

**Joint-submission
on Vocational Training and Interpretation Services at Hospitals
for Ethnic Minorities**

Hong Kong Human Rights Monitor and Hong Kong Unison

1. The Government submitted a paper to the Bills Committee on Race Discrimination Bill about the vocational training and interpretation services at hospitals for ethnic minorities. The Committee will further discuss the issues at its meeting schedule on 16 April 2008. This submission by Hong Kong Human Rights Monitor and Hong Kong Unison aims at providing our views on the issues to facilitate the discussion of the Committee.

Vocational training

2. We note that Vocational Training Council (VTC) is now operating some basic vocational Chinese programme to teach basic Chinese to the ethnic minorities. We think it is a necessary step to help the ethnic minorities. However, the VTC should consider running more courses with different level/learning objectives for the ethnic minorities to learn Chinese. Most of them do not know about the program, the VTC should more actively promote the courses for ethnic minority communities. Also, the courses should be run at different districts besides Yuen Long, especially in the areas with concentrated ethnic minority populations such as Tin Shui Wai, Tuen Mun, Tung Chung, Tsuen Kwai, Yau Tsim Mong and Kwun Tong.
3. Currently there are two programmes, the Foundation Diploma (FD) and Certificate in Vocational Studies (CVS), tailor made for ethnic minority youth who are post-secondary 3 or 5. However, the choice is limited as only two streams are available, namely business (FD and CVS) and hospitality (FD). Since the potential, ability and interest of youth are highly diversified, more options should be provided.
4. A research should be conducted in order to better understand the demand and the interest of ethnic minority youth so that the courses being organized are more responsive to the needs of the ethnic minority youth.
5. Although IVE's language policy states English as the medium of instruction for most courses in IVE, the reality is that most of the teachers use Cantonese with supplemented English terminology only in the lessons and this adversely affects the motivation of ethnic minority students to attend the lesson. , especially for the Foundation Diploma and 4-years Higher-diploma course. In fact, apart from the two tailor made Foundation Diploma courses, only a few ethnic minority students are enrolled to other IVE courses.
6. Two of Unison's clients enrolled in two different IVE courses and campuses narrate the following experiences: Both of them don't understand Cantonese, they feel they are unwelcome in the lessons. Their Chinese counterparts seem uncomfortable with learning in English and even some of the teachers appear reluctant to teach in English. Therefore, the presence of the non-Chinese speaking students in the class room seems to invite hostility from and unhappiness to the teachers and local Chinese students. This unfriendly environment, in turn, lowers the learning motivation of the ethnic minority students. This classroom scenario provides a very poor example of racial equality and harmony.
7. We understand that lessons in English may sometimes be supplemented by explanations in Chinese to help those local Chinese students who may not have enough abilities to learn in

English. However, extra supports / measures should be provided to ensure that ethnic minority students can understand and follow the lessons so that they have equal base to write the exams and equal opportunities to be promoted.

Employees Retraining Board

8. According to the paper provided by the Administration, a total of nine full-time placement-tied training courses have been approved to provide support for the ethnic minorities. However, these courses do not help the youth of ethnic minorities much, because courses including “Security and Property Management”, “Local Domestic Helper” and “Environmental Hygiene and Cleaning Worker” are boring and often do not fit the needs of young people. The Employees Retraining Board should create and plan more different courses that meet and suit the need and potentials of ethnic minority youth.

Qualification Framework

The Qualification Framework will be formally launched in May 2008, when the Accreditation of Academic and Vocational Qualifications Ordinance will commence full operation. However, many ethnic minorities as well as other Hong Kong people are not familiar with the system. They do not know how the QF can help them in vocational training and job seeking

9. The Government should promote more on the QF so the ethnic minorities can be familiar with the system, and are able to choose the courses which will be recognized under QF. The related bureau when setting the QF should specially consider the situations faced by ethnic minorities so their skills can be fully recognized.

