



INTERNATIONAL MEDICAL
INTERPRETERS ASSOCIATION
Leading the advancement of professional interpreters

JUNE 2008

The great value of a coalition is that people can join together and by their concerted effort accomplish feats that would be impossible for any individual organization to achieve.

Robert Fritz

Message from the President

The First meeting of the National Coalition on Healthcare Interpreting Certification took place in Chicago, IL on May 29-30. One of the most significant accomplishments of this group was that member organizations agreed to important principles that will guide this work. These principles will be shared with members as soon as they are published. National certification is finally becoming a reality due to the hard work and collaborative efforts of several organizations. Medical interpreters will benefit tremendously from the vision of this group.

The Purpose Statement of the National Coalition is:

The National Coalition on Healthcare Interpreter Certification is committed to developing a valid, credible, inclusive and transparent national process to ensure competency of healthcare interpreters and improve access and quality of care for patients with limited English proficiency in our culturally diverse communities.

To read more information please see the press release about this meeting, which lists the organizations at <http://www.imiaweb.org/uploads/home/1.pdf>

Here is the organizational description and what the IMIA can bring to the National Coalition:

The **International Medical Interpreters Association (IMIA)** is committed to the advancement of professional medical interpreters as the best practice to equitable and safe language access to health care for linguistically diverse patients. Founded in 1986, with over 1,500 members, across 10 countries, the IMIA is the oldest and largest medical interpreter association in the US. While

representing medical interpreters as the ultimate experts in medical interpreting, membership is open to non-practitioners interested in the profession and language access. Our bylaws charge the organization to establish & maintain a certification process for medical interpreters. For more information on IMIA, please see www.imiaweb.org.

IMIA brings to the National Coalition its proprietary assets to be utilized and adopted as partial foundation blocks for national certification: a testing instrument that has been piloted twice to date, the Medical Interpreter Assessment for Certification (MIAC), and a Candidate's Manual for Certification, in addition to a process for certification that includes pre-requisites, testing modules, and a registration process for certification. Also the IMIA would like to see a commitment from the Coalition that the work other organizations have done thus far to achieve certification also become part of the foundation of national certification as soon as possible.

Registration is Open!

12th Annual International Medical Interpreters Association Conference

Early Registration is OPEN and ends on August 8th, 2008 so register today at www.imiaweb.org/conferences/Conference2008Registration.asp.

The **2008 Conference** is going to be held in Cambridge, MA at the beautiful **Hyatt Regency Hotel at the Charles on October 10 - 12, 2008**. This spectacular hotel is located right on the Charles River, with wonderful views and a great place to take a stroll and enjoy the area. The theme for this year is:

"Addressing Health Care Disparities by Ensuring Language Access to All"

How can we promote more knowledge and understanding about how to ensure language access to all? In each presentation, plenary session, and working groups, we are hoping this theme will shine through. Our desire is to bring different stakeholders to the table to discuss language access: providers, interpreters, trainers, language access and risk managers, company owners, etc.

What can you expect from an IMIA Annual Conference?

-Expert Educational Workshops

- Medical Interpreter Job Fair
- Interpreter Testing On-site
- Interpreter Department Tours
- Trainers Circle Activity
- Provider Annual Meeting
- Corporate Meeting
- Book Signing Event
- Annual Salary Survey Presentation
- Exciting New Exhibits
- Reception with Live Entertainment Included
- Public addresses from leaders in the field
- and much more

Keynote Speaker:

Peter B. Angood, MD, Vice President & Chief Patient Safety Officer, The Joint Commission

Dr. Peter Angood is the inaugural Chief Patient Safety Officer and a Vice President for The Joint Commission and Co-Director of the Joint Commission International Center for Patient Safety. A relatively new initiative, the Joint Commission International Center for Patient Safety primarily focuses on the development of multi-organization collaborative relationships oriented towards Patient Safety and to the development, dissemination and implementation of solutions for improving care related to recognized Patient Safety problems. Dr. Angood is also a lead for the World Health Organization's Collaborating Center for Patient Safety Solutions, a component of the WHO Alliance for Patient Safety that was designated to the Joint Commission. The WHO Alliance for Patient Safety is a multi-level international initiative focused on improving global Patient Safety. In addition to these activities, Dr. Angood oversees the annual development of the Joint Commission's National Patient Safety Goals and other related safety initiatives

Medical interpreting is a fast changing field and this conference is a must if you want to be abreast of the latest changes in policies, practices and developments in the field.

