



ASLIA Workplace Health and Safety Policy

Rationale

The Australian Sign Language Interpreters' Association (ASLIA) believes in the development and promotion of, and adherence to, safe working practices for all interpreters. The purpose of this policy is to ensure that interpreters¹, employers, hirers and clients² are aware of what constitutes safe working conditions. Interpreters who work in the field, whether full-time, part-time, casual, sub-contract or pro bono (along with the employers/hirers of interpreters) need to be mindful of the hazards associated with their work and take all reasonable measures to ensure that all foreseeable risks are eliminated or minimised.

Occupational overuse syndrome

1. The major area of concern for interpreters in workplace health and safety terms is overuse injury. Over the past 20 years, the range of overuse injuries has been collectively referred to as Repetitive Strain Injury (RSI). The current term used in the workplace health field is Occupational Overuse Syndrome (OOS).

2. The National Occupational Health and Safety Commission (1986) defines overuse injury as:

A collective term for a range of conditions characterised by discomfort or persistent pain in muscles, tendons and other soft tissues, with or without physical manifestations ... [Occupational Overuse Syndrome] is usually caused or aggravated by work and is associated with repetitive movement, sustained or constrained postures and/or forceful movements.

3. There are a number of factors which may contribute to the development of OOS:

- *Biomechanical factors* such as constrained posture; the frequency of repetitive movement; the force used in performing movements; faults in equipment and task design, and increased muscle tension associated with mental stress.
- *Faulty work organisation* such as the duration of work without rest; bonus and overtime incentives; lack of training and supervision; and ineffective supervision.
- *Medical mishandling* leading to delayed reporting of the injury; incorrect or delayed diagnosis; and inappropriate management of the injury.

¹ In this document, the term 'interpreter' refers to any interpreter working between a signed language or system and a spoken language, or between two or more signed languages or systems.

² In this document, the term 'client' refers to any consumer of interpreting services, whether that client is deaf, hearing, deafblind or hard of hearing, and whether or not the client is paying, directly or indirectly, for the interpreting service.

Other workplace health and safety issues

Although this document focuses on OOS, ASLIA recommends that interpreters and their employers/hirers need to be aware of, and take steps to eliminate or minimise, other workplace health and safety issues which can affect interpreters. These can also include, but are not limited to, interpersonal and intrapersonal hazards as well as environmental hazards.

Interpersonal and intrapersonal hazards

Vicarious trauma

Interpreters may be called upon to work in confronting and emotionally difficult situations. This can result in vicarious trauma for interpreters.

ASLIA recommends that:

- Employers/hirers advise interpreters in advance, where possible, of confronting issues which could arise in a particular situation.
- Employers/hirers provide interpreters with confidential and effective opportunities to debrief, including providing employee assistance schemes.
- Interpreters are able to decline assignments, without being obliged to explain their reasons, unless they wish to.

Violence, verbal abuse and crime

Interpreters can sometimes be the subject of, or witness to a client's or bystander's, aggression or anger. Interpreters can also be victims of other crime during or on the way to or from interpreting assignments.

ASLIA recommends that:

- Employers/hirers advise interpreters in advance, where possible, of confronting issues which could arise in a particular situation.
- Employers/hirers provide interpreters with confidential and effective opportunities to debrief, including providing employee assistance schemes.
- Interpreters are able to decline assignments, without being obliged to explain their reasons, unless they wish to.
- Interpreters do not enter clients' homes alone; instead, they should wait for the other party/s to arrive before entering.
- Interpreters consider whether they need to plan an 'escape route' in high-risk assignments.
- Interpreters ensure that at least one other person knows where they are when they are interpreting. Usually, this will be the interpreter's agency; however, in the case of freelance assignments, the interpreter may wish to inform a third party, without disclosing confidential information, of the expected time for completion of the work and any other relevant details.

Environmental hazards

The following environmental hazards can lead to injury or illness in interpreters. Interpreters and their employers/hirers need to manage these hazards in order to minimise risk. These hazards can include, but are not limited to:

- Chemicals (e.g. second-hand cigarette smoke, chemical fumes, chalk dust)
- Radiation (e.g. x-rays, UV rays from sunshine)
- Heat and cold
- Trip hazards (e.g. electrical cords, interpreting whilst walking)
- Electricity
- Noise
- Biohazards (e.g. infectious diseases)
- Driving (e.g. interpreting or making phone calls while driving)

Prevention of OOS

Rather than concentrating on treatment of overuse syndromes once established, ASLIA believes that the only acceptable health and safety policy for interpreters is one based on prevention, which means dealing with the occupational causes of OOS at the source by modifying the work place and/or work processes to remove those causes or reduce their influence.

To prevent OOS developing in initial stages, specific guidelines for the conditions and performance of work must be set and adhered to – for example, setting specific amounts of exposure time as outlined below.

