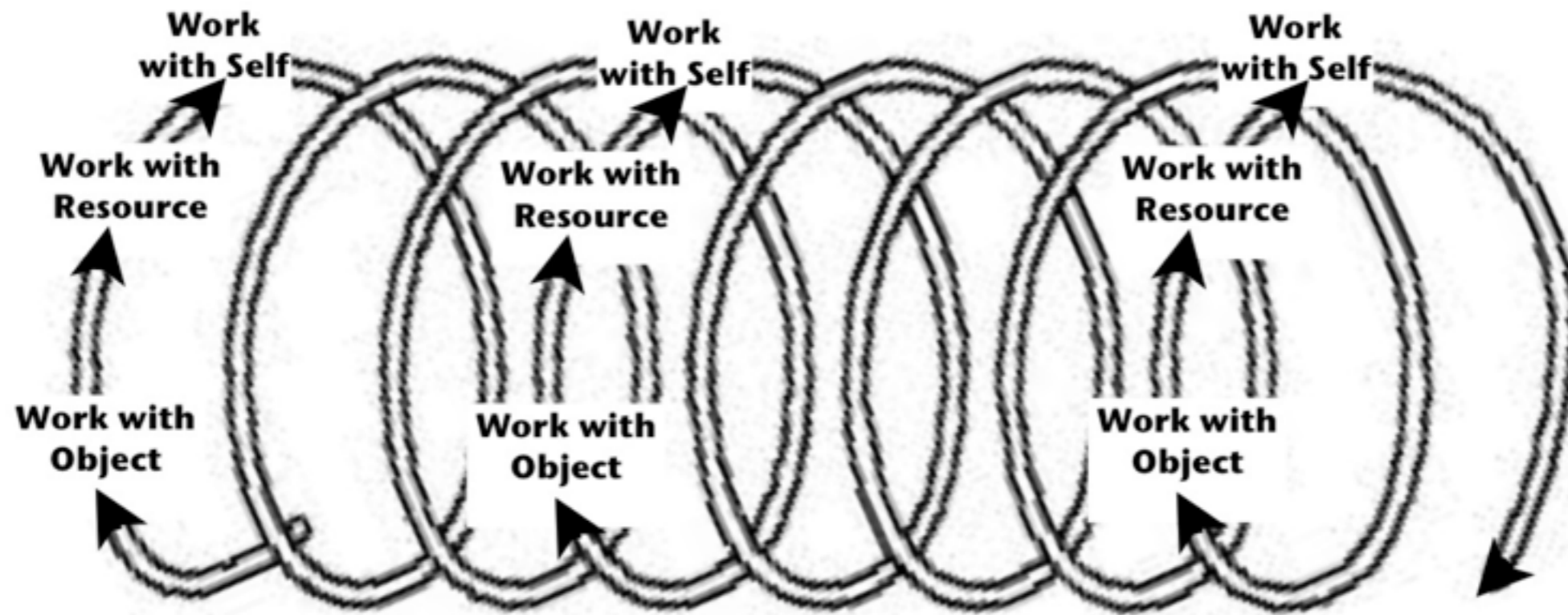
# A Vygotskyan Three Step Approach

**Step 1:** Work with object

**Step 2:** Work with resource

**Step 3:** Work with self

Cannot Do Tasks				Zone of Proximal Development				Can Do Tasks Independently			
<i>Too difficult even with support</i>				<i>Need more support</i>		<i>Need less support</i>		<i>Have internalized skills</i>			



