

Medical Interpreters and Burnout:

Preventing a Negative Outcome



By Kristin Gannett-Sánchez

Excruciating painful raw electricity shot up and down my spine. I had experienced back pain a good part of my life, but never anything like this. The diagnosis made by my chiropractor and confirmed by other doctors was a pinched nerve. Medication was prescribed to alleviate the pain, but this caused a different kind of nightmare. Steroids provoked super hyperactivity and gave me the assurance that I had the power to convince anyone of anything. Painkillers created a sense of anger, paranoia, orneriness, rigidity, and aggression that was completely counter to my easygoing personality. Epilepsy medication caused utter confusion and forgetfulness. It was a frightening experience. Meanwhile, the pain was agonizing.

How did I get to this point? At the time, I was working as a coordinator of health care interpreting services at a medical center in northern Iowa, and every summer I would cover for my interpreters when they went on vacation. Most of them were short-term or contract interpreters who were brought in as needed. They had no benefits and could take off when they chose. Since I was the one who established the interpreting services depart-

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ment, I took the responsibility to cover appointments very seriously; actually, too seriously. I went against the very advice that I gave to my interpreters: I skipped lunch or ate yogurt in my car and ran from appointment to appointment, literally short of breath. I also attempted to perform my regular duties while covering for everyone. My back would inevitably go out every summer, but the pinched nerve pushed me over the edge.

I was a medical interpreter with a severe case of burnout. I hit rock bottom and ended up having to leave a job I dearly loved, one that was closely tied to my identity. I was so shaken by this experience that I concluded interpreting was no longer feasible for me, even though I had studied and practiced interpreting passionately for over 10 years. The thought of experiencing that kind of

pain and the fear of having more adverse drug reactions kept me away from my field for some time.

Medical Interpreters and Stress

In general, working conditions are stressful for medical interpreters, since the job brings with it many responsibilities and high expectations. The quality of our interpreting and the information relayed during interactions with the patient and physician will ultimately affect the care a patient receives. There will also be situations where on-the-spot interpreting could mean the difference between life or death. Because of the ever-changing conditions to which we are exposed, we cannot afford to practice a “black box” model of interpreting. The black box model focuses on linguistic conversion of the message without taking into account ➡

cultural nuances and interventions. However, medical interpreters in this area are expected to act as cultural brokers. In the case of mental health interpreting, for example, interpreters are considered an integral part of a three-person alliance and as a therapy conduit.¹ As interpreters, we also witness many traumatic situations during our work, such as the effect of serious illness on families, heartbreaking stories during counseling sessions, and even death. The quantity and speed of interpreting sessions can be very intense, where we are literally running from one interpreting session to another. Combine these factors with the pressure to keep up to date with challenging medical terminology, and it is easy to see how stress can overtake even the most competent professional.

The effects of stress on interpreters can be very detrimental. When under stress, it becomes difficult to think clearly and concentrate, which can cause the following:

- Difficulty processing new information.
- Difficulty maintaining accuracy and completeness.
- More mistakes.
- Greater need for repetition.
- Greater likelihood of being affected by the emotions around us and of losing objectivity.²

All of these factors affect our ability to manage the flow of conversation during an interpreting session and can ultimately lead to burnout.

Defining Burnout

What is burnout? The coining of

this term and recognition of this phenomenon began in the U.S. in the 1970s in social services occupations such as in the medical profession, social work, the ministry, and especially in occupations where staff cuts were occurring.³ Today, burnout is recognized in a wide range of occupations. Also of note for today's high-paced professional are studies indicating that the risk of burnout is raised considerably if a person works over 40 hours per week.⁴

A recent study among university workers in Spain identified three different types of burnout.

- **Frenetic burnout** is characterized by people who are involved and ambitious but overload themselves. People who work over 40 hours per week are often included in this category.
- **Under-challenged burnout** occurs when employees are indifferent and bored.
- **Worn-out burnout** refers to feeling a lack of control and acknowledgement. These feelings tend to increase with advanced years on the job.⁵

As medical interpreters, I think we experience frenetic burnout most often since we tend to push ourselves too much. Medical interpreters would not usually be characterized as under-challenged or bored. Worn-out burnout might also occur when there is low morale and the interpreter has been on staff for a long time.

