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The Intercultural Question
and the Interpreting Professions

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INTRODUCTION

David Katan

Cultus 7, last year focused very much on the translator and to what extent s/he might be thought of a transcreator. We also noted that the translator is very much at the crossroads, with not only the traditional concerns of professional ethics (such as fidelity to the source text versus creation of a new text) but with concerns regarding the rise of new, similar, professions. This issue, Cultus 8, focusses principally on interpreting, and on a number of fledgling interpreting-like ‘language mediation’ professions. The concerns are, at times, not so different.

The issue is broadly divided into two sections, each beginning with an interview. The first section is devoted to community (or public-service interpreting), the cultural mediator, and to children acting as interpreters (child language brokers). The second section, instead, focusses on legal interpreting, principally in the courts and on cultural ‘expert’ interpreting in institutional settings - a particularly Japanese phenomenon to address the question of ‘internationalisation’.

Section 1
The first section is introduced through the interview between Sandra Hale and Anthony Liddicoat. Hale is one of the foremost interpreters in Australia. She moved from conference interpreting to become a pioneer of community interpreting, which puts her in a perfect position to discuss the theme of this issue, which focusses on Crystal’s comment regarding how much of the implicit, or ‘culture’ the interpreter should account for. She discusses this question with fellow Australian, Tony Liddicoat, best known for his equally pioneering work in intercultural studies and language education. More recently he has also turned his interests towards the translator as intercultural mediator. They discuss how, first, terminology and a priori understanding of complex terms, such as ‘language, ‘culture’, ‘mediation’ and ‘translation’, will automatically affect
the outcome of any discussion. While Liddicoat, taking an intercultural point of view pursues the idea that what is implicit (and often culturally shared) in a communication is meaningful and should be part of the interpretation, Hale suggests that interpreter accountability or responsibility should depend principally on the level of implicitness (pragmalinguistic or sociopragmatic). The deeper the level, according to Hale, the less responsible the interpreter should be for what Crystal termed ‘mind reading’, which clearly reveals the difference between the two schools of thought.

There is much though that they agree on, not least that interpreting is not a mere transfer activity, and that there is a very real danger of public agencies (in Australia, and presumably elsewhere) thinking that cost-saving electronic devices might happily substitute human mediators.

Raffaela Merlina begins with a discussion on how community interpreting has