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Sign Language Interpreters and Burnout

Tomina Schwenke, CI and CT

Abstract
The process of burnout was explored within the interpreting population using social support and decision latitude as possible influential factors. A sample of 117 interpreters attending the 2009 biennial Registry of Interpreters for the Deaf national conference participated in the study. Demographic factors, occupational strain variables and levels of burnout were measured. A regression method of statistical analysis was used and decision latitude was found to be the strongest variable, which contributed modestly to emotional exhaustion, a component of burnout. Overall, this sample reported average levels of the three components of burnout, which include emotional exhaustion, depersonalization, and personal accomplishment. Given these findings, it is suggested that the interpreter’s resources (controls or decision latitude) play a role in the work of sign language interpreters.

Keywords: sign language interpreters, burnout, emotional exhaustion, occupational risks, decision latitude.

Sign Language Interpreters: Occupational Risks and Burnout

Theories of occupational strain have been developed by incorporating the insights of social learning and adult education theory and regarding the basic human needs for activity, freedom, and competence and control (Landsbergis, 1988). Karasek (1979) explicitly incorporated the variables of control (decision latitude), psychological demands and socialization (activity level) to explore job strain when he developed the job demand-control (JD-C) model. Basically, the model recognizes a relationship between occupational stress and work satisfaction. More specifically, the model recognizes influential factors such as challenges, or demands, and perceived resources, also known as controls or decision latitude. The application of the model has been widespread, particularly...
in empirical research on occupational health issues related to social epidemiology, behavioral medicine, and psychosocial job analysis to explore mental strain, cardiovascular diseases, musculoskeletal disorders, diabetes, cancer, psychiatric illness, gastrointestinal illness, occupational and traffic accidents, suicides, alcohol-related diseases, absence from work, sleeping problems, depression, reproductive problems, anxiety, work satisfaction, and quality of life (Kristensen, 1996).

Dean and Pollard (2001) are well known for their theoretical development and empirical driven research related to the stressors influencing the work of sign language interpreters. They use the demand-control (D-C) schema, which was adapted from D-C theory (Karasek, 1979) as a model to apply to the practice of interpreting. As such, by attending to relevant demands and controls, assignment related dynamics and factors, which influence effective interpretation, are explored. Rather than focusing exclusively on the linguistic demands of interpreting, Dean and Pollard’s (2001, 2010) analysis focuses on environmental, interpersonal, and intrapersonal factors. Consistent with the work of Karasek (1979), Dean and Pollard conceptualize controls as skills, abilities, decisions, characteristics, and other resources that an interpreter can use to respond to the various work assignment demands. Specific to the interpreter, controls can be related to education, experience, preparation, and specific choices made regarding the interpreting process (Dean & Pollard). Consistent with Karasek, these controls, or decision latitude, are resources that can be influential when faced with demands.

Dean and Pollard (2001) theorized that interpreters are often placed in highly demanding high-strain working situations. It has been suggested that some possible reasons for high occupational stress may be related to confidentiality standards, as well as training and support (Dean & Pollard). Clearly, the issue of social support for the sign language interpreter is a complex one. As Dean and Pollard note, professional confidentiality standards, as well as limited opportunities for confidential supervision, provide a challenge for interpreters needing to process difficult work experiences. Given the unique structure of interpreting, the noted level of demands related to the job, and the high level of work related strain, it seems reasonable that interpreters would be experiencing a level of stress that would be influential to their work. The D-C schema provides information regarding the tension between demands and controls that helps to analyze the complex process of interpreting. In the application of D-C schema to burnout, it is hypothesized that sustained demands that exceed controls will result in emotional exhaustion, depersonalization and a lack of personal accomplishment.

