



## Using Friends and Family to Interpret

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Many immigrants and refugees who are in the process of learning English make it a habit to bring along a friend or family member to help them communicate during business transactions, legal proceedings and health care or social service appointments. While this practice may seem sensible, it can be problematic from a healthcare organization's perspective.

- Research shows that “ad hoc” interpreters (such as friends, family and other well-meaning but untrained and unqualified “bilinguals”) make mistakes that could result in clinical consequences for the patient, increasing risk for the healthcare organization.<sup>1</sup>
- Family members are often emotionally invested in the care of their loved one and may omit or change the message in order to protect the patient.
- Some topics discussed throughout the care of a patient may seem embarrassing or even culturally taboo. This can put both the patient and the “family interpreter” in a compromising position in which the patient may not be forthcoming with information relevant to their care.
- According to standard #6 of the Culturally and Linguistically Appropriate Services Standards, published by the US Department of Health and Human Services in 2001, “family and friends should not be used to provide interpretation services<sup>2</sup>” citing “malpractice [suits] related to significant injury and death when family members were involved in interpretations.”

Asking a family member to interpret, while easy and seemingly harmless, can compromise a patient's privacy and potentially put a healthcare organization at risk. Other methods— such as providing on-demand access to trained, qualified interpreters through a remote interpreting service or qualifying and training bilingual staff to interpret— are more effective solutions that are supported by guidance from the Federal government and the Joint Commission.

For more information, contact Pacific Interpreters at [info@pacificinterpreters.com](mailto:info@pacificinterpreters.com) or 800.324.8060.

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<sup>1</sup> Flores, G., Laws, M.B., Mayo, S.J., Zuckerman, B., Abreu, M., Medina, L., Hardt, E.J. (2003). Errors in medical interpretation and their potential clinical consequences in pediatric encounters. *Pediatrics*, 111(1): 6-14.

<sup>2</sup> National Standards on Culturally and Linguistically Appropriate Services (CLAS)  
<http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=15>