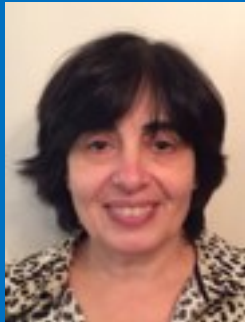


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Randa Yazbeck
Vice Chair



Eliane Sfeir-Markus
Secretary

Letter from the Chair



Dear Arabic Division members,

It has been a busy summer for medical interpreters, with global political upheaval and humanitarian crises all around the world, resulting in an unprecedented need for effective communicators.

Moreover, the profession has been in the spotlight as lawmakers, health insurance plans, and hospitals around the U.S. are pushing back and forth for bills to ensure that patients with limited English proficiency receive correct medical treatment. The latest triumph was the [Assembly Bill](#), passed in California earlier this year.

With the growing Arab-American population, Arabic remains one of the most requested languages by non-speakers of English in different parts of the U.S. However, news has been circulating that hospitals still ignore policies on using qualified medical interpreters. This is where members of the IMIA play a major role in spreading awareness about the specific needs of the profession of medical interpretation and advocating for professional certification.

If you have any questions, suggestions, or feedback, please don't hesitate to email me on imahmood@imiaweb.org. I will always be happy to assist you.

Thank you for your continuous support.

Sincerely,

Ibtihal Mahmood, BA, CHI,
Chair, Arabic Division
imahmood@imiaweb.org

Hospitals often ignore policies on using qualified medical interpreters

By [Sabriya Rice](#) - First published on Aug 30, 2014 on [ModernHealthcare.com](#)

As the U.S. grows increasingly more linguistically and culturally diverse, some safety experts worry that healthcare providers too often are not making professional interpreter and translator services available to patients and families. Instead, they frequently rely on nonprofessionals, including patients' family members, who are not knowledgeable about medical terminology. This increases the risk of medication errors, wrong procedures, avoidable readmissions and other adverse events. Nearly 9% of the U.S. population is at risk for an adverse event because of language barriers, according to the Agency for Healthcare Research and Quality (AHRQ).

Most organizations advise against the use of a patient's family or friends, who can potentially do more harm than good. Bilingual clinical staffers also are discouraged from stepping in if they have not been certified as medical interpreters. But physicians and hospital staff often ignore these policies, typically because of time pressures, lack of knowledge about the availability of professional interpreters, or procedural difficulties in arranging for interpreters.

In a report published in May in the Journal for Healthcare Quality, hospital quality and safety leaders, nursing staff and interpreters recounted problems that arose when staffers tried to do without, often because they felt the wait for a professional interpreter would delay needed care. The report found that medication errors and lack of informed consent were more common among patients with language barriers.

Dr. Radwan: Arabic medical terminology still facing many obstacles

Dr. Fadi Radwan, the founder of the [Medical Translation Academy](#), writes about the challenges facing Arabic medical translators and interpreters.



Medical translation in the Arab world has a singularity amongst all types of translation, as it has a direct effect not only on medical experts or on students of medicine, but also on all parts of the community. Arabic-speaking patients follow health-related news, have direct contact with doctors, and completely rely on their ability to speak in their mother tongue while making medical decisions built on the professionals' wide medical knowledge in their Arabic language.

Moreover, the significant development in human rights and the spread of democratic ideals around the world have caused more doctors to be committed to high-quality communication with patients, using easy and modern forms of the Arabic language that patients can totally understand. As a result, patients are now able to make important decisions related to their lives and health. Healthcare providers nowadays cannot make decisions independently; instead, they have to discuss these decisions with patients and decide together.

There is no doubt that the most important challenge facing the healthcare professional or student is the lack of modern medical references in the Arabic language. Another considerable obstacle is the dwindled concern from health faculties on presenting curriculums in Arabic. Many doctors are embarrassed because of their limited knowledge of the Arabic equivalents of the Latin names of many common diseases; there are no adequate medical study material available in Arabic.

In conclusion, Arabic medical terminology still needs to overcome many obstacles and challenges, but the hope remains in the visible early signs of improvement: the interest shown from many Arabic organizations for this vital field is noticeable with the launch of various websites, conferences, and multimedia resources. On the other hand, the mission is still in the beginning and it obviously needs more support from many establishments including formal educational institutions and international linguistic societies.

Job Opportunity: Arabic Translator/Interpreter at the International Committee of the Red Cross (ICRC)

Your task:

- Oral interpretation: from Arabic to English, and English to Arabic during confidential interviews with persons detained in prisons, ICRC institutional dissemination of IHL, message delivery and visits to families of detainees,
- Written translation: translation of written Arabic (newspaper articles, correspondence, etc.) into written English analysis and reporting: analysis of conditions of detention, security and other matters relating to the ICRC's mandate



For more information, and to apply for this opportunity, click [here](#).

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