

## Relationship-Centred Care in Cross-Linguistic Medical Encounters

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**Abstract :** This study explores the experiences of cross-linguistic medical encounters by patients, and their views of receiving language support therein, with a particular focus on Japanese-English cases. The aim of this study is to investigate the reason for the frequent use of a spouse as a communication mediator from a Japanese perspective, through a comparison with that of English speakers. This study conducts an empirical qualitative analysis of the accounts of informants. A total of 31 informants who have experienced Japanese-English cross-linguistic medical encounters were recruited in Australia and Japan for semi-structured in-depth interviews. A breakdown of informants is 15 English speakers and 16 Japanese speakers. In order to obtain a further insight into collected data, additional interviews were held with 4 Australian doctors who are familiar with using interpreters. This study was approved by the Australian National University Human Research Ethics Committee, and written consent to participate in this study was obtained from all participants. The interviews lasted up to over one hour. They were audio-recorded and subsequently transcribed by the author. Japanese transcriptions were translated into English by the author. An analysis of interview data found that patients value relationship in communication. Particularly, Japanese informants, who have an English-speaking spouse, value trust-based communication interventions by their spouse, regardless of the language proficiency of the spouse. In Australia, health care interpreters are required to abide by the national code of ethics for interpreters. The Code defines the role of an interpreter exclusively to be language rendition and enshrines the tenets of accuracy, confidentiality and professional role boundaries. However, the analysis found that an interpreter who strictly complies with the Code sometimes fails to render the real intentions of the patient and their doctor. Findings from the study suggest that an interpreter should not be detached from the context and should be more engaged in the needs of patients. Their needs are not always communicated by an interpreter when they simply follow a professional code of ethics. The concept of relationship-centred care should be incorporated in the professional practice of health care interpreters.

**Keywords :** health care, Japanese-English medical encounters, language barriers, trust

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