**Burnout**

The relationship between stress and burnout has been established in the research. In fact, a clear distinction between burnout and stress has not clearly been delineated. More accurately, burnout is a “chronic affective response pattern to stressful work conditions that features high levels of interpersonal contact” (Cordes & Dougherty, 1993, p. 625). Stress theorist Schuler (1980) described the role of uncertainty about one’s ability to handle the demands of a job. Burnout is described as “a response to a high level of chronic work demands, entailing very important interpersonal obligations and responsibilities” (Cordes & Dougherty, p. 640). Conceptualized as a kind of work-related stress, burnout is a pattern of emotional exhaustion, depersonalization, and diminished personal accomplishment that results from excessive work demands, especially those of an interpersonal nature (Cordes & Dougherty).

Burnout has been described as “a syndrome of emotional exhaustion and cynicism that occurs frequently among individuals who do ‘people-work’ of some kind” (Maslach & Jackson, 1981, p. 99). Central to the concept of burnout is that it is a process by which an individual begins to experience an increased feeling of emotional exhaustion which leads to a general feeling of being depleted of the emotional resources needed to psychologically give of themselves (Maslach & Jackson). The first concept, defined as emotional exhaustion, combines experiences of stress with negative evaluation of self and relationships with others. Emotional exhaustion is considered to be the first stage of the burnout process and is the core concept of burnout. Role conflicts are seen as particularly problematic and can make an individual susceptible to feelings of emotional exhaustion (Cordes & Dougherty, 1993).

Depersonalization and personal accomplishment are two additional components of burnout. The second part of the process of burnout which is referred to as depersonalization,
or cynicism, in which negative attitudes such as callousness and dehumanizing feelings develop towards clients. A third and final aspect of burnout is personal accomplishment—a concept that relates to one’s tendency towards negative self-evaluation, which can lead to generalized feelings of dissatisfaction regarding professional performance and accomplishments. Research has suggested that burnout can “lead to a deterioration in the quality of care or service that is provided by the staff” (Maslach & Jackson, 1981, p. 100) and has been suggested to be a factor in “job turnover, absenteeism, and low morale” (Maslach & Jackson, p. 100). Burnout has also been associated with numerous psychological and medical problems such as insomnia, substance abuse issues, marital problems, and fatigue (Maslach & Jackson, 1996).

Burnout is contrasted with the concept of work engagement, depicting a situation that develops over time and is influenced by factors such as age, years of experience, job stress and perceived social support. Maslach and Leiter (1997) characterize the individual who is engaged in work as showing energy, involvement and professional efficacy. In contrast, burnout is described as an erosion of engagement in one’s work in which one’s energy turns into exhaustion, involvement is replaced by cynicism, and the ability to be efficient turns into ineffectiveness (Maslach & Leiter, 1997). The process of burnout has consistently been associated to the antecedents of work overload, limited support, role conflict, and role ambiguity (Devilly, Wright, & Varker, 2009). Additionally, research findings suggest that burnout is more prevalent in those ‘helping professionals’ who are younger (under the age of 30) and this is confounded by issues related to work experience and workload (Devilly, Wright, & Varker). In studies of therapists and burnout, job stress and support of supervisors and colleagues has been consistently associated with burnout (Devilly, Wright, & Varker). In addition to work pressure, the issues of autonomy and decision-making have consistently had a negative relationship with the central aspect of burnout, emotional exhaustion (Bakker, Demerouti, & Verbeke, 2004).

**Interpreters and Stress**

Sign language interpreters are a heterogeneous group composed of individuals with distinct demographic profiles and skills, who work in a variety of settings. Given the diversity within this group, making generalizations becomes difficult; yet, there are common threads that tie members together into a group known as sign language interpreters. It is this unique and recognizable diverse group that will be discussed while looking at occupational factors and issues of burnout.

The relationship between interpreters and stress has been an investigated topic within the research (Branam, 1991; Heller, Stansfield, Stark, & Langholtz, 1986). Dean and Pollard (2001) talked about a lack of decision latitude, or control resources, such as confidential supervision, as contributing factors to increased illness, injury, turnover rates, and burnout rates. McCartney, (2003) looked at possible predictors of burnout in a sample of educational interpreter. The fact that interpreters experience high work demands lead us to be concerned about stress and burnout, and Jackman (1999) suggested that these factors partially account for the national interpreter shortage.