Recognizing Burnout

There are a number of symptoms of burnout that can be recognized before it is too late, including:

- Chronic fatigue.
- Sleeplessness and depression.
- Frequent headaches and gastrointestinal problems.
- Weight loss or gain.
- Shortness of breath.
- Cynicism, negativity, and irritability.
- Self-criticism for putting up with demands.
- Anger toward those who make demands.
- Feeling harassed or hounded.
- Feeling suspicious.
- Feeling helpless.
- Increased degree of risk taking.⁶

Departmental Strategies to Prevent Burnout

Improvements in our working conditions as medical interpreters and changes in departmental policies for staff interpreters can benefit interpreters immensely. For example, interpreters should be encouraged to take their lunch breaks no matter what their interpreting schedule is like. Interpreters should also be encouraged to drink enough water. If possible, team interpreting should be available upon request to alleviate excessive fatigue. Sharing the work between two interpreters will ensure consistent quality and reduce errors. If that is not possible, interpreters should have the protocols available to request breaks when necessary. Full-time interpreters should have limited

on-call hours. Interpreters also need to have some “down time” from straight interpreting hours; for example, the availability of administrative tasks such as answering the department phone or even working on translations. Employers also need a system for providing adequate interpreter training for new hires. For instance, classes for vocabulary development, or at the very least print and online resources, should be available to ensure a better understanding of medical procedures and conditions.

In addition, interpreters need a support system and mechanisms in place to process the various types of scenarios they will encounter. In a study of mental health interpreters, it was determined that a support system, specialized training in psychotherapy, and debriefing with therapists were effective strategies for interpreters to counteract the traumatic content they covered during sessions with refugees.⁷

Self-Evaluation and Follow-up Strategies to Prevent Burnout

Medical interpreters can use some of the basic techniques below to help relieve stress.

Ask Yourself Where the Stress Originates

- Know your strengths and weaknesses.
- Develop strategies to turn your weaknesses into strengths.
- Improve your skills on a continual basis.
- Recognize where stress makes itself known in your body.
- Increase your sense of security when interpreting.

Interpreters also need a support system and mechanisms in place to process the various types of scenarios they will encounter.

What can increase your sense of security on the job?

- Keep up with changes in the field in which you work.
- Read material in your source and target languages to keep your vocabulary up to date.
- Develop glossaries to share with colleagues.
- Attend training sessions regularly.
- Always arrive on time and dress professionally.
- Follow the codes of ethics of medical interpreters.⁸

Understand the Physical Signs of Stress

Are you aware of the situations that are most stressful to you? Below are some physical symptoms of stress of which you should be aware:

- Do you make tight fists?
- Does your mouth shut tight or does your jaw tense up?
- Do you hold your breath?
- Do you take shallow breaths and tire easily?
- Do you perspire when under stress?

- Where does stress make itself known in your body (e.g., neck, shoulders, throat and chest, lower back, or legs)?⁹

Start Practicing Healthy Habits

Once you start to answer the questions above, you will be in a better position to take steps to manage your stress. How? Interpreters need to take care of themselves while taking on the responsibilities of the workplace.

- Get enough exercise (e.g., stretching and toning exercises).
- Get enough sleep.
- Pay attention to your diet.
- Do not smoke.
- Foster healthy relationships and emotional support in your personal life, and get counseling if needed.
- Participate in enjoyable activities and hobbies outside of work.

One study of interpreters discovered that the three most popular methods for coping with stress were talking about work problems, increasing social relationships, and participating in sports and exercise.¹⁰

A Long Road to Recovery

As an interpreter coordinator who was overworked, I had neglected my health and paid a heavy price for ➡

it. Three and a half years later, I am finally returning to my chosen profession. It is a gift to me to have the confidence to do so. Also, due to a vigorous exercise program, my back is stronger than it has been in 15 years. If I travel extensively in the car or am on my feet all day—situations that normally would have caused muscle spasms—I have no back pain whatsoever. Once again I can proudly call myself an interpreter.

Notes

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