

# Teaching Interpreters About Self-Care

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## Abstract

**Personal factors as well as the nature of certain assignments may negatively impact interpreters and cause stress. The authors sought to examine the various stressors that affect interpreters. They argue that if interpreters are able to identify a potential stressor early on, they may be able to address it through self-care. In the worst-case scenario, ongoing and unaddressed negative impact may result in burnout, at which stage professional assistance will be required and there may be long-term consequences. The authors propose an approach aimed at helping interpreters recognize signs of being negatively impacted, as well as teaching them self-care techniques, so as to reduce the deleterious effects of the stressors they face.**

Keywords: interpreter self-care toolkit, negatively impacted, interpreter burnout, interpreter work stress

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In practice, interpreters may experience issues which have a negative impact on their emotional well-being, ranging from problems with boundary setting to transference or countertransference or trauma (cf. Lai, Heydon, & Mulayim, this volume). Some interpreters possess personality traits which make them more vulnerable to stressors. Bontempo and Napier (2011) uncovered the significance of emotional stability as a predictor of signed language interpreters' self-perceived competence. They suggest that interpreter education programs take their findings into account when selecting candidates. Bontempo and Malcolm (2012) stress the importance of preventing vicarious traumatization. Interpreter educators should look at preparing their students for possible stressors, so that students can engage in self-care practices which may help them handle the impact of possibly traumatizing experiences (Bontempo & Malcolm, 2012). Such experiences can come about in any setting. In this commentary we will review frequent stressors on interpreters and present an overview of the progression of the negative impact of such stressors. It will then suggest elements of self-care which can be included in both interpreter education or professional development programs.

## Stressors on Interpreters

Interpreting service administrators are no doubt aware of stressors impacting on interpreters. Discussions with managers of interpreting services in New Zealand revealed that interpreting staff are subject to a range of stressors, ranging from highly stressful, traumatic assignments to job insecurity, and most managers said that it was up to the interpreter to come and talk to them. Some interpreters are loath to admit to job stress for fear of being considered emotionally vulnerable and receiving fewer interpreting assignments as a result. Managers said they tended to notice signs of negative impact at the psychological level (refer to diagram in Figure 1) either because the interpreter appeared stressed or admitted to being stressed or because a third party had told the managers about particularly impactful interpreting assignments. However, an interpreter who is aware of potential stressors has already taken a step toward needed self-care.

### *Boundary setting*

Boundary setting may involve interpreters taking on too many interpreting assignments with too little time in between, or taking on assignments that are outside of their realm of expertise. Focus discussion group participants in a study by Crezee, Jülich, and Hayward (2013) stated that in a small country like New Zealand, there are very few staff interpreter jobs and most interpreters work as freelancers (Gilbert & McKee, 2013). Thus interpreters may take on assignments when they come up, with financial considerations outweighing considerations relating to work stress reduction.

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### *Work stress*

Work stress may involve assignments concerning refugee stories relating to particularly distressing levels of violence or torture. Such anecdotal information may prompt managers to talk to interpreters, offering them access to counselling or simply allowing them to debrief. In other instances, interpreters themselves may come in for debriefing. In one instance, an interpreter interpreted between a foreign visitor and the police, only to find that the police had completely changed their version of events in the court case that ensued. Obviously, he was unable to say anything due to the precept of impartiality in the interpreters' Code of Ethics (New Zealand Society of Translators and Interpreters [NZSTI], 2013), his confidence in the authorities was severely shaken and it left him feeling stressed. Fortunately, he was able to discuss the situation with the interpreting service manager to debrief.

The unpredictability of ongoing work and income is inherent in the freelance interpreter's work. There is much anecdotal evidence (Crezee, Jülich, & Hayward, 2013) demonstrating that interpreters occasionally breach the rules of ethical conduct for fear of missing out on work. Interpreters may book themselves in for difficult assignments that they know will be very stressful, for consecutive assignments without leaving time for (peak hour) travel, or for telephone interpreting calls without being in a solitary space, with background noise and movement impacting on their ability to focus. Stress can accumulate when the interpreter reflects on the errors that ensue. Addressing work stress requires accepting the nature of freelance work and finding a balance among income, quality of interpreting, and manageable levels of stress.