Conference Rates:

Early registration ends August 8th,
Regular registration ends Sept. 26th and
Onsite registration begins 9/27

Members: Early registration \$135, Regular registration \$220, Onsite registration \$260

Non-Members: Early registration \$230, Regular registration \$290, Onsite registration \$330

If you have any questions, please email
imiaweb@gmail.com

Provider Outreach News

Anita Coelho was invited by Alison Bondurant, from the APA Department of Minority Affairs, to introduce the IMIA to the APA Committee of Hispanic Psychiatrists and the Committee of Asian-American Psychiatrists, as these committees are very interested in eliminating barriers caused by language in their respective communities. Anita participated in a conference call with these groups on May 5. They were convening in person in Washington, DC at that time.

Provider Survey

Please don't forget to pass the news along to all the providers you know about the survey for providers regarding medical interpreting. More info to be found at
<http://www.imiaweb.org/join/providers.asp>

IMIA Community Relations and the Media

Izabel Arocha, IMIA President, participated in a Spanish language radio cable national program on April 22, to discuss the shortage of interpreters for patients and the strategies that hospitals are using to address language barriers. "It was a wonderful opportunity to educate the public about the wonderful career of medical interpreting and the need for more dedicated professionals in the field," said Arocha. "We need to ensure and create mechanisms to have an adequate number of highly bilingual proficient individuals to enter this profession. This is the only way to ensure adequate language access to linguistically diverse patients who need these services to ensure an equal level of health care," Arocha added.

Shortages have induced some hospitals to lower their standards and 'use' bilingual employees who do not have the sufficient level of language proficiency or training to interpret, putting patient care at risk without even knowing it. "Some training is worse than none, as it instills a false sense of security," said Arocha. "It was also disheartening to hear from many callers their horrible stories and their uncertainty of not knowing if an interpreter will be available for them, even in hospitals with established interpreter departments."

“Dialogo de Costa a Costa” is a daily talk show hosted by New York radio personality Malin Falu, and it focuses on topics of interest to the Hispanic community in the U.S. The show is an exclusive production of HITN-TV (Hispanic Information and Telecommunication Network), a public educational network, broadcasting nationally via cable and satellite through Direct TV and Dish Network.

Study: Satisfaction with Telephonic Interpreters in Pediatric Care (pdf), Journal of the National Medical Association:

The study examined satisfaction of Spanish-speaking mothers and pediatric residents who either used or did not use telephone interpretation services during pediatric visits in urban hospitals. According to the study, 94% of mothers interviewed said the service was "very helpful," and 98% said the visit would have been "harder" without the service. The study also found that half of residents rated the service "very helpful," while half said it was "somewhat helpful." In addition, one-third of residents thought their patients would like to use the service again, and nearly half said they did not know. Researchers concluded, "Pediatric residents substantially underestimated their patients' desire to use telephonic interpreters" (Cunningham et al, Journal of the National Medical Association, April 2008).

Cultural Competency for Allied Health Professions

There has been a push in recent years for allied health schools to incorporate cultural competency content into their programs. “Teaching Cultural Competence in Allied Health Professions in California” assesses the availability of cultural competency curricula in allied health professions schools in California. Read the issue brief at: http://futurehealth.ucsf.edu/pdf_files/Teaching%20Cultural%20Competence%20Issue%20Brief_final.pdf

Promoting the Standards of Practice

As professional interpreters, we are bound by the professional standards of the field. It is concerning that some language access administrators and interpreters alike are not familiar with all the different standards of practice. How familiar are you with all the professional Standards of Practice for medical interpreters?

The IMIA has started its national awareness campaign on the many Standards of Practice that have been published

since the first in 1995. The goal of this campaign is not just to raise awareness of the professional standards of the field, but also to be the initial step to promote adherence, acceptance, and enforcement of these standards in assessment, training, hiring, and employment practices in the field. Promoting the Standards is the best way to promote the profession. To see them all, please go to <http://www.imiaweb.org/standards/standards.asp>.

