GBV AoR Helpdesk

TIP SHEET: Working safely and effectively with linguistic and cultural mediators in GBViE programming

Katia Urteaga Villanueva | November 2022



In many contexts where we work, implementing GBViE activities safely for GBV survivors and women and girls at risk of GBV will require attention and resources to overcome language barriers. It is necessary that women and girls who disclose difficult or traumatic experiences can do so using a language in which they are comfortable. This support is provided by interpreters.

However, it is important to note that in addition to language, cultural barriers can also impede a proper understanding of the risks and needs faced by women and girl survivors/at risk of GBV. Perceptions about the survivors' or the service provider's culture can become barriers to access life-saving services and resources, including aspects related to gender, ethnicity, race, etc. In such contexts we may need the specific support of professionals with a specific skillset who can help us understand adequately. They are called linguistic and cultural mediators.

Therefore, interpreters and linguistic and cultural mediators who will be involved in supporting GBViE activities and services will require skills and training to behave with sensitivity towards GBV survivors and women and girls at risk, and respecting safety and confidentiality, facilitating in this way the efficient and accurate communication between the client(s) and the service provider(s).

General overview to working effectively and safely with interpreters and linguistic and cultural mediators

Definitions, key differences and similarities:

The terms *interpreter* and *linguistic and cultural mediator* may seem similar, however they refer to different jobs that require different skill sets that are not always interchangeable.

 An interpreter provides an oral translation of communication between two languages, simultaneously or consecutively. This applies also to oral translation of sign language and lip-reading if they are trained in it, or of a written document.

A linguistic and cultural mediator (LCM)
facilitates mutual understanding between a
person or a group of people and a caregiver
by providing a two-way oral translation
(interpreting) that includes supporting them
to overcome cultural barriers that might
confuse the communication.

For example: an LCM supporting a psychosocial support activity may need to explain to a survivor that intimate partner violence is not acceptable despite a local cultural social norm that may encourage it as a form of 'discipline'.

Therefore, when designing and implementing your activities, you may want to reflect if the context you are working will require interpretation or linguistic and cultural mediation.

LCMs might be required to play different roles and do many different tasks within GBViE programmes, in addition to interpretation. Their roles and tasks may vary significantly from context to context: part of the case management teams, of triage teams in clinics, of medical teams, of outreach teams, of training teams, etc.

Do the LCMs you are working with have the relevant and appropriate knowledge, attitudes and skills to engage safely in GBViE program activities?

Any individual in charge of facilitating communication between a client(s) and GBViE staff must ensure a survivor-centered approach, adhere to the GBV Guiding Principles and ethical standards, and be aware of the foundations of GBV response, for example what to do in case of a disclosure.

CHECKLIST - Does the interpreter/LCM:

Topic	Description of how interpreter/LCM can indicate they meet the requirement	~
Understand and implement a survivor-centered approach?	They encourage empathy with survivors of GBV, to understand the importance of respecting her wishes throughout the process as well as the importance to ensure informed consent.	
Follow and implement the GBV Guiding Principles?	They follow the GBV Guiding Principles which are well-established and accepted rules for behavior when interacting with survivors. They must be understood and respected by those who work with survivors, including LCMs and interpreters. Confidentiality Safety Respect Nondiscrimination Best Interest of the Child Determination (for children)	
Demonstrate Objectivity?	 Understand the emotional toll of working with GBV survivors and the need to maintain their professionalism and impartiality. Are aware of their own limitations and of the possibility to withdraw. Never give verbal or body language indication(s) that they consider a survivor's behavior, conduct or disclosures as inappropriate. Do not try to offer any additional services or assistance to the survivors. 	
Deliver messages accurately?	 They: Must relay what the survivor and service provider said accurately and completely (should not add or remove anything). Understand the cultural background of both the survivor and the service provider and use that knowledge to inform the communication process. Are familiar and comfortable interpreting sexually explicit terms and medical terminology, especially in the context of sexual violence 	
Avoid Abuse of Power?	 Understand that they: Should never request or accept any kind of services, rewards, benefits or bribes, from clients or others, for their benefit and/or for the benefit of others. Are not to determine whether the survivor's disclosures are truthful. Should not express any opinions on the way the case is progressing. 	

Practical considerations when working with LCMs

- It is important for interpreters and LCMs working in GBViE to be involved in context analysis, GBV risk analysis, brief and debriefs, and other relevant activities to support a better mutual understanding of what GBViE work entails and the context when working with survivors and women and girls at risk.
- LCMs and interpreters need to understand their own personal value systems, their beliefs, and how they shape their understanding of the world and their behavior, so that they can strive to be objective and accurate when relaying the content of the communication.
- In certain contexts, there can be real limitations to working with female LCMs or interpreters. In case you can only access male staff, you need to check the cultural appropriateness for them to work with survivors or women and girls at risk. Building trust with the clients is critical.
- Assess the pros and cons of working with interpreters and/or LCMs coming from the same communities as the survivors or women and girls at risk, as this may create concerns of objectivity or confidentiality for the clients.
- Discuss with interpreters and LCMs the limitations of verbal and non-verbal communication in order to improve the communication process.
- Discuss the basic elements of communication as a two-way process (encoding, transmission and decoding) in order to be aware of the potential barriers to effective communication.
- Discuss the importance of establishing a trusting, safe and supportive helping relationships with survivors to empower them into feel cared for and respected by the service provider.
- Brief interpreters and LCMs on the adequate and sensitive vocabulary to use that is discriminationfree.
- Facilitate capacity development for interpreters and LCMs on how to provide psychological first aid (PFA) and support survivors.

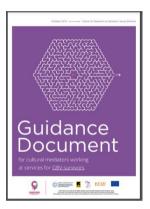
Considering the above, it is critical that interpreters and LCMs access relevant training to enable them to engage safely in GBViE programme activities

The examples below are resources which can support the capacity development of interpreters and LCMs:

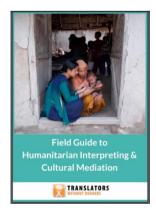
Supporting Survivors of Violence: The Role of Linguistic and Cultural Mediators, with a Focus on Gender-Based Violence and Sexual Violence against Men and Boys. A Training Curriculum (Women's Refugee Commission and UNICEF, 2021).



Guidance Document for cultural mediators working at services for GBV survivors (The Survivor Project, DIOTIMA, 2019).



Field Guide to
Humanitarian
Interpreting & Cultural
Mediation (Translators
Without Borders, 2017).



Interpretation/communication with survivors or women and girls at risk of GBV who live with a disability/disabilities

Worldwide approximately 15% of women and girls are living with disabilities. Women and girls living with different types of disabilities: physical, sensory, cognitive/learning etc. will also be experiencing GBV and need to access GBV specialised services. Failure to communicate effectively and appropriately with people with disabilities is a major barrier to delivering quality services and can cause harm. In addition to existing or potential language and/or cultural barriers for communication, serving clients with disabilities requires additional preparation, adequate skills and adaptation of our GBViE programmes to ensure they are inclusive and safe.

Ensure that interpreters and LCMs working in GBViE programmes follow these general recommendations:

- They should ask the person with a disability if special assistance is needed. Do not assume that help is needed.
- They should talk to people with disabilities as adults and talk to them directly rather than to an accompanying person.
- They should talk to people with disabilities in the same way and with a normal tone of voice (e.g., not shouting) as they would talk to anyone else.
- They should avoid being self-conscious about their use of wording.
- They should refer to "a person with a disability" or "woman/girl with disability" rather than "the disabled person" or "the disabled".
- They should use effective communication strategies: sitting or standing at eye level with the client, making appropriate eye contact, etc.

There are resources available that help us understand how to communicate respectfully and effectively with survivors and/or women and girls at risk of GBV who live with different types of disabilities. (Please see some examples of materials which can support effective and respectful communication with clients with disabilities). This information has to be made

¹ GBVIMS Steering Committee, *Interagency Gender-Based Violence Case Management Guidelines*, 2017, p139: https://gbvresponders.org/wp-content/uploads/2017/04/Interagency-GBV-CaseManagement-Guidelines Final 2017 Low-Res.pdf

available to interpreters and LCMs to allow them to prepare as well as to adapt the information that has to be provided to clients to formats that are accessible for them.

For example:

- sign language interpretation should be made available according to need and in ways that is culturally appropriate for the clients.
- Materials and information should be made available using easy to read formats, in audio or in braille.

Finally, it is critical to remind interpreters and LCMs that we MUST also apply the survivor-centered approach and the GBV Guiding Principles when serving clients living with disabilities.





Image credit: Shutterstock

Tips to consider

Preparation

- LCMs should receive training and be exposed to wider GBViE work in order to develop their competencies.
- LCMs should be briefed on their assignment, expectations, possible scenarios and key terms ahead of time.
- Check that the LCMs' use of both spoken languages is sufficient to discuss complex concepts.
- LCMs should possess sufficient language skills to interpret medical and legal terminology and have access to resources that will allow them to enrich these skills.
- Ask LCMs if they have any prior acquaintance of a survivor before the beginning of any session
- Ensure support is available for any potential emotional and mental impact of the activity for the survivor or the staff involved.

During

- Encourage the LCMs to make eye contact and speak directly to the survivor. Use short and concise sentences to facilitate the LCMs' work.
- Reassure clients regarding the LCMs' role and professional duty to respect confidentiality.
- During key moments, check that you and the client are understanding by asking then to summarize.
- Make sure that they do not express any judgment regarding a survivor's conduct, choices or experiences, either through verbal or non-verbal means.
- Be aware of cultural difference, body language or sensitivities which may affect an answer.

After

- Ensure you debrief with them after activities with clients.
- Seek additional training according to their needs and the challenges of the context.
- Make accessible to them support mechanisms as needed.
- Never use children or family members as interpreters or LCMs.

Resources / Further reading

This resource was developed as a compilation of advice and best practices published by GBV and other relevant organizations:

- Supporting Survivors of Violence: The Role of Linguistic and Cultural Mediators, with a Focus on Gender-Based Violence and Sexual Violence against Men and Boys. A Training Curriculum (Women's Refugee Commission and UNICEF, 2021).
- Guidance Document for cultural mediators working at services for GBV survivors (DIOTIMA, 2019).
- Field Guide to Humanitarian Interpreting & Cultural Mediation (TWB, 2017).
- Working with Mediators and Translators (GBV AoR Helpdesk, 2019).
- Working with Interpreters Collection of resources (Asian Pacific Institute on Gender Based Violence, 2010, 2015 and 2019).
- Disability Inclusion in Child Protection and Gender Based Violence Programs: Guidance on Disability Inclusion for GBV Partners in Lebanon (WRC and UNICEF, 2018). This resource contains a glossary of respectful terms to use to refer to people with disabilities.
- <u>Communicating with People with Disabilities</u> (ACED, 2017).
- <u>Emergency Handbook: Persons with</u> Disabilities (UNHCR, n.d.)
- <u>Including Children with Disabilities in</u>
 <u>Humanitarian Action</u> (UNICEF and Humanity & Inclusion, 2021).
- GBV Emergency Preparedness and Response: Inclusion of Diverse Women and Girls Guidance Note (IRC, 2019).

The GBV AoR Helpdesk

You can contact the GBV AoR Helpdesk by emailing us at: enquiries@gbviehelpdesk.org.uk

The Helpdesk is available 09.00 to 17.30 GMT Mon – Fri.
Our services are free and confidential.