Interpretation services at public hospitals and clinics

10. In early April the Hong Kong Unison conducted a test on how the inquiries about interpretation services in public hospitals are responded, and the results were very unsatisfactory. Many telephone operators did not understand the word “interpreter” and they just directed the caller to another hotline. Some even replied that there was no interpretation service. (For the detailed report please refer to Appendix I: Responses to Inquiries about Interpretation Services).
11. The paper from the Administration states that “a list of court interpreters registered with the Judiciary is available for each hospital/clinic to call for interpretation service for patients in need”. However our test has revealed that , the need for an interpreter is left only to the doctors’ discretion, and patients are mostly unaware of the existence of the interpretation services.
12. The doctors usually are reluctant to call the interpreters for 3 possible reasons. i) Unwillingness to incur extra workload and devote additional consultation time from their already busy schedules ii) inability to recognize the communication problem and the need for interpreter, while the frustrated patient might be desperately feeling such need iii). The assumption on part of the doctors that if the patient feels the need for an interpreter, he/she will ask for it (the patient, of course, does not know of such service, so will not ask). . For these reasons, very often the interpreters are not called.
13. To make matter worse,, the number of interpreters is insufficient in Hong Kong and working for hospitals or clinics seems to be the lowest priority when compared to police stations and courts. First, it is their common practice to come to police stations and courts

rather than hospital/clinic. Second, the fee for the interpreter is standard for working at police station and courts, but not at hospitals or clinics. The fee thus may be lower for the interpreters to work at hospitals or clinics. We have received complaints from doctors that on many occasions the interpreters didn't show up having earlier agreed to the appointment .

14. According to the paper, the government said that the services provided by the Department of Health (DH) are of non-urgent nature and that prior arrangements could be made for patients who require interpretation services. In reality, such arrangements are rarely made. In one telling case a Nepalese boy who could not speak Cantonese or English visited DH with complaints of nasal discomfort. No interpretation services are provided and the doctors of DH kept on giving him Panadol at every consultation. The patient continued to suffer, finally after 3 years, a condition of serious sinusitis was diagnosed. This is one of the many examples, where the patient is deprived of an early diagnosis and proper treatment for lack of interpretation services.
15. In answering incoming calls in languages other than Chinese or English, the Government should ensure that the services of various departments could be reached by the ethnic minorities. It would be useless if the telephone operators cannot communicate with the callers, and just direct them to another hotline. We recommend that the Government establish a **central hotline** with different languages to choose from and that such lines be manned by recruiting ethnic minorities as the telephone operators. This will help provide equal access to governments services to all Hong Kong residents irrespective of their racial or linguistic background.

Examples from other Countries

It may be helpful to look at how similar situations have been tackled by other countries. We give below a few examples of support to ethnic minority in Australia:

16. TAFE NSW (“Technical and Further Education”, New South Wales) is the largest vocational education and training provider in Australia. TAFE NSW has translated select documents into more than 10 different languages for non-English speakers. These documents provide information about TAFE NSW services.
17. Different services are provided to non-English speakers to assist them to:
 - improve reading, writing, speaking and listening skills in English;
 - prepare to do further study in a course to gain a TAFE NSW qualification;
 - prepare for employment.
18. Institute Multicultural Education Coordinators (IMECs) are located at local TAFE NSW campus to provide services to non-English speakers. These services include interpretation services, advice on course selection to improve English language skills, advice on eligibility for entry to TAFE NSW courses and tutorial support in any vocational subjects and courses etc. Special units such as TAFE Multicultural Education Unit and The Multicultural Access Centre (MAC) library are established to provide different kinds of support services and resources to the non-English speaking students.¹
19. For the interpretation services, the Department of Immigration and Citizenship of Australia provides a Translating and Interpreting Service (TIS) for non-English speakers. TIS is

¹ For more details please refer to the website of TAFE NSW, <http://www.tafensw.edu.au>.

available 24 hours a day, and 7 days a week. The main services provided by TIS is telephone interpreting. Other services include on-site, face-to-face interpreting and a document translation service.

20. If anyone requires an interpreter to help access health services, s/he can contact one of the public health services for assistance or call the TIS. It is clearly stated that the Government Bureau has the responsibility to ensure essential interpretation services.²
21. The promotion for the TIS is satisfactory. The information of TIS is available on the internet with translated versions in more than 10 different languages. Also, publications for different ethnic community such as local newspaper will post the advertisement on TIS.

