

The population of the Montreal Urban Community

The territory of the Montreal Urban Community (MUC) is made up of 29 municipalities occupying a surface area of 496 km² (approximately 190 miles²). During the 1996 census, it had a population of 1 808 188 residents and represented 25% of the entire population of Quebec.

Unlike the rest of Quebec, Montreal's population is extremely diverse.

	Montreal	Rest of Quebec
Total population ¹	100%	100%
Ethnic origin other than French, British and Canadian	37%	5%
Immigrants	26%	4%
Mother tongue other than French or English	25%	4%
Unable to hold a conversation in French or English	3%	0,4%

More specifically:

- ❑ 116 000 persons immigrated between 1991 and 1996,
- ❑ 35 000 non-permanent residents live on MUC territory,
- ❑ 53 500 inhabitants cannot hold a conversation in French or English.

Montreal, like any other cosmopolitan metropolis, must deal with linguistic diversity on a daily basis.

Ten languages cover 70% of the needs of these 53 500 people. With only one exception, no language has more than 5 000 speakers who are unable to hold a conversation in French or English. In most cases, fewer than 1 000 people who speak a same language will need the services of an interpreter.

This represents quite a challenge when it comes to coordinating interpretation services.

Context

The Government of Quebec adopted French as the province's official language in 1974. The legislation nevertheless ensures access to education and health and social services in English for English speakers.

Furthermore, An Act Respecting Health Services and Social Services (R.S.Q. c S-4.2) provides for rules for adapting services to particular linguistic and ethnocultural characteristics (art. 2.5 and 2.7). It also defines user's rights (art. 4 to 16) and the responsibilities of institutions with regard to organizing their services in a way that takes into account the diversity of their population (art. 171).

In order to facilitate equal access on the part of immigrants who are not sufficiently familiar with the host society's language and culture, the *Régie régionale de la santé et des services sociaux de Montréal-Centre* (Montreal-Centre Regional Board) created the Inter-regional Interpreters Bank (hereafter Bank) in 1993 at the request of the Government of Quebec.

Since then, the Bank has extended its coverage to serve the Laval area in the North and the Montérégie area in the South, where there are approximately 10 000 inhabitants unable to hold a conversation in French or English.

Access for cultural communities

The Regional Board has incorporated access for ethnocultural communities in all of its recent endeavours.

It follows four major guidelines, including that of taking down barriers and limits to access by supporting inter-cultural training for managers and service providers, information, and interpretation, notably the Inter-regional Interpreters Bank.

The Cultural interpreter

The cultural interpreter is a skilled professional who transmits all of the information expressed by verbal and nonverbal communication in strict confidentiality.

The interpreter helps the client and the professional understand each other's cultural values, concepts and practices, from a neutral position and in a vocabulary that is adapted to the people he or she is interpreting for.

The interpreter's greatest asset is not only his or her knowledge, but also the ability to bridge two cultures.

Communication between those who give and receive care

In 1999, a Quebec Supreme Court ruling² recalled the importance of communication between the care receiver and the caregiver, stating that "when there is a lack of such communication, the withholding of care and services becomes inevitable."

In 1997, the Supreme Court of Canada had already recognized that effective communication was an integral part of medical services.³

Interpreter selection and quality therefore has an impact on the quality of care and services.

The Inter-regional Interpreters Bank: Noteworthy Facts in 2000-2001

Some figures:

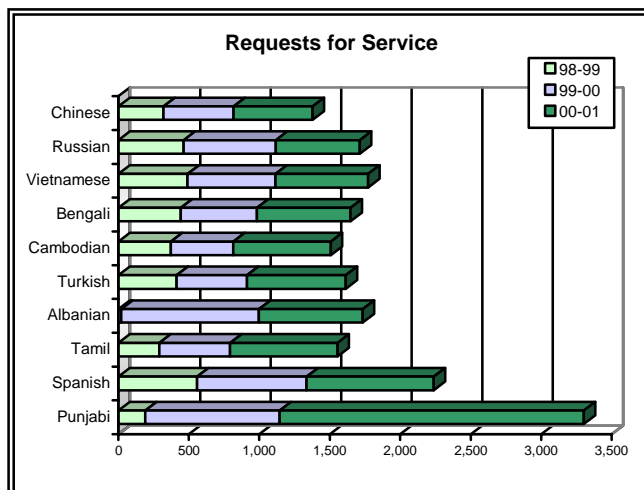
- ❑ Over 15 000 clients benefited from the services of an interpreter, not counting service providers.
- ❑ 11 159 requests for service, i.e., a 30% increase compared to the previous year.
- ❑ 19 582 hours of interpretation, i.e., a 28% increase.
- ❑ 300 institutions and schools received services and paid \$513 662⁴ in fees to the Bank.