In the sign language interpreting profession, individuals can experience various career choices, professional identities, and work experiences. Thus, the work experiences of each interpreter will vary considerably from that of another interpreter. Additionally, an interpreter may have a schedule that varies considerably from day to day, or based on the week or season. Interpreters may show variation in job factors such as location/setting, work hours, level of oversight/supervision, and responsibilities. Further, interpersonal differences such as personality and coping resources and duration of time in the field will vary from interpreter to interpreter. Given the variability of this group and prior research findings, differences such as individual resources, social support, workload, scheduling, and duration of time working as an American Sign Language/English interpreter were considered in this exploratory study, which focused on demographic characteristics, environmental factors, and occupational stressors. The intended focus of this research was to investigate how factors such as perceived control (e.g. decision latitude) and social support (e.g. co-workers support) influence or explain reported levels of burnout.

It was hypothesized that the occupational demands placed on sign language interpreters would contribute to high levels of burnout. Another hypothesis was that personal and occupational variables (i.e., years of experience, hours worked, social support, and decision latitude) would contribute to
resulting levels of burnout. Due to the concept that burnout is a result of chronic stress that results in decreased energy, erosion of engagement with the job, and decreased efficacy (Maslach & Leiter, 1997), the number of years in the profession was expected to be a contributor to higher levels of burnout. Little is known about the variety and range of coping strategies that successful sign language interpreters employ; however, the role of high levels of social support was hypothesized to be advantageous. It was hypothesized that higher levels of self-reported, perceived co-worker support would result in decreased burnout levels. Furthermore, higher reported levels of resources were expected to correlate with lower levels of burnout.

**Method**

**Participants**

Participants included 117 sign language interpreters who were in attendance at the 2009 Registry of Interpreters for the Deaf National Conference. Demographic information was collected and compared to the 2009 Registry of Interpreters for the Deaf annual report data (see Table 1). This sample included 25 men (21.4%) and 92 women (78.6%). Of the interpreters, 83.8% were White/Caucasian, 5.1% were African American/Black, 6% were Hispanic or Latino, 1.7% American Indian or Alaskan Native, Hawaiian or Pacific Islander, 1% were Asian American, and 2.6% indicated Other as their ethnicity. The majority of the participants reported working predominantly in freelance community situations (41.0%), educational settings (24.8%), video relay service call centers (20.5%), government agencies (6%), and Other (7.7%) environments. Of those surveyed, 41% reported having someone in their family (e.g. parent, sibling, child, partner) who was deaf. Individuals reported their sexual orientation to be 5.1% bisexual, 67.5% heterosexual, 23.9% lesbian/gay, and 2.6% celibate.

Regarding educational background, 9.4% of individuals reported completing high school, 22.2% associate-level training, 38.5% reported completing BA/BS degrees, 21.4% master’s degrees, 3.4% doctoral degrees, and 4.3% Other. The sample consisted of 9.4% pre-certified interpreters, 76.1% certified, and 14.5% certified interpreters with specialist certifications. The participants reported the following work experience: 1-5 years (12%), 6-15 years (35%), and 16-25 years (32.5%), 26-35 years (16.2%), and over 35 years (2.6%). The age of participants ranged from 24 to 63. The mean age was 42.79, the median was 42, and the mode was 39 years.

