

Language Matters: The Need for Professional Healthcare Interpreters in Ireland

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In response to 'Experiences of Native Irish speaking Older Adults Navigating Healthcare Services'.

Published: [Ir Med J; September 2024; Vol 117; No. 8; P1021 September 26th, 2024.](#)

Dear Editor,

We read with interest Breathnach et al.'s article illustrating the challenges faced by native Irish speakers within the Irish healthcare system, including the role of healthcare interpreters¹. Language and interpretation within healthcare have long been overlooked in Ireland, with serious consequences for patient care.

Understanding patients' linguistic needs is increasingly important as Irish society becomes ever more diverse. According to the 2022 Census, over 750,000 people in Ireland speak a language other than English or Irish at home, with at least 95,000 reporting limited English proficiency². This figure is likely a substantial underestimate of the true number, given that over 100,000 Ukrainian citizens have sought temporary protection in Ireland since March 2022 alongside increasing numbers of international protection applicants from other countries³. Many of these individuals are likely to have limited English proficiency.

Ideally, every patient would have access to language-concordant care, interactions where the patient and healthcare worker speak the same language. This being impractical, the healthcare system relies on interpretation services, including in-person and phone interpreters, casual interpreters (such as friends and family), and machine-based tools like Google Translate and ChatGPT. There is little research on health interpreting practices in Ireland and healthcare professionals are not routinely trained on how to assess a patient's linguistic needs, nor on how to work effectively with interpreters⁴.

Ireland does not have any regulatory standards on healthcare interpreters⁴ who can be employed without formal assessment or training. Such poor standards undermine the work

of professionally trained interpreters, and expose patients in Ireland to an unacceptable level of risk. Indeed, informed consent is questionable in the absence of accurate interpreting. Moreover, particularly for patients navigating complex or sensitive health conditions, poor interpreting may lead to feelings of vulnerability, powerlessness and mistrust towards their healthcare providers.

To address these shortcomings, we propose several solutions. Legislation should mandate qualifications and establish a regulatory body for spoken language interpreters, similar to what has been done for Irish Sign Language interpreters. Existing interpreters should be supported to obtain formal qualifications, with consideration also given to support languages spoken by minoritised groups, such as Romani, to improve healthcare access for the Roma community. Additionally, healthcare professionals and students should receive mandatory training on assessing patients' linguistic needs and effectively working with interpreters.

Ensuring every patient's access to linguistically appropriate care is an urgent moral imperative. By taking decisive action now, we can safeguard patient rights, improve health outcomes, and set a standard for inclusive and culturally competent care in Ireland.

Declarations of Conflicts of Interest:

None declared.

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