When initial symptoms present, ASLIA strongly recommends that the interpreter immediately seek professional medical advice. In consultation with the medical practitioner, a recuperation period needs to be set, where entirely different tasks are performed, so that the affected limbs, ligaments and/or muscles are rested. ASLIA recommends that even with occurrences of mild pain, the affected joint or part of the body be rested immediately. This does not always mean that the interpreter must take time off work: s/he may be given other work to do which involves the use of different muscles.

ASLIA believes that managing overuse injuries is a shared responsibility. Often supervisors become aware too late that an interpreter is experiencing distress and/or injury. It is important that early warning signs be noticed and acted upon by those who regularly supervise interpreters.

Interpreters are encouraged to report symptoms early to an employer or hirer. They should feel they are able to report promptly without anxiety-producing procedures and certainly punitive measures should not exist (either covert or overt).

ASLIA recommends that interpreters consider keeping notes of their physical condition after each assignment. This may be particularly useful for interpreters who work for a range of employers/hirers.

As indicated by the nomenclature of OOS, Occupational Overuse Syndrome, these injuries are often accumulative in nature. Yet interpreters may be able to point to a particular assignment where an injury may flare or become acute. Although that may be the case, the injury may very well have been present previously. This needs to be considered by the interpreter and those who hire/engage interpreters when considering work cover claim accountability.

Treatment

The best treatment for OOS is to ensure that it does not arise in the first place. However, in the early stages of OOS, treatment is (theoretically) simple and effective:

- immediate rest of the affected limb, which should be completely pain-free before the interpreter returns to work.
- the interpreter should immediately seek and follow the advice of a medical professional.

Early reporting of OOS results in early attention to the problem. Delay only results in more severe symptoms and jeopardises the likelihood of recovery.

Furthermore, hobbies, pursuits and interests outside of interpreting assignments should be considered in the larger picture of OOS and its prevention, rehabilitation and recovery. It is possible that such activities can hasten and/or intensify an injury or lengthen a rehabilitation period.

Recommendations for managers of interpreters

Tackling OOS is an important but complex job and it must be done in a systematic way. The following list provides a summary of the issues which ASLIA suggests employers need to review regularly and manage.

Physical environment

- Achieve, maintain and monitor high standards of health and safety.
- Provide a human environment rather than a production process. Establish, disseminate and follow guidelines which outline appropriate work duration.

Equipment

- Desks, chairs and other furniture should be ergonomically correct to suit each individual. Adjustments will be required based on height and body shape.
- Whilst individual needs must be considered and respected, for most working interpreters, the chair in which they sit should not have armrests.

Interpersonal issues

- Provide opportunities for personal and professional skill development. This is a clearly identified need among all interpreters.
- Enable interpreters to contribute to decisions affecting their work.
- Ensure that the goals and expectations of all participants are clear and agreed. There is a strong need for education of deaf and hearing consumers as to the role of the interpreter and of the workplace health and safety needs of interpreters.
- Provide training and information for interpreters to perform their work without risk of injury. This information should include occupational health and safety guidelines as well as provisions for interpreting skill development. This information should be shared as part of an induction procedure.
- Consider whether interpreters can be safely and appropriately utilised performing non-interpreting work.
- Provide debriefing mechanisms. This can be provided by the employer, directly by their own staff or indirectly through an employer provided employee assistance program. As well, the interpreter can seek assistance through a regular mentoring relationship, or for more in-depth reflection, the assistance of a counselling professional.

Management style and structure

Employers should develop clear, well-communicated objectives and a consistent approach in dealing with staff.

Employers should seek to develop an environment in which consideration has been given to the physical consequences of interpreting work and sound occupational health practices are put into place and followed.

Interpreters need to see that their health and safety are given high priority and that they can report concerns promptly and confidently without fear of retribution or punitive measures.

Appropriate skills, knowledge and experience

ASLIA recommends that recruiters, employers and hirers of interpreters offer work to interpreters based on individual skills, knowledge, experience and ability to perform the requirements of the job.

Further, ASLIA recommends that interpreters take reasonable steps to ensure they only accept assignments which are appropriate to their skills, knowledge and experience. (Note: this does not mean that interpreters should always refuse work which they may find challenging).

Training arrangements

ASLIA believes that, as part of an induction program, information on ergonomic principles needs to be provided to interpreters. This information potentially would include briefing about the furniture or equipment they use in the workplace and ways of making adjustments. Education about the early detection of OOS warning signs is recommended for all interpreters.

ASLIA recommends that job rotation principles and time/task sharing should be routinely scheduled.

In addition, ASLIA recommends that interpreters be given information on work hazards - such as repetition injuries, postural and ergonomic problems, etc. - and preventative strategies, including the importance of adequate rest breaks and exercise.