On interpreters and translators

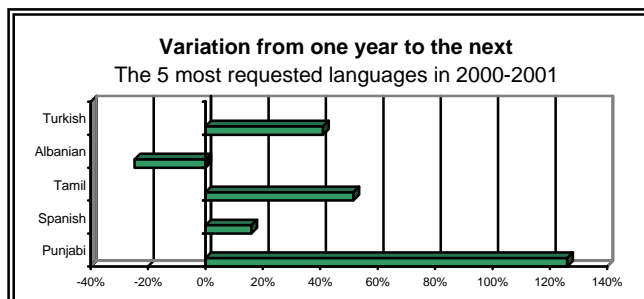
- ❑ 105 interpreters and translators. Four interpreters earned over \$30 000 in fees, 3 earned from \$20 000 to \$30 000, and 10 earned from \$10 000 to \$19 999. Average income was \$4 942, and median income was \$1 775.
- ❑ The highest fees were paid to five multilingual interpreters.

Fluctuating demand for languages over the years

- ❑ 44 service languages. Ten languages accounted for 75% of interpretation hours. Here are the most requested, in decreasing order of importance: Punjabi, Albanian, Spanish, Bengali, Tamil, Vietnamese, Turkish, Cambodian, Russian, Chinese (Cantonese, Mandarin...). They are the same ten languages as in 1999-2000, but the order has changed. For the first time, Punjabi is the most frequently requested language, accounting for 20% of interpretation hours.

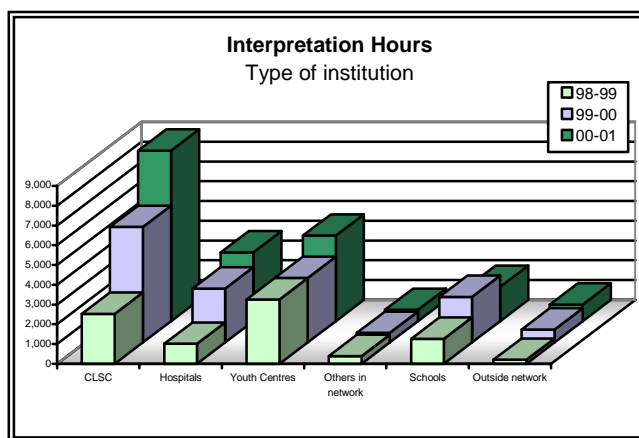


- ❑ With regard to less frequently requested languages, twenty-four languages accounted for 5% of interpretation hours.



The Montreal network as main user

- ❑ 84% of services were requested by Montreal institutions, 5% by southern and northern suburbs, and 9% by schools.
- ❑ 44% of interpretation hours were provided in CLSCs, 18% in hospitals and 22% in youth centres.
- ❑ 17 out of 25 general hospitals and 25 out of 29 CLSCs in Montreal called on the services of interpreters.
- ❑ Public Health translated the information on the Hepatitis B vaccine into 13 languages. The translations were made available to the 29 CLSCs.
- ❑ 7 community organizations working with clients with mental health problems or with victims of domestic violence requested interpreters.



Cooperation and influence

- ❑ First agreement with the City of Montreal to supply interpreters to the specialized centre for refugee status claimants, and renewal of the agreement with the Ministry of Education in the context of support measures for Montreal schools.
- ❑ Cooperation with the mini-course in interpretation in a social setting, given at the *Université de Montréal* for the first time in the spring of 2001.
- ❑ Symposium of decision-makers from various institutions and professional orders, aimed at achieving a better understanding of interpretation issues, and at mobilizing the resources required for a national lobby. Researcher Sarah Bowen, of the University of Winnipeg, was the guest speaker.
- ❑ Organizations came to see our management model: the Children's and Women's Health Centre of British Columbia, from Vancouver, and Health for All, from Boston.
- ❑ The 3rd International Conference *Critical Link: Interpreters in the Community* was held in Montreal from May 22nd to May 26th, 2001. Over 400 participants registered to attend the event at the *Université du Québec à Montréal*.

1 According to the 1996 Census
 2 Chinese Hospital of Montreal vs. the Canadian Public Service Workers' Union and the *Alliance des infirmières du Québec* – case: 500-05-043563-988
 3 Eldridge vs. British Columbia (Crown Prosecutor) – Clerk No.: 24896
 4 Canadian dollars