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# Example: Body Language



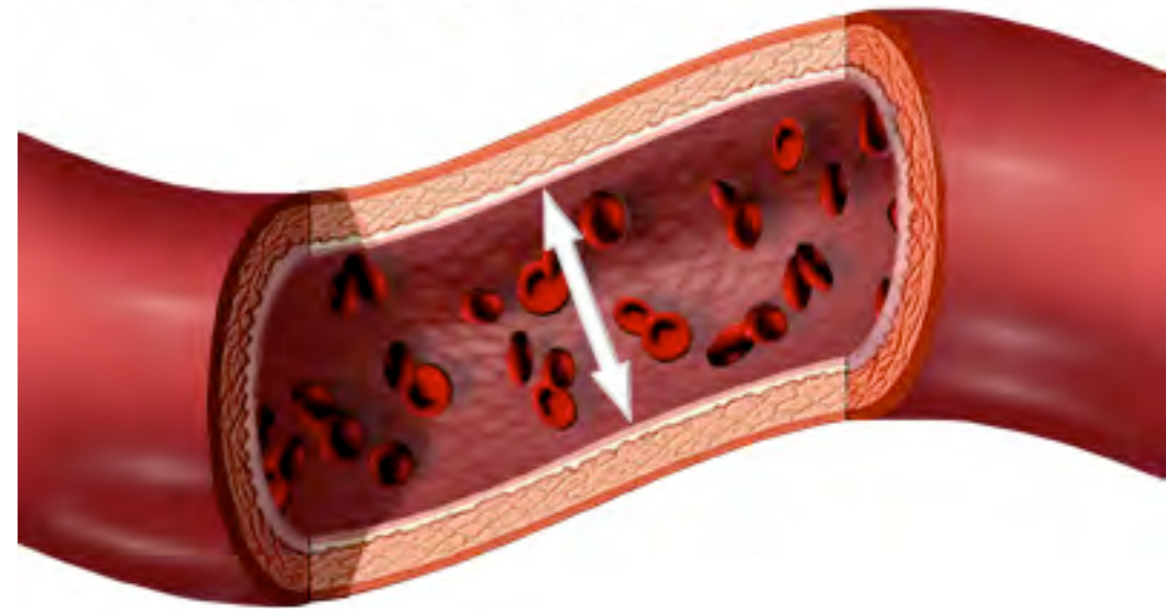


# Step 1: Work with Object

## Blood Pressure

Normal blood pressure is important for proper blood flow to the body's organs and tissues. The force of the blood on the walls of the arteries is called blood pressure. Blood pressure is measured both as the heart contracts, which is called systole, and as it relaxes, which is called diastole. Normal blood pressure is considered to be a systolic blood pressure of 115 millimeters of mercury a diastolic pressure of 70 millimeters of mercury (stated as "115 over 70"). If an individual were to have a consistent blood pressure reading of 140 over 90, he would be evaluated for having high blood pressure. If left untreated, high blood pressure can damage important organs, such as the brain and kidneys, as well as lead to a stroke.

Blood pressure is the measurement of force applied to artery walls



ADAM.

Blood pressure is the force applied against the walls of the arteries as the heart pumps blood through the body. The pressure is determined by the force and amount of blood pumped and the size and flexibility of the arteries.

# Step 2: Work with Resource

## Blood Pressure



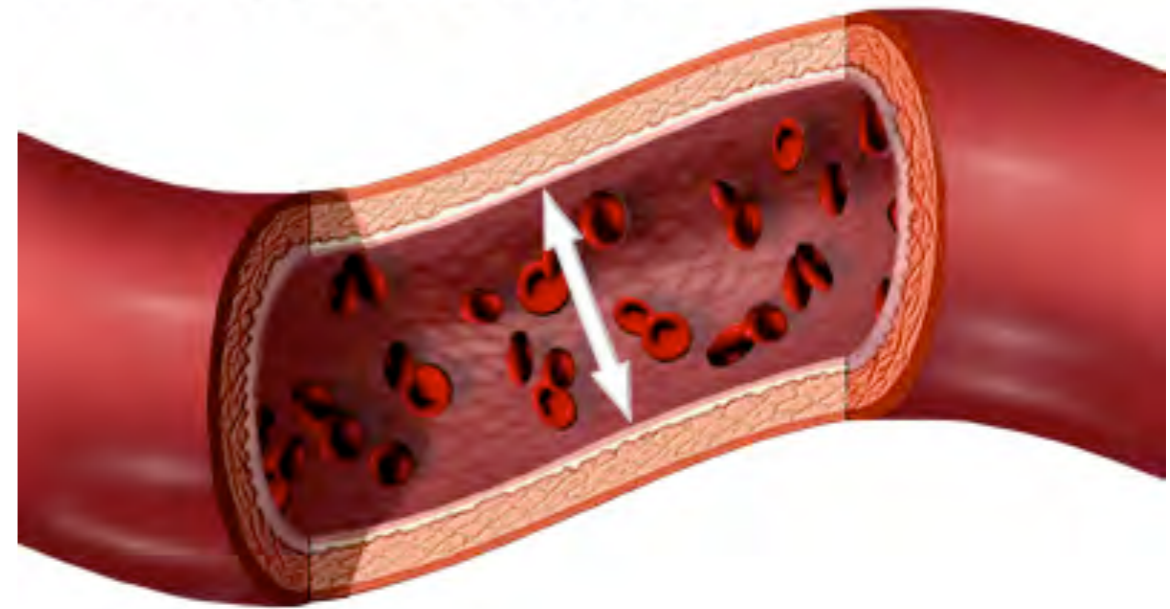
**Nigel Howard**

# Step 3: Work with Object

## Blood Pressure

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## **Self-Assessment from a Participant (6/16/13):**

*I have learned a lot during this course. I feel much more confident on my first attempts, and I found as I progressed through each section I made fewer and fewer changes for my second attempt... Overall improvement over the past few weeks has been fun to watch.*

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# What Brings You Here?



# English Summary by Doug Bowen-Bailey

I came today because I am concerned about my headaches. It's been going on for a while.

I started getting headaches about 3 or 4 years ago. Not sure if it has something to do with my sleep patterns being not so regular.

But I am concerned about getting them. I don't know if it is because I don't get enough sleep or I don't eat enough for breakfast and that causes them. I've been trying to eat breakfast everyday, but I still get headaches sometimes.

I've been taking Advil, but I don't want to take too much. I'd way rather figure out some way to get rid of the headaches without the Advil.

I have been drinking Gato— that's a hard word for me to spell today — I have been drinking Gatorade as was recommended to me by another doctor. The doctor was thinking I might have low blood sugar or something. It seemed to help a little bit, but I still get headaches.

I'm just wondering if this is normal or not. I'm pretty young, but could it mean I