ASLIA believes that interpreters and employers both share health and safety responsibilities in the workplace. While interpreters must take some responsibility for their own health and safety, employers have a responsibility to provide set up and maintain safe systems of work.

The focus of training should always be to extend the skills and knowledge of the individuals.

Hours of work

ASLIA strongly recommends that rest breaks must be provided while undertaking interpreting work. It is recommended that rest breaks consist of a minimum of fifteen minutes to be taken after every 50 minutes of continuous repetitive work, in addition to meal breaks.

Specific interpreter exercise and stretching activities contribute to optimal levels of interpreter well-being and performance. Employers and interpreters are jointly responsible to ensure arrangements are in place for this to be a daily part of work.

It is ASLIA's policy that an interpreters work for no longer than five hours of actual interpreting per day if working a five-day working week. Further, if an interpreting assignment is longer than

one hour in duration, it is essential for two interpreters employed.³ The interpreters will work in turn, for periods of between fifteen and thirty minutes at a time.

For interpreting assignments of greater than two days' duration, ASLIA suggests that a team of three interpreters be considered.

Educational interpreting

The pace at which information is delivered in an educational setting, whether primary or secondary school or a tertiary institution, is usually quite fast. In addition, information to be interpreted may come from a variety of sources – live presentation, film or video or audio recording. Owing to the physical and cognitive fatigue which is created for an educational interpreter by the demands of an educative environment with its variable, high speed delivery, special consideration must be given to their work circumstances. This consideration may result in the need to use differing guidelines which vary from those noted above.

Careful consideration must be given to whether an educational interpreter can effectively and safely work alone or if it is necessary to employ a second interpreter to allow working as a team.⁴ Multiple factors need to be considered in the making of this decision which include, but are not limited to:

- the density and pace of the content,
- the overall demands of classroom interaction and participation,
- the overall schedule of interpreting that the interpreter may provide on a given day across multiple classes, lessons or lectures, and
- the amount of time spent in the classroom when students are working individually and independently of instruction.

In any event, ASLIA recommends that educational interpreters not work for longer than 25 minutes of continuous interpreting at any one time before alternating with another interpreter.

Any audio or video presentation must be clear and of sufficient volume to allow it to be easily heard by the interpreter. Where ever possible, it is recommended that captioned video and DVD presentations be used. If possible, the presentation should be provided to the interpreter prior to the interpretation to allow him or her to become familiar with the content. Whilst ASLIA recommends that presenters attempt to source captioned versions, it also notes that interpreters need to check with deaf or hard of hearing clients as to whether the client prefers the video to be interpreted in addition to captions. At the request of either the interpreter/s or deaf student/s, an opportunity needs to be provided for a later viewing and re-interpretation of any video or DVD presentation. Frequently such material has a very rapid rate of speech as well as using such media techniques as voice-over content to emphasise important points. This creates specific interpreting demands that can make the content difficult to follow as well as heightening the physical and cognitive demands on the interpreter.

Other service conditions – for employees

ASLIA recommends that employers/hirers of interpreters and interpreters themselves consider the impact of time away from work – whether for illness, holiday or another reason – when returning from leave. For instance, the standard five day working week and two-day weekend break needs to be taken into account when re-commencing the next work week. All workers

³ Exceptions may be made in cases where very little interpreting will be required – for example, if an interpreter is hired to be present during a written examination, in case a deaf student needs a question sight-translated.

⁴ See footnote 3

need time to adjust to repetitive tasks and more rest breaks than usual should be taken when returning to work after a significant amount of time away. Allowance must be made for the body's need to re-build the physical fitness required for interpreting.

Employers of interpreters, including interpreting agencies, should have clear systems in place to allow for the early reporting of OOS symptoms by workers, including the use of an accident or incident book.

All interpreters with symptoms and signs of OOS must adhere to the employer's policy and procedures. For example, document it in an Incident Register, see a General Practitioner for an initial assessment, obtain a worker's compensation medical certificate (certificate of capacity), seek treatment, participating in a return to work plan including duties and hours, and so on.

OOS - summary

OOS problems are preventable by:

- sound Workplace Health and Safety management of the process of interpreting work
- ensuring that interpreters are educated about and adopt appropriate work practices
- varying the types of assignments, or the way in which they are performed
- interpreters resting any part/s of the body which becomes sore, painful or numb; reporting symptoms to the appropriate person; and seeking medical advice as soon as possible.

Legal and financial considerations

Legal issues

Each state has its own workplace health and safety laws and regulations (see Resources). Interpreters need to be aware of their rights and responsibilities, and their employers' rights and responsibilities in relation to workplace health and safety. Interpreters need to be aware that, whether they are employees or freelancers, they may be legally liable if they do not adhere to safe working practices.

Financial implications

As rest is one of the most important treatments of OOS, it is likely to be the case that interpreters affected by OOS cannot work in their chosen field – or indeed, other fields that require use of the same body parts – for some time, or even permanently. For this reason, ASLIA recommends that interpreters are aware of the available worker's compensation and insurance options available to them.

Workers compensation and insurance

Generally, interpreters who are *employees* – whether full-time, part-time or casual – will be covered by their employer's worker's compensation scheme.

Conversely, for the most part, interpreters who are *not employees* (that is, who are freelancers, contractors or subcontractors) will *not* be covered by a worker's compensation scheme *and should make their own arrangements to acquire a worker's compensation insurance policy*. As part of the induction process with a new employer and prior to accepting work with a new entity, interpreters should know whether the appropriate cover is or is not in place before undertaking any work.

Interpreters may also wish to consider acquiring income protection insurance.

Resources

Bontempo, K. & Malcolm, K.

'An ounce of prevention is worth a pound of cure: Educating interpreters about the risk of vicarious trauma in healthcare settings', in Malcolm, K. and Swabey, L. (eds) *In our hands: Educating healthcare interpreters*, Washington DC: Gallaudet University Press, 105-130 (2012);

http://www.academia.edu/1942525/Bontempo_K_and_Malcolm_K_2012_.An_ounce_of_prevention_is_worth_a_pound_of_cure_Educating_interpreters_about_the_risk_of_vicarious_trauma_in_healthcare_settings_.In_Malcolm_K_and_Swabey_L_Eds_In_our_hands_Educating_healthcare_interpreters_.Washington_D_C_Gallaudet_University_Press_.105-130

Cohn, L. et al

'Overuse syndromes of the upper extremity in interpreters for the deaf', in *Orthopedics*, 13(2), February 1990;

<http://www.ncbi.nlm.nih.gov/pubmed/2308880>

Darwish, A.

'Occupational Hazards in a Hazardous Occupation: Issues of Health and Safety in Translation and Interpreting', in *Translation Watch Quarterly*,

4(2), December 2008;

http://www.translocutions.com/turjuman/papers/translation_watch_quarterly_December2008_issue_darwish.pdf

Fischer, S.L. et al

'Musculoskeletal disorders in sign language interpreters: A systematic review and conceptual model of musculoskeletal disorder development', in *Work*, 42(2), 2012;

http://www.skhs.queensu.ca/ergbio/publications/peer_review/Fischer_Work_2012.pdf

Madden, M.

'The prevalence of occupational overuse syndrome among Australian Sign Language interpreters', in *Journal of Occupational Health and Safety, Australia and New Zealand*, 11(3), June 1995;

<http://trove.nla.gov.au/work/39514970?versionId=52370452>

Registry of Interpreters for the Deaf

'Standard Practice Paper – Interpreting in Mental Health Settings', 2007;

http://rid.org/UserFiles/File/pdfs/Standard_Practice_Papers/Mental_Health_SPP.pdf

Registry of Interpreters for the Deaf

'Standard Practice Paper – Self-Care for Interpreters: Prevention and Care of Repetitive Strain Injuries', 2007;

http://rid.org/UserFiles/File/pdfs/Standard_Practice_Papers/Drafts_June_2006/Self-Care_SPP.pdf

Scheuerle, J. et al 'Work-Related Cumulative Trauma Disorders and Interpreters for the Deaf', in *Applied Occupational and Environmental Hygiene*, 15(5), 2000;
<http://www.tandfonline.com/doi/abs/10.1080/104732200301386>

Woodcock, K. and Fischer, S.L.

'Occupational health and safety for sign language interpreters', School of Occupational and Public Health, Ryerson University, 2008;
<http://www.ryerson.ca/woodcock/pdfs/OHSforSLI.pdf>

WHS laws, regulations and resources

Commonwealth: <http://www.safeworkaustralia.gov.au/sites/SWA>

ACT: http://www.worksafe.act.gov.au/health_safety

Queensland: <http://www.workcoverqld.com.au/>

<http://www.deir.qld.gov.au/workplace/index.htm>

New South Wales: <http://www.workcover.nsw.gov.au/Pages/default.aspx>

Northern Territory: <http://www.worksafe.nt.gov.au/home.aspx>

South Australia: <http://www.safework.sa.gov.au/>

<http://www.workcover.com/?AspxAutoDetectCookieSupport=1>

Tasmania: <http://workplacestandards.tas.gov.au/home>

<http://www.workcover.tas.gov.au/>

Victoria: <http://www.worksafe.vic.gov.au/>

Western Australia: <http://www.commerce.wa.gov.au/WorkSafe/>

<http://www.workcover.wa.gov.au/Default.htm>