Conclusion: Broad language exemptions in the Race Discrimination Bill

The Race Discrimination Bill provides a broad language exemption in clause 58. According to the Bill, many services including vocational training services and medical services are not unlawful if they fail to use appropriate languages in any circumstances. This actually provides a basis for the discrimination against the ethnic minority. Therefore we urge the Government to make substantive improvements to the Bill as soon as possible for the consideration of Bills Committee. It should be noted that, the administrative policies listed in the paper should be implemented and that the administrative measures are only the supplements to the Bill, not the substitute to the bill amendments. They should not be used to replace the effective legislation.

Once again, We, Hong Kong Human Rights Monitor and Hong Kong Unison, urge the Government to guarantee that the bill, when enacted, is in line with the standard of the International Convention on the Elimination of All Forms of Racial Discrimination.

² For more details please refer to website of Department of Immigration and Citizenship, http://www.immi.gov.au/living-in-australia/help-with-english/help_with_translating/index.htm.



Appendix I: Responses to Inquiries about Interpretation Services in Hospitals

1. A Pakistani lady, Hong Kong Unison's client, enquired interpretation services of 6 public hospitals (9 different hotlines) and the Hospital Authority on 8th and 9th April 2008.
2. She understands both Chinese and English but spoke in **Urdu** (her mother-tongue language) during the inquiries.
3. C = the Pakistani lady
TO = Telephone Operator of hospital

No.	Hospital/ Authority	Hotline Name	Telephone No:	Response	Date
1.	Hospital Authority	One stop enquiry	23006555	<ul style="list-style-type: none">• TO didn't understand the word "Interpreter"• C has to repeat the word 'interpreter' several times• TO asked C the name of the hospital, then gave the enquiry number of that hospital to C	8 th April,2008
2.	Yan Chai Hospital	Patient Relation Officer	2409 2797	<ul style="list-style-type: none">• TO said they did not have Interpretation services• TO just said if C speaks English, she could come with the patient	8 th April, 2008
3.	Yan Chai Hospital	Appointment for Specialist Outpatient Service	2417 8825	<ul style="list-style-type: none">• TO said they could not help and told C that she needed to call the nurse of the concerned department.	8 th April, 2008



4.	Princess Margaret Hospital	Service Enquiry	2990 1210	<ul style="list-style-type: none">• TO didn't understand the word "Interpreter" and asked other information such as address, referral letter as she misunderstood C's need• TO told that there was interpretation service only for admitted patients if they needed it	8 th April, 2008
5.	Princess Margaret Hospital	General Enquiry	2990 1111	<ul style="list-style-type: none">• The first TO didn't understand what C said and passed the phone to another staff.• The another staff said they had translation service but needed the details of appointment to see if the interpreter will be available on the date. Asked to call again with the information	9 th April, 2008
6.	Queen Elizabeth Hospital	Direct Enquiry	29588888	<ul style="list-style-type: none">• TO said there was no interpretation service in A&E. In other departments, it was up to the doctor to decide if an interpreter was needed.	8 th April, 2008
7.	Kwong Wah Hospital	General Enquiry	2332 2311	<ul style="list-style-type: none">• The lady TO just didn't understand what C was saying and directed C to another number.	9 th April, 2008



8.	Caritas Medical Centre	General Enquiry	3408 7911	<ul style="list-style-type: none">• TO didn't know the word "Interpreter", C needed to tell she couldn't speak English or Cantonese many times to make TO understand. Finally TO said they did have this service.• TO Asked which language C needed, and was confused as the TO didn't know what "Urdu" was.	9 th April, 2008
9.	Caritas Medical Centre	Patient Relations officer	3408 7079	<ul style="list-style-type: none">• TO said they had interpretation service but needed all the details regarding the appointment for processing the request for an interpreter.	9 th April, 2008
10.	United Christian Hospital	Patient Relations officer	35134080	<ul style="list-style-type: none">• The first TO didn't understand the word "interpreter" and passed the line to another staff member.• the other staff member said they had the translation service but needed to check all information regarding the appointment, and asked C to call again	9 th April, 2008