Crezee and colleagues (2013) found evidence that interpreters working in refugee settings in particular may be adversely impacted by the traumatic nature of certain assignments, experiencing direct trauma, vicarious traumatization, or traumatization when interpreters' own traumatic memories are reactivated. Seventy-six percent of participants in a survey on interpreting in refugee settings responded that they had felt negatively impacted to some degree by interpreting assignments. An interpreting service provider made the following comment:

Each of our hospitals has the same core list with a few minor variations [...] as some who have a refugee background choose not to cover the mental health areas, and not wanting to relive some of their own traumas in the process: the latter was more applicable to the African refugees (Somalia, Ethiopia) in the earlier days of their coming to NZ.

However, as stated before, settings do not completely predict the risk of interpreters being negatively impacted.

### *Variable stressors*

Additional stressors may involve the following:

- The interpreter's own situation (financial situation and both work and personal relationships)
- The interpreter's own life experiences and current mental and physical condition
- The interpreter's own level of resilience
- The interpreter's own level of psychological skill (self-efficacy, locus of control, explanatory style; Atkinson, 2012; Atkinson & Crezee, 2014)
- The nature of the interpreting assignment and whether this triggers adverse memories
- The interpreter's state of physical and mental health and wellbeing

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A number of authors propose that interpreter training programs include curriculum focusing on reducing anxiety or coping with particular personality traits. Schwenke (2012) found a positive association between “maladaptive perfectionism” (tending to be extremely self-critical and developing a negative attitude when things do not go according to plan; Rice & Stuart, 2010, Stolz & Ashby, 2007) and burnout and suggested that “instructors should be trained to identify individuals displaying maladaptive perfectionistic stress responses (...) and to refer them to appropriate stress reduction resources” (Schwenke, 2012, p. 78). Harvey (2003, 2012) offers advice as to how interpreters can deal with “potentially debilitating anger or pain” as a result of overempathizing with the client. He suggests interpreters try to view acutely painful situations with the interested gaze of an anthropological researcher, rather than through the lens of an empathetic interpreter, to avoid feelings of anger or hurt. Bontempo and Malcolm (2012) strongly recommend educating student interpreters about the risk of vicarious trauma in healthcare settings. Berthold and Fischman (2014) likewise propose curriculum components of this nature. However, the field lacks—but needs—reports of actual self-care programs in interpreter education.

Interpreter educators should discuss with their students the common stressors of the profession, alerting students as well as practicing interpreters of the need to identify and address the negative impact of such stressors at an early stage, to avoid potential initial impairment of physical (biological) health through to mental ill-health and impacted general functioning on the bio-psycho-social levels. The flow chart in Figure 1 illustrates the possible progression of symptoms and interventions.

For interpreters experiencing the first impact of stressors at the physical and mental levels, “intervention” takes the form of self-care at the first level (undertaking physical self-care) or second level (seeking professional help). Intervention at the level of tertiary care, involving medication or containment, is outside of the scope of this commentary.

The self-care approach we propose interpreters learn involves three steps:

1. Becoming aware of being negatively impacted, and choosing to take action, or not
2. Making a decision regarding what self-care action to take
3. Dealing with the consequences of either lack of awareness or not taking action at the various stages of being negatively impacted

Discussing with students potential stressors and suggestions for action at Step 2 will help interpreters maintain their mental, emotional, and physical health.

### *Time and workload management*

One of the key aspects of managing time is to not always be on-call. Interpreters need to mark out sufficient time for leisure, recreation, family time, and meals. Time differentiation is easier in some fields of interpreting than in others, however; those interpreting for emergency services are more likely to have erratic schedules, whereas those in the legal system tend to work only during normal working hours.

Interpreters can also limit workload and the number of stressful cases to ward off possible burnout, particularly when they take an active approach to ensuring recreation/family time. For example, an interpreter involved in a large number of court hearings involving child abuse or other forms of sexual violence may decide to ask court administrators to assign them to less stressful cases. Interpreters might also decide to specialize in several areas, so that they do not become reliant on a highly stressful specialization to make their living, and can switch to less stressful work when they become aware of approaching burnout.

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### *Rest and diet*

Mentioning the benefits of enough rest and a healthy diet might appear superfluous; however, busy people often fail to ensure that they meet these basic needs. Adrenaline and contextual psycho-physiological stimulation allow people to temporarily forget that they are hungry or tired. This may be beneficial in the short term, but cutting back on meals and sleep has long-term negative effects on physical and mental health. In addition, continually high levels of the stress hormone cortisol may impact on quality and duration of sleep. Some interpreters are more vulnerable to anxiety than others, as outlined in previous studies (Bontempo and Napier, 2011), and it can be very difficult for them to learn to take time out to rest and enjoy relaxed meals. Some reach a crisis point before taking action, or they may have to be coerced to do so by a health professional or concerned family member who sees signs of stress.