List of Commonly Misused English phrases or terms

Below is a link to a list of commonly misused English language phrases. It is meant to include only words whose misuse is deprecated by most usage writers, editors, and other language professionals, such as interpreters. It is possible that a very small number of the meanings marked Non-Standard may pass into Standard English in the future, but at this time all of the following Non-Standard phrases are likely to be marked as incorrect by English teachers or changed by editors if used in a work submitted for publication. Several of the examples are homonyms or pairs of similarly spelled words, which are often confused. We hope you find this information useful:

http://en.wikipedia.org/wiki/List_of_frequently_misused_English_words

One Size Does Not Fit All: Diverse Populations Pose Special Health Needs -Joint Commission Report Provides Tool to Assess and Overcome Language, Cultural Barriers

As the face of America continues to change, a research report released today by The Joint Commission, entitled "One Size Does Not Fit All: Meeting the Health Care Needs of Diverse Populations," urges health care organizations to assess their capacity to meet patients' unique cultural and language needs. In its 2001 report "Crossing the Quality Chasm," the Institute of Medicine identified patient-centered and equitable care as important elements of quality. The report includes a self-assessment tool that can help health care organizations tailor their initiatives to meet the needs of diverse populations. The tool addresses the main issues found in the report and provides a framework for discussing needs, resources and goals for providing the highest quality care to every patient served.

"Before meeting the treatment needs of patients, effective communication with them is needed in order to understand what the health problem is and how they wish to go about addressing that health problem," says Mark R. Chassin, M.D., M.P.P., M.P.H., president, The Joint Commission. "By using this framework, hospitals can assess their current practices and take action to treat each patient as a unique individual."

"This report provides many useful examples of how hospitals are effectively addressing the cultural and language needs of their increasingly diverse patients," says Robert Ross, M.D., president and CEO, The California Endowment. "We hope that hospitals across the nation will adopt some of these practices and use the report's self-assessment tool to improve the quality of care that their patients receive. For more information please go to:
http://www.jointcommission.org/NR/rdonlyres/88C2C901-6E4E-4570-95D8-B49BD7F756CF/0/HLC_One_Size_Prepub.pdf

Equity Report Guide Book Released: Creating Equity Reports: A Guide for Hospitals

This is a resource that can help your staff develop an equity report. The Guide provides practical information on how to collect data on race, ethnicity, language, and socioeconomic status - and how to use those data to develop an equity report that will allow your hospital to take action. This resource is now available for download on the DSC website
<<http://www.massgeneral.org/disparitiessolutions/resources.html>

Cultural Competence CME Modules for Healthcare Providers

Medscape, an online medical news service, has an interesting cultural competence CME module called Cultural Competency in Healthcare: A Clinical Review and Video Vignettes From the National Medical Association. To get more information please go to:
<http://mp.medscape.com/cgi-bin/1/DM/y/hBk7d0Lza8c0D2C0JOVR0Et&uac=87325MT>

Quality Interactions is an innovative CME e-learning program that provides effective cultural competency and cross cultural communication training for physicians, nurses and health care staff. There is a two-hour module

for physicians, another targeting nurses, and a one-hour module targeting non-clinical staff, useful for medical interpreters. The advantage of this program is that one can bookmark the training and then pick up where it was left off. For more information please go to:
www.qualityinteractions.com

Medline Plus

On May 7, 2008, MedlinePlus launched a multilingual feature providing access to high quality health information in languages other than English and Spanish. This new service benefits people who prefer to read consumer health information in their native language. It also helps the information professionals such as interpreters and health care providers who serve them. It is a particularly helpful resource for terminology research.

The new collection contains over 2,500 links to information in more than 40 languages and covers nearly 250 Health Topics. Continuous growth is expected. Users can navigate the new collection of health information in multiple languages either by language or by topic. A page listing all of the languages covered will be linked from the MedlinePlus homepage. Users can browse these languages or link to the page listing all of the topics covered. Users can also search the new collection of health information in multiple languages. A new collection called Multiple Languages appears on the MedlinePlus search results pages.

Finally, an interactive world map teaches users about the number of people who speak nine of the languages in the MedlinePlus collection. The languages – Arabic, Chinese, French, Korean, Russian, Somali, Spanish, Tagalog and Vietnamese – are among those most frequently spoken at home in the United States other than English, according to the U.S. census. For more information, please go to:
<http://www.nlm.nih.gov/medlineplus/languages/languages.html>

National Coalition Effort Continued

The International Medical Interpreters Association (IMIA), National Council for Interpreting in Health Care (NCIHC), the International Medical Interpreters Association (IMIA), and the American Translators Association (ATA) are pleased to announce the success of the first meeting of the National Coalition for Healthcare Interpreting Certification. The Coalition held its initial meeting in late May, with partial support for the

meeting provided by The California Endowment.

One of the most important principles of this effort is the one which speaks of a commitment to collaboration. The Coalition includes many members (IMIA being one of them) that represent various stakeholder groups. The Coalition will meet with the goal of developing the national certification process for medical interpreters. This presumably would entail consensus agreement on a testing instrument(s), program administration, training component(s), and plan(s) to secure widespread acceptance and recognition of this certification.

IMIA Board members have engaged in regular meetings with representatives of the three other associations since last spring to develop this effort. These discussions represent a major collaboration between some of the largest non-profit players in the field, which is significant in itself.

IMIA Certification Update

The IMIA Certification Committee has been working on several items. We invite all members to review the certification section of the website. We specially would like you to review whether you qualify for IMIA Certification by looking at the pre-requisites section at <http://www.imiaweb.org/certification/prerequisites.asp>. Our goal is to start registration for certification in the Fall of 2008. To see the process, please go to <http://www.imiaweb.org/certification/register.asp>. Please send comments or questions to IMIAcertification@gmail.com. This is an important part of our transparent and inclusive certification process.

Interpreter Rounds

Many hospitals have been asking the IMIA about interpreter round protocols. This was identified as a best practice in **Best Practice Recommendations for Hospital Based Interpreter Services Department** by the Massachusetts Department of Public Health at http://www.mass.gov/dph/omh/interp/best_practices.pdf and has been adopted in several hospitals across the country. Inpatients are usually the most critically ill patients in a health care organization and thus require periodic communication during their stay, especially during the initial assessment and discharge instructions (Speaking Together Quality Measure ST2: see www.speakingtogether.com).

In addition to sending interpreters to an inpatient unit at a provider or patient's request, inpatient rounds are essential and one of the few proactive services an interpretation department can do for the hospital in order to ensure safe communication and thus decrease liability for their hospital, not to count increase patient satisfaction. Unfortunately, there is still much misunderstanding of what constitutes an interpreter round. While many hospitals maintain that they provide their patients with inpatient rounds, often this consists of a quick visit to ask the patient how they are doing and is done sporadically at best, when the interpreter has down time, which is almost never.

Some hospital interpreters receive a daily inpatient report of the linguistically diverse patients they serve in order to identify and visit them in the inpatient units. Most protocols should include the main objectives of the inpatient round, which are:

- 1) to assess/confirm the language needs/preferences of the patient and communicate it to the staff nurse in charge of that patient. This can be a very useful corrective measure for language identification (Speaking Together Quality Measure ST 1, see www.speakingtogether.com)
- 2) to provide patient education on their language rights, how to access and working with an interpreter, the dangers of relying on unqualified individuals to provide them with accurate interpretation
- 3) to provide the provider and the patient with an opportunity to communicate at that moment, after the inpatient round is completed; and
- 4) to ensure that adequate language access has been maintained over a 24-hr period.

This patient advocacy role for interpreters is not being conducted in many hospitals, and there is still much misunderstanding about what advocacy is and isn't. Some hospitals don't even allow their interpreters to speak to patients without a provider present, which does not empower the interpreter to work in his/her full professional scope of work.

Patient education regarding language access and patient advocacy is an important activity in reducing language access disparities, and medical interpreters should be doing this at each opportunity. While each hospital has its own expectations of what an interpreter 'should' be allowed to do, please educate those that could benefit from this information. While this is ultimately one of their patient rights, few patients are aware of or understand the risks of not having a professional

interpreter and are not usually able to tell the difference between a qualified and an unqualified interpreter.

IMIA Standards of Practice

To become more familiar with the IMIA Standards of Practice please see

<http://www.imiaweb.org/uploads/pages/102.pdf>

The standards of practice presented here were developed through the use of a modified DACUM (Developing a Curriculum) process. The DACUM process is a method of occupational analysis for professional and technical jobs. Through this process, expert workers are engaged in describing and defining the tasks that make up their job, including the specific knowledge, skills, tools, and attitudes needed to perform these tasks correctly. For a description, please go to

http://www.aamftca.org/main/pdf/dacum_process.pdf

NEWS FROM AROUND THE WORLD

England - Web-based interpreting offers hope for the Deaf

London, UK (Times): Deaf people may no longer need interpreters to be present for doctors appointments and other meetings thanks to a technology which will enable them to communicate via a remote translator. A web-based video link will instead allow the hard of hearing to sit at a computer terminal with a hearing person and communicate using sign language with an interpreter sitting in a video call centre designed specifically for the deaf. The interpreter will then speak to the hearing person via the same link. For more, visit:

www.timesonline.co.uk/tol/news/tech_and_web/article3888837.ece

NEWS FROM THE UNITED STATES

Michigan: Multilingual marketing services in growing demand

Michigan, USA (Michigan): Multilingual marketing services are in growing demand as the world flattens and more Michigan companies export goods and services. Translation businesses say they are thriving despite fierce competition. "It's a good business these days with

everything going global," explains Lori Ann Elzerman, founder of Expert Language Services in Rochester Hills. "With the slowdown of the U.S. economy, companies are trying to sell their products abroad." For more, visit: blog.mlive.com/oak_business_review/2008/05/speaking_the_many_languages_of.html

Connecticut Department of Social Services requests information about hospitals' use of interpretation services

Connecticut, USA (Post): The Connecticut Department of Social Services has sent letters to state hospitals requesting information about each facility's use of interpretation services, the Connecticut Post reports. According to the Post, a "growing number of Connecticut hospitals are relying on certified medical interpreters ... to act as intermediaries, conveying critical patient information to doctors and vice versa." The state's request for information will help officials assess the need for the services, the Post reports. For more, please visit: www.connpost.com/localnews/ci_9175213

Oklahoma: growing need for interpretation in hospitals

Oklahoma, USA (NewsOK): The Oklahoman examined the growing need for interpretation services in Oklahoma hospitals and profiled efforts to provide those services at Oklahoma University Medical Center. According to the Oklahoman, the state's hospitals "have various ways of serving non-English speakers, from trained interpreters on the phone -- called 'language lines' -- to using nonmedical bilingual employees." For more information, please visit: newsok.com/article/keyword/3238656

Massachusetts: New generation of immigrants intensifies demands for interpreters

Massachusetts, USA (Boston Globe): Advocates say the increase is replenishing the state's population at a time when it is losing people to other states. But others say the shift could strain state and local services by intensifying demands for translators, healthcare, and other programs designed to help immigrant parents from Africa, the Middle East, and Latin America assimilate. For more: www.boston.com/news/local/articles/2008/05/04/the_latest_generation

Language Portal: A Translation and Interpretation Digital Library

The Portal is a free, digital library of close to 600 resources relating to the use of language access services in social services and public safety agencies. The Portal includes legal guidelines, service models, master contracts for service providers, hourly translation and interpretation rates for different languages, pay differentials for multilingual staff, and sample translated documents. These documents are searchable by state, language, service area or by keyword. Initial documents within their digital library were obtained through extensive research and through the contributions of practitioners from various agencies and levels of government.

Developed with guidance from the Annie E. Casey Foundation's Language Access Practitioner's Network and support from the Annie E. Casey Foundation, MPI's National Center on Immigrant Integration Policy created the Portal to provide "one-stop shopping" for the many local government administrators, policymakers, and others who are looking for ways to provide high-quality and cost-effective translation and interpretation services. http://www.migrationinformation.org/integration/language_portal/

Summary of State Law Requirements Addressing Language Needs in Health Care (March '08)

This summary was just released - an update to our 50state survey that identified state statutes and regulations related to language access and healthcare. You can find it at <http://www.healthlaw.org/library/item.174993>. If you want information on individual states, you can access these charts by clicking on the relevant state from this link -- http://www.healthlaw.org/library/folder.71231-State_Activities.

Training the Trainer – next available Interpreter TOT in Boston in August

Training of Trainers and Licensing Program Offered by Culturesmart

Culturesmart is licensing its "Essential Piece" 45-hour curriculum to healthcare organizations, interpreting agencies, and educational institutions. This program includes all materials and training modules for delivering

training and for qualifying bilingual health care staff in medical interpretation.

A train-the-trainer program is scheduled in Boston during the week of August 18-22, 2008. The program will focus exclusively on conducting a mock course of *The Essential Piece*. Though we may occasionally mention methods behind techniques, all participants are expected to be familiar with basic principles of training adult learners.

The schedule for the train-the-trainer program covers:

1. **Day One:** Course Overview, Planning, Management & Day 1 Training Delivery
2. **Day Two:** Days 2 & 3 Training Delivery
3. **Day Three:** Days 4 & 5 Training Delivery
4. **Day Four:** Assessments, Course Management
5. **Day Five:** Language Coach Training

Interested parties may preregister online for the summer 2008 program at <http://ttt.culturesmart.org>

Corporate Profile

Culturesmart

Culturesmart started as a one-member interpreting agency in 1991. The company's founder, Greg Figaro, was then providing interpreting services to most of the health care organizations in the Boston area. Over the years, the company gradually expanded its size and offerings and started providing additional services, such as training of medical interpreters. Finally, in 1999, the company transitioned to focusing exclusively on developing and delivering training programs for medical interpreters.

The first version of the Culturesmart interpreter training course was produced in 2000 and has since evolved to its current version. The 300-page participant course book and the matching trainer guides are the fourth edition of Culturesmart's 45-hour curriculum. This revision is the result of a two-year project involving more than 12 expert consultants from varied backgrounds, plus focus groups of past trainees. The curriculum includes the participant course book, a 200-page lead trainer's guide, a 110-page language coach's guide and a 240-page human anatomy book. The training course, taught by a lead trainer and several language coaches, reflects changes in medicine, the health care system, and medical interpreting.

The Culturesmart medical interpreter training program is called “The Essential Piece” for two reasons: first, to acknowledge the pivotal role a trained, qualified interpreter plays in assuring quality health care for patients with limited English proficiency; and second, to highlight the fact that the curriculum provides the essential skills and knowledge necessary to train and qualify as interpreters bilingual individuals who meet the requirements of the program.

Culturesmart’s interpreter trainers have extensive educational, professional, linguistic, and interpreting backgrounds that qualify them as trainers. The core group of Culturesmart trainers collectively has over 80 years of medical interpreter training experience and more than 150 years of interpreting practice.

In 2006, Culturesmart started licensing its program to organizations that wish to build internal capacity to train their bilingual personnel as interpreters. The licensing program and training of trainers is now offered in two formats: on the job while delivering training or in a five-day train-the-trainer course. Through this licensing program, organizations receive training and all the materials and content that allows them to deliver training onsite to their staffs.

Culturesmart’s past and current client list encompasses dozens of hospitals and health centers, such as Boston Medical Center, Mount Sinai Medical Center (NYC), and Queens Health Network (NYC), plus several colleges, including Capital Community College (CT). The company also offers open-enrollment training programs to qualified individuals in Boston, Hartford, and New York City.

For more information about Culturesmart, please visit <http://www.culturesmart.org> Program licensing: <http://ttt.culturesmart.org> or contact Greg Figaro at greg@culturesmart.org

Book of the Month

***Teaching, Translation and Interpreting* by Cay Dollerup (Editor), Lindegaard (Editor)**

Selected papers from the Third Language International Conference on Translator and Interpreter Training. Capping the series of conferences on this theme in Denmark, the present volume brings together a choice selection of the papers read by scholars and teachers from five continents and within all specialties in Translation Studies.

In combination with the two previous volumes of the same title, the book offers an up-to-date, comprehensive, representative overview focusing on main issues in teaching in the relatively new field of translation. There are informed and incisive discussions of subtitling, interpreting and translation, spanning from its historical beginnings to presentations of machine translation and predictions of the future of translation work.

Contributions ranging from discussions on the interplay between theory and teaching, teaching literary translation, introducing students to central issues in translation practice, and historical and social issues in teaching translation. To purchase go to

<http://search.barnesandnoble.com/Teaching-Translation-and-Interpreting/Cay-Dollerup/e/9789027216014/?itm=5>

About the IMIA eNews

The IMIA eNews is our monthly news brief. The purpose and intent of this publication is to advance the medical interpreting profession by providing our members with the latest local, state and international news and reports, as well as provide monthly updates on useful websites, toolkits, and available trainings/resources. We know our members do not have time to read everything that comes across their desks or emails, so we actually take the time to pick out from a myriad of sources to condense it into a summary of the most updated, relevant, useful and interesting news about the field.

The IMIA eNews’ goal is to provide technical value and serve as a clearinghouse of information as stated in our bylaws and offer an institutional record of what is happening in the field of medical interpretation around the world. Please pass this newsletter to colleagues who might become interested in the work of the association. Please send suggestions and comments about the eNews to Izabel Arocha at iarocha@challiance.org