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<th>Table 1</th>
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<td>Heterosexual</td>
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Note. RID: Registry of Interpreters for the Deaf 2009 Annual Report Membership Statistics. 15,010 was total membership. Demographic information was of those reporting. (VIEWS, 2010)
Table 1. Socio-demographic and occupational activity among a sample of sign language interpreters (N=117)

**Procedures**

Interpreters attending the 2009 Registry of Interpreters for the Deaf National Conference (Philadelphia, PA) were invited to participate in a study of “Sign Language Interpreters and Burnout.” Interpreters were compensated for their time by a charitable contribution, which was made to the American Association of the Deaf-Blind. Data were collected using a paper and pencil survey, which was completed on-site at the national conference. Interpreters were able to complete the survey immediately or were given the option to return it at a later time during the conference. Institutional Review Board (IRB) approval was obtained through Georgia State University prior to data collection and in accordance with federal law and institutional requirements regarding research that involves human subjects/participants.

**Instruments**

**Job Content Questionnaire.** The Job Content Questionnaire (JCQ; Karasek, 1985) was designed for...
psychosocial job assessment and can be used in different formats according to the needs of the user. The JCQ consists of several scales, but most studies do not use the full questionnaire (Karasek, Brisson, Kawakami, Houtman, Bongers, & Amick, 1998). The most consistently used scales include the decision latitude, social support, and psychological job demands (Karasek et al.), and these three scales were administered to participants as these were thought to be most relevant to the interpreter population. The subscales consisted of a four-point Likert-type rating scale ranging from 0 (Strongly Disagree) to 3 (Strongly Agree). The JCQ decision latitude subscale included items related to skill discretion and decision authority. The subscale consisted of 10 items; including “My job requires that I learn new things” and “I have a lot of say about what happens on my job.” The psychological demand scale consisted of five items with questions such as “My job requires working very hard” and “I am free from conflict in demands that others make.” The social support subscale included items related to supervisor support and coworker support. This subscale consisted of 11 items in total; however, the subscale could be further divided into five items related to supervisor social support and six items related to co-worker social support. Items within the co-worker social support arena included “The people I work with encourage each other to work together” and “People I work with are competent in doing their jobs.”

The JCQ was not designed specifically for interpreters, so it is not surprising that several individual items did not entirely fit with the occupational demands of the interpreting profession. For example, a sample question included, “I have enough time to get the job done.” This likely did not apply to the work of interpreters because their work occurs in ‘real-time.’ In other words, when an interpreter completes an interpreting assignment, the work is complete, thus not requiring additional paperwork or time. As a result of the poor fit of these items to the work of interpreters, many participants did not elect to complete items pertaining to the psychological job demands subscale. This subscale was excluded from the subsequent analysis as a result of missing items. Similarly, many sign language interpreters do not have traditional supervisors. The sample consisted of a majority of freelance interpreters who work as independent contractors; thus, the concept of supervisor support was less relevant. As a result of the poor fit of these items to the work structure of this sample of interpreters, the supervisor social support subscale was excluded from the subsequent analysis.

Numerous analyses (Kristensen (1989, 1996 Marmot & Theorell, 1988; Schnall & Landsbergis 1994; Theorell & Karasek, 1996, 1998) revealed that the JCQ scales demonstrated substantial predictive validity with respect to stress-related chronic disease in international and U.S. research. Schwartz and Pieper (1997) determined test-retest reliability by using occupation as the unit of analysis, and in all cases the correlation is above .9. Scale reliability from Karasek, Choi, Ostergren, and Ferrari (2003). report the subscale information such that the male and female samples respectively yield alpha coefficients of .776 and .772 for decision latitude; .704 and .614 for psychological demands; and .840 and .831 for social support. The construct of decision latitude (skill discretion and decision authority subscales) has been identified as the most statistically reliable of the job dimensions. Social support was reported to have high test-retest reliability. Adequate validity for the scales was established, and internal consistency for the study was .774 (Schwartz & Pieper, 1997).

Karasek et al. (2003) reported adequate reliability for the following subscales: skill discretion (α = 0.73 men; α = 0.72 women); decision authority (α = 0.63 men; α = 0.66 women); psychological demands (α = 0.59 men; α = 0.61 women); supervisor support (α = 0.85 men; α = 0.86 women); and coworker support (α = 0.79; men; α = 0.80 women). For the current study, reliability coefficients were as follows: Decision latitude (α = .46); social support (α = .85); supervisor support (α = .96); and coworker support (α = .67).

Maslach Burnout Inventory-Human Services Survey

Burnout was assessed using the Maslach Burnout Inventory-Human Services Survey (MBI-HSS; Maslach & Jackson,1981), which is a 22-item measure that contains three subscales that measure different aspects of experienced burnout. There are also versions of the Maslach Burnout Inventory for educators and the general population. Occupations represented in the Human Services Survey development sample include police officers, nurses, social workers, probation officers, attorneys and others. Within the three burnout areas, there are nine items in the emotional exhaustion (EE) subscale, five items in the depersonalization (DP) subscale and eight items in...
the personal accomplishment (PA) subscale. The emotional exhaustion subscale includes items such as, “I feel emotionally drained from my work” and “I feel burned out from my work”. The depersonalization subscale items include, “I feel I treat some recipients as if they were impersonal objects” and “I worry that this job is hardening me emotionally”. In the personal accomplishment subscale questions are asked such as, “In my work, I deal with emotional problems calmly” and “I feel I’m positively influencing other people’s lives through my work.” Items were assessed with a 7-point Likert type scale ranging from 0 (Never) to 6 (Every day).

Burnout subscales can be utilized to look at the overall experience of burnout. Each respondent’s scores on subscales were assigned a code for the categories of low, average, or high levels. For instance, a high degree of burnout is established when the scores on the emotional exhaustion subscale and depersonalization subscales are high and the scores on the personal accomplishment subscale are low. An average degree of burnout is depicted when there are average scores on all three subscales. A low degree of burnout is established when scores are low for the emotional exhaustion and depersonalization subscales and high scores are presented for personal accomplishment. Although an overall level of burnout is calculated using the categories mentioned above, it is not recommended that an overall burnout score be computed or used (Maslach, Jackson, & Leiter, 1996). Furthermore, it has been determined that the emotional exhaustion subscale is most related to the construct of burnout (Maslach & Jackson, 1981).

Internal consistency was estimated based on a sample of 1,316 participants within the human services professions using Cronbach’s coefficient alpha. Reliability coefficients were established for each of the three subscales and were .90 for emotional exhaustion, .79 for depersonalization, and .71 for personal accomplishment. Adequate validity for this scale was established. In the current study, reliability coefficients were as follows: Emotional exhaustion (α = .91); depersonalization (α = .70); and personal accomplishment (α = .53) (Maslach & Jackson, 1996).

Results

Descriptive Statistics

The means and standard deviations for emotional exhaustion (M = 17.13; SD = 10.15), personal accomplishment (M = 37.85; SD = 6.36) and depersonalization (M = 5.39; SD = 4.35) can be compared to other professions, which have been studied empirically. Maslach, Jackson and Leiter (1996) made comparisons with professionals working in the area of mental health (n = 730) and medicine (n = 1,104). These comparative samples had respective mean and standard deviation scores on emotional exhaustion (M = 16.89, SD = 8.9; M = 22.19, SD = 9.53), personal accomplishment (M = 30.87, SD = 6.37; M = 36.53, SD = 7.34) and depersonalization (M = 5.72, SD = 4.62; M = 7.12, SD = 5.22).

Table 2

<table>
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<tr>
<th></th>
<th>EE</th>
<th>DP</th>
<th>PA</th>
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<tr>
<td>Low Burnout</td>
<td>64</td>
<td>54.7</td>
<td>77</td>
</tr>
<tr>
<td>Average Burnout</td>
<td>31</td>
<td>26.5</td>
<td>34</td>
</tr>
<tr>
<td>High Burnout</td>
<td>22</td>
<td>18.8</td>
<td>6</td>
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Table 2. Categorization by frequency and percentage of MBI Scores (N=117)

Interpreters within this sample reported varying levels of burnout. The majority of interpreters reported overall low or average levels of burnout. It should be reiterated that the MBI subscales were not equally weighted as the emotional exhaustion subscale contained nine items, the personal accomplishment subscale contained eight items and the depersonalization subscale contains five items. It is noteworthy that comparatively few interpreters reported high levels of burnout (see Table 2). For instance, 18.8% of participants reported high levels of emotional exhaustion, 5.1% reported high levels of depersonalization, and 15.4% reported high levels of personal accomplishment. This is in contrast to the frequency and percentage of reported low levels of emotional exhaustion (54.7%), depersonalization (65.8%), and personal accomplishment (53%).
As shown in the correlation matrix (see Table 3), the three subscales for burnout and the variables of years of working, decision latitude, and co-worker support were examined. Decision latitude was negatively correlated with all three burnout scales. Additionally, the number of years working and number of hours working were not related to any burnout subscale.

Three separate hierarchical regression analyses were conducted to examine the possible influences of decision latitude and social support (co-workers) on level of burnout for sign language interpreters. The three components of burnout (i.e. emotional exhaustion, depersonalization, and personal accomplishment) were considered as dependent variables in the regression models. Independent variables included decision latitude and social support (specifically co-worker social support). Since the number of years working and the number of hours working were not correlated with any independent or dependent variables, they were not included in the regression analyses.

In the first regression analysis examining emotional exhaustion, the variables of decision latitude and co-worker support accounted for 7% of variance of emotional exhaustion type burnout ($adj R^2 = .071$). There was a statistically significant effect for emotional exhaustion $F_{(3,113)} = 3.95$, $p < .01$. The strongest variable contributing to emotional exhaustion was decision latitude ($Beta = -.241$, $p < .05$) (see Table 4). Effect sizes are reported in the form of $R^2$ (Trusty, Thompson, & Petrocelli, 2004). The effect size of the regression analysis investigating emotional exhaustion was 10%. The second regression analysis predicting depersonalization was not statistically significant. The effect size of the regression analysis investigating depersonalization was 4%. In the third analysis investigating personal accomplishment, the independent variables of decision latitude and co-worker social support significantly accounted for 6% (adjusted) of the variance of personal accomplishment type burnout. Again, the strongest variable was decision latitude ($Beta = -.277$, $p < .01$) (see Table 4). The effect size of the regression analysis investigating personal accomplishment was 9%.
Discussion

The purpose of this study was to contribute to the extant research on the influence of occupational risk factors on burnout. The first hypothesis was that interpreters would experience high levels of burnout. These data regarding burnout were generally consistent with the literature (e.g., Dean & Pollard, 2010). Additionally, when comparing the mean and standard deviations for the MBI subscales scores to other professions, the mean and standard deviation scores for mental health and medical professions were similar.

Emotional exhaustion, depersonalization and personal accomplishment frequencies and percentages indicated that a majority of the participant’s scores were in the lower levels for burnout. This suggests that while a majority of interpreters reported low or average levels of burnout, several others within this sample reported experiencing high levels of burnout. In regards to the first hypothesis, some members in this sample did report burnout in the high range in the three categories (EE, DP, PA). The percentage of interpreters that experience high levels of emotional exhaustion (EE) suggests that some of the individuals within the sample are likely experiencing ongoing fatigue, strain, frustration, and drained throughout the workday. The depersonalization (DP) scores suggest that interpreters typically continue to be caring towards those they work with and generally do not feel calloused towards others. Given these findings it appears that some interpreters are distancing themselves psychologically from their work which may provide an emotional buffer as a coping strategy. Personal accomplishment (PA) scores were generally in the low range; however, there were a number of participants in the high burnout range indicating that for numerous interpreters, there is a concern about managing emotional problems and positively impacting the lives of others. Participants in this sample likely continue to hold optimistic expectations about their ability to contribute to the profession and feel adequate in their ability to perform their job.

A majority of those individuals who participated in the study were freelance interpreters, a factor that should be considered. Results from prior research (Dean & Pollard, 2010) indicate that freelance interpreters consistently experience lower levels of occupational strain when compared to interpreters working in video relay and educational settings. Considering that this sample consisted of substantially more freelance interpreters (see Table 1), the results may be somewhat skewed to reflect lower levels of burnout.

Regarding the burnout models, the occupational variables (e.g., decision latitude and coworker social support) only explained about 10% of the variance. This calls into question whether or not these are important factors when considering burnout. Since the factors explained a low percentage of the variance of types of burnout, there are clearly additional factors contributing to burnout. Possibly, variables related to personality, perceptions of stress, and coping strategies may be helpful explanatory variables and should be considered in future studies related to burnout.

It was hypothesized that personal and occupational variables, such as years of experience, hours worked during the week, perceived control and support may uniquely contribute to burnout outcomes. It was considered that emotional exhaustion and depersonalization, in particular, may increase and personal accomplishment decreases as a result of experience or age. Therefore, years of experience was categorized into six blocks of time ranging from no experience to over thirty-five years of experience. It was found that years of experience did not contribute, or predict, burnout levels. The number of hours worked per week was additionally considered to be a possible contributing factor in the process of burnout but was not related to burnout. Although work experience and workload has been associated with burnout (Devilly, Wright, & Varkey, 2009); related concepts such as hours of work per week and years of experience did not relate to the construct of burnout. It may be that these factors do not accurately reflect the experience or workload of an interpreter. For instance, while interpreters may be interpreting less than forty hours a week, they may also be responsible for a variety of other teaching, administrative, or leadership tasks. Thus the variables of social support and decision latitude were analyzed without concern for possible contributing effects from years of experience or hours worked per week.

It was hypothesized that occupational variables, such as co-worker support and decision latitude may uniquely contribute to burnout. The variable of social support was expected to be a factor that would potentially serve as a buffer for burnout. As co-worker support increased it was expected that burnout levels
would be reduced; however, these data did not support this hypothesis. Co-worker social support, as measured by the JCQ, was not determined to be a statistically significant variable. Given the correlation results between the constructs of social support and decision latitude, it is possible that these two variables may be measuring related concepts. Thus, support may play a role that is difficult to determine separately from decision latitude. Furthermore, for interpreters, the idea of co-worker support may be conceptualized differently, possibly skewing results. Given that many interpreters, particularly freelance interpreters, are not at one consistent location and may not work with the same partners or professionals, the participants in this study may have found the concept of “co-worker” less applicable to their work then individuals in other professions (e.g. teachers, nurses, counselors, etc.).

A second hypothesis was that control, as measured by the variable decision latitude, would be a predictive variable regarding burnout. In general, higher levels of decision latitude on the job are expected to contribute to lower levels of burnout. The opposite relationship was also found to exist in which lower scores for decision latitude reflected higher levels of burnout. Results suggest that higher levels of autonomy and opportunities to utilize one’s skills are important factors related to perceived control. Likewise, in settings where decision latitude is restricted, stymied or discouraged, it is speculated that interpreters may experience higher occupational stressors and eventually may experience higher levels of burnout. It would seem reasonable to suggest that in settings in which the interpreter experiences greater levels of control that there would be advantages including potentially lower reported intensity of job strain and rates of burnout. Decision latitude accounts for a small amount of the variance, and additional variables are likely contributing to experiences of burnout.

Limitations

There are a few limitations to consider before generalizing the results. First, it is worth considering the influence of the conference’s location and the possible differences between a sample of conference attendees and the general membership. Regional differences may have influenced the sample as the conference drew more interpreters from the mid-Atlantic region and the east coast (Nettles, 2010). Demographically, the sample reflected the gender, racial and ethnic diversity of RID membership. Specifically, of the 15,010 members of the Registry of Interpreters for the Deaf, approximately 87% are female, and 79% of the sample was female. Ethnically and racially, 88% identify as white (Nettles, 2010), and 84% of the sample identified as white. These general demographic statistics provide some means of comparison but only superficially capture the complexity of this nuanced group. It is possible that participants at the conference may be connected to the profession (e.g. lecturers, committee members), have differing levels of socioeconomic status and financial resources (e.g. an ability to pay for travel, food and lodging, conference fees), and flexibility in family structures (e.g. are not responsible for caring for elderly parents or small children). Secondly, this research design restricted the participation to those individuals who were in attendance at the national conference and willing to volunteer to complete a paper and pencil survey. An online survey might have provided for a more diverse sample. Third, only three subscales of the JCQ were administered and only two were used as variables for the statistical analysis. This decision limited the data available for analysis. Fourth, the variance was low, suggesting that other variables, which were not tested, are influencing the work, and burnout, of interpreters. Fifth, a larger sample size would be needed for statistical power analysis based on work setting and gender differences factors. Looking at the primary settings where interpreters work and looking at possible gender differences may provide information helpful in explaining burnout.

Implications for future research

Despite the limitations, the current study represents an attempt to examine the issue of burnout within the profession of sign language interpreters. Specific efforts were directed at determining occupational factors that may contribute uniquely to burnout. Future investigation in this area may benefit from collecting data from a less restricted sampling pool by providing online access. Longitudinal research design may provide opportunities to look more closely at the career paths of interpreters at differing points. Periodic contact and qualitative research could provide detailed information regarding the process of burnout within the profession.

The idea of decision latitude as an influential factor, should
be explored further to see qualitatively how individuals assert control, perceive the role and responsibility of the interpreter, and interact with the deaf community. This survey did not investigate issues of perceived stress or potential buffers such as specific coping resources, but these concepts do seem to be influential factors for preventing burnout. The issue of burnout is inversely related to job satisfaction. Therefore, examining the outcomes of work satisfaction and possibly more broadly life satisfaction could provide additive information.

Future qualitative, quantitative, or mixed methods studies that address issues of identity and community affiliation as possible predictors of burnout may provide more information about the members of the interpreting community. For example, within this sample a majority of individuals reported that there was a member of their family that was deaf and used sign language to communicate. Specifically, 59.8% of the interpreters surveyed reported a deaf member within the family, while 40.2% reported that there was not a deaf individual within the family. This brings up questions regarding the possible array of experiences within and between these groups based on cultural affiliation, professional credibility and community acceptance. Although not explored in previous research or in this study, the experiences of a Certified Deaf Interpreter (CDI) within the profession would be a valuable area for future research. CDIs have a unique niche within the profession and may experience differing occupational stressors, coping strategies and vulnerabilities to burnout. In general, a study that compares a sample of hearing interpreters with deaf interpreters may be of interest and benefit to practitioners.

Interpreting Implications

Interpreter education programs are uniquely positioned to play an important role in the careers of graduating interpreting students. These results suggest that interpreters who perceive they have greater control within their environment may be at an advantage since this group was found to have lower levels of burnout. Exploration of Karasek’s demand-control model with attention to the benefits of decision authority and skills discretion may help student interpreters analyze their work environments and their own cognitive and behavioral experiences more acutely. For seasoned interpreters, the demand-control model can be applied when assessing an occupational environment, consulting, and debriefing. Additionally, Dean & Pollard’s (2001) application of Karasek’s model to sign language interpreters continues to be a valuable assessment tool for mentoring and supervision. Intuitively, it seems possible that the analyzing, predicting, and processing of job demands and controls may provide a buffer from burnout.

In conclusion, decision latitude was the most important explanatory variable in our model for sign language interpreters. Interestingly, co-worker social support, hours working per week, and years working in the field were not unique predictors of burnout in the interpreting sample. These results suggest the importance for interpreter educational programs and for continuing education opportunities to consider the various ways in which higher perceived interpreter control may protect against burnout.
References


Nettles, C. (2010). What have we done for you lately? The RID annual report to the members. VIEWS, 27, 50-71.


