

similar word in another language; avoid medical jargon whenever possible.

- Be aware that cultural differences may exist regarding views on puberty, sex, marriage, or pregnancy.
- Allow time after the interview for the interpreter to share something that he or she thought could not be said earlier; ask about the interpreter's impression of nonverbal clues to communication and family members' reliability or ease in revealing information.
- Arrange for family to speak with the same interpreter on subsequent visits whenever possible.

Communicating with families through an interpreter requires sensitivity to cultural, legal, and ethical considerations (see [Cultural Considerations](#) box). In some cultures, class differences between the interpreter and the family may cause the family to feel intimidated and less inclined to offer information. Therefore, it is important to choose the interpreter carefully and provide time for the interpreter and family to establish rapport.

## Cultural Considerations

### Using Children as Interpreters

When no one else is readily available to interpret, there may be temptation to use a bilingual child within the family as an interpreter. However, the use of children in health care interpreting is strongly discouraged, because they are often not mature enough to understand health care questions, answers, or messages ([American Academy of Pediatrics, 2011](#)). Children may inadvertently commit interpretive errors, such as inaccuracies, omissions, or substitutions. In addition, children can be adversely affected by serious or sensitive information that may be discussed. In some cultures, using a child as an interpreter is considered an insult to an adult because children are expected to show respect by not questioning their elders. Note that some institutions prohibit