### *Exercise*

Regular exercise is a related area of benefit. It is particularly important given that interpreting tends to be a relatively sedentary job (although often not as much so as translation). The benefits of regular exercise hardly need to be mentioned, but the psychological benefits of exercise are not often discussed. Exposure to the natural environment, awareness of the physical body, and accompanying relaxation can help to offset mild to moderate levels of burnout and trauma.

Similarly, recreational activities and hobbies, which may or may not involve much physical movement, allow interpreters to rest and to focus on things that they enjoy. These may combine some of the benefits of regular exercise and rest, or they focus on activities which use a largely different set of emotional and psychological foci, allowing the interpreter's job persona to 'go offline'.

Interpreters who are migrants or refugees themselves may sometimes be inclined to invest more time at work, leading to an imbalance between life and work. The literature on stress reduction suggests that social life and family support are protective factors that may prevent a professional from getting caught in a vicious cycle of burnout.

### *Mindfulness*

Mindfulness can be taught and encouraged in interpreter education and ongoing professional development. The diagram in Figure 1 includes Bancroft's (2013) suggestion that an interpreter practice mindfulness when he or she is suddenly negatively impacted during an interpreting assignment and unable to take a break. *Mindfulness* is a humanistic approach based on the Buddhist principle of mindfulness and commonly refers to a form of contemplative practice used throughout the world for personal wellness (Kabat-Zinn, 2005). Feuerle (2013) and Bancroft (2013) facilitated special workshop sessions for interpreters at the 2013 InterpretAmerica Summit and the 2013 Critical Link 7 Conference respectively. Bancroft recommends that interpreters practice mindfulness by focusing on their breathing, on feeling the chair beneath them, and on getting the message across, no matter what the message entails, and focusing on doing the best they can for their client, thus taking the focus of their emotions away from themselves. By practicing mindfulness (Kabat-Zinn, 2005), interpreters can focus on being 'here now – in the present', as Bernay (2012) described in his study with beginning teachers. Participants noted that they perceived reductions in their stress and increased ability to cope with the needs of individual students as result of engaging in regular mindfulness practice, and they found it to be a significant element of their initial teacher education and professional development programs. The interventions Bernay (2012) describes could easily be included in interpreter education, to assist interpreters in achieving similarly increased resilience to stressors.

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### *Third-person interpreting*

Bancroft (2013) suggests that during traumatic interpreting assignments, interpreters switch from first-person to third-person interpreting, to allow them to linguistically and psychologically distance themselves from the trauma story for just a little while (cf. Bot, 2005).

### *Counselling and debriefing*

Within the New Zealand setting, interpreters often have access to counselling through the Employee Assistance Program (EAP) or through the organization they work for. Refugees As Survivors New Zealand (RASNZ) provides its interpreters with regular intervention. Refugee Trauma Recovery provides debriefing for interpreters when required, and Relationships Aotearoa has been contracted by Interpreting NZ to provide assistance to its interpreters when needed. There do not appear to be a great many studies reporting on the actual implementation of supervision and mentoring programs. Berthold and Fischman (2014) propose ongoing supervision and therapy for practicing interpreters. Bolduc (2012) reported on the positive experiences of working and novice interpreters who participated in a “Peer Mentoring Project” in Massachusetts. Kao & Craigie (2013) reported on a project involving 186 student interpreters in Taiwan, where social support proved to be beneficial to student interpreters experiencing anxiety. Some professional bodies actively engage in supporting novice interpreters, for example, the Sign Language Interpreter Association of New Zealand (SLIANZ) and the Australian Sign Language Interpreters’ Association (ASLIA).

Finally, supervision and communication with colleagues can be a good avenues for releasing stress. Professional associations may provide opportunities for these for interpreters to ‘talk shop’ with fellow professionals (within the limitations of the confidentiality clauses of their code of ethics), who will usually provide a sympathetic ear and give good advice. This informal debriefing can reduce or even prevent the onset of psychological distress and fatigue. In organizational settings, such as the United Nations, supervisors may monitor the interpreter’s well-being and provide psychological interventions if necessary.

## Conclusion and Recommendations

Interpreter training and programs and professional development must include education about the possible progression of the negative impact of common stressors. Interpreting students must first learn how to notice the signs of stress in themselves, which includes honestly assessing

- their own vulnerabilities (background and problem “triggers”)
- their own limitations and coping strategies
- their own symptoms versus their own functioning
- the system within which the interpreting job takes place

Educators should emphasize the importance of engaging in preventive self-care by focusing on:

- Good time management
- Rest and a balanced diet
- Regular exercise (outdoors, with friends, as per personal preference)
- Recreation (as per personal preference)
- Maintaining time for personal interests, and favourite leisure pursuits

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Interpreters need to create personal safety nets to fall back on when they start to feel negatively impacted. Students must be guided to make use of their own support systems (family, social support) and provisions such as Employee Assistance Programs (EAPs) and peer supervision.

Although using these techniques does not guarantee that interpreters will never need to seek professional psychological or medical help regarding serious work stress, practicing them will help interpreters to reduce both existing and potential future stress, to maintain their physical and mental health, and, perhaps most important, to increase enjoyment and satisfaction in their work, however challenging it may be.

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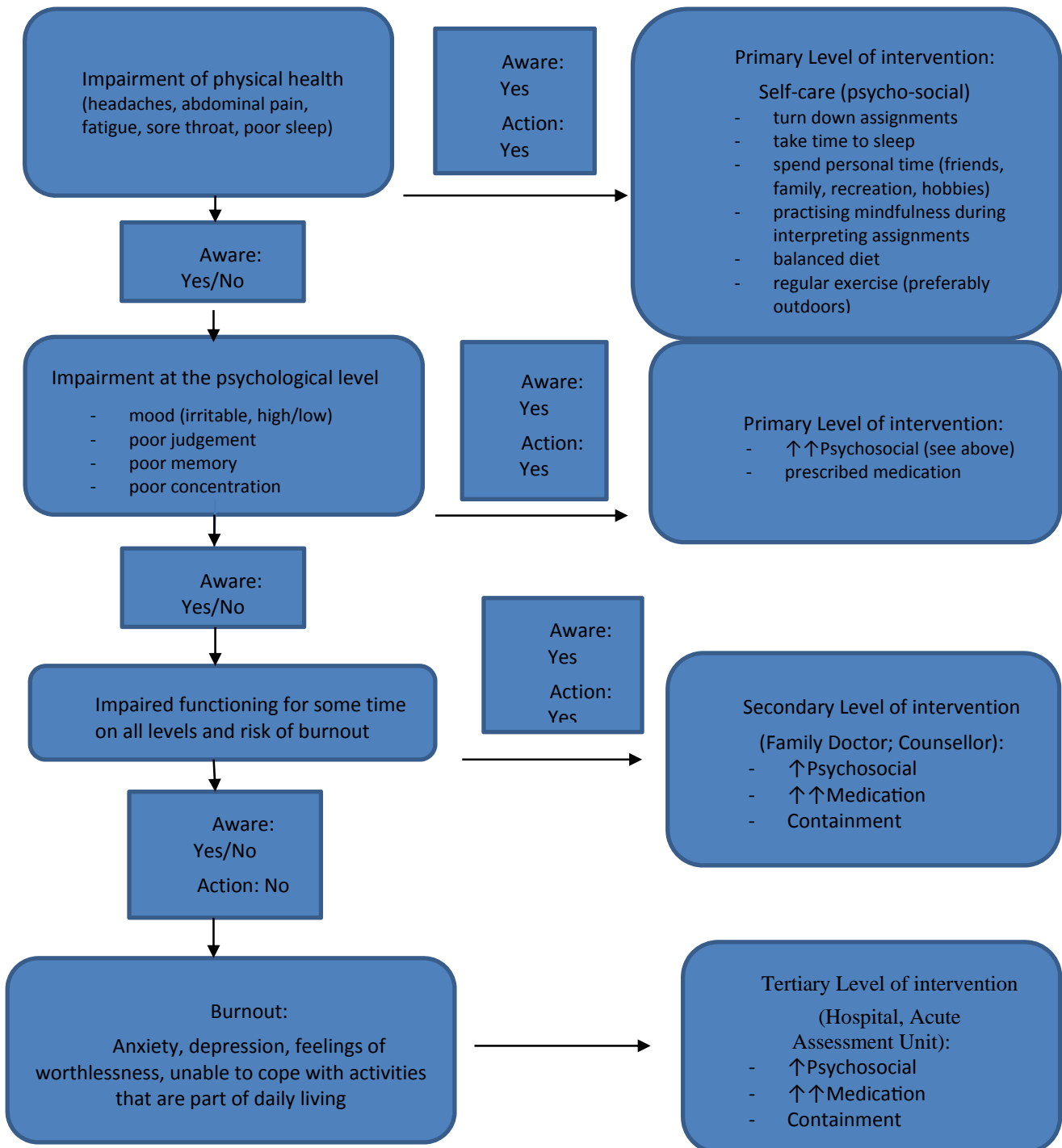
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Figure 1: Possible progression of symptoms in response to stressors with (self-) care options





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### References

- Atkinson, D.P. (2012). Freelance translator success and psychological skill: a study of translator competence with perspectives from work psychology. Unpublished doctoral thesis, University of Auckland.
- Atkinson, D. P. & Crezee, I. (2014). Improving psychological skill in trainee interpreters. *International Journal of Interpreter Education*, 6(1):3-18. ,
- Bancroft, M. A. (2013). My Heart is Falling -- Techniques for Interpreting Trauma. Workshop presented at the Critical Link 7 conference, Toronto.
- Bernay, R. (2012). Mindfulness and the beginning teacher (Doctoral thesis). AUT University, Auckland.
- Berthold, S. M., & Fischman, Y. (2014). Social Work with Trauma Survivors: Collaboration with Interpreters. *Social Work*, 59(2):103-10.
- Bolduc, D. (2012). Mentoring Working and Novice ASL/English Interpreters. Doctoral thesis. Arizona State University.
- Bontempo, K., & Napier, J. (2011). Evaluating emotional stability as a predictor of interpreter competence and aptitude for interpreting. *Interpreting*, 13(1), 85-105.
- Bontempo, K. and K. Malcolm (2012). An ounce of prevention is worth a pound of cure: Education interpreters about the risk of vicarious trauma in healthcare settings. In K. Malcolm & L. Swabey (Eds). *In our hands: Educating healthcare interpreters* (p. 105-130). Washington D.C.: Gallaudet University Press.
- Bot, H. (2005). *Dialogue interpreting in mental health*. Amsterdam & New York: Rodopi.
- Crezee, I., Jülich, S. & Hayward, M. (2013). Issues for interpreters and professionals working in refugee settings. *Journal of Applied Linguistics and Professional Practice*, 8(3), 253-273.
- Feuerle, L. (2013). Vicarious Trauma and Interpreter "Invisibility": Addressing Interpreter Self Care in Diverse Settings. Workshop presented at the InterpretAmerica Summit, Reston, VA.
- Gilbert, J., & McKee, R. (2013). NZSL Interpreter Employment Survey Report: November 2013. Auckland: Sign Language Interpreters Association of New Zealand. Retrieved from:<http://www.slianz.org.nz/uploads/official%20docs%20and%20forms/SLIANZ%20NZSL%20Interpreter%20Employment%20Survey%20Report%202013.pdf>
- Kabat-Zinn, J. (2005). *Wherever You Go, There You Are: Mindfulness Meditation in Everyday Life*. New York, NY: Hyperion.
- Kao, P. C., & Craigie, P. (2013). Evaluating student interpreters' stress and coping strategies. *Social Behavior and Personality: an international journal*, 41(6), 1035-1043.

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- Lai, M., Heydon, G. & Mulayim, S. (this volume). Vicarious trauma for interpreters. *International Journal of Interpreter Education*, 7(1) 3-21.
- Harvey, M. A. (2003). Shielding yourself from the perils of empathy: the case of sign language interpreters. *Journal of deaf studies and deaf education*, 8(2), 207-213.
- NZSTI. (2013). NZSTI Code of Ethics and Code of Conduct. New Zealand Society of Translators and Interpreters. Retrieved from [http://www.nzsti.org/assets/uploads/files/nzsti\\_code\\_of\\_ethics\\_and\\_code\\_of\\_conduct\\_may\\_2013.pdf](http://www.nzsti.org/assets/uploads/files/nzsti_code_of_ethics_and_code_of_conduct_may_2013.pdf)
- Rice, K. G., & Stuart, J. (2010). Differentiating adaptive and maladaptive perfectionism on the MMPI-2 and MIPS revised. *Journal of Personality Assessment*, 92(2). doi:10.1080/00223890903510407
- Schwenke, T. J. (2012). *The Relationships Between Perfectionism, Stress, Coping Resources, and Burnout Among Sign-Language Interpreters* (Dissertation). Atlanta, GA.
- Stoltz, K., & Ashby, J. S. (2007). Perfectionism and lifestyle: Personality differences among adaptive perfectionists, maladaptive perfectionists, and nonperfectionists. *Journal of Individual Psychology*, 63(4). Retrieved from <http://www.utexas.edu/utpress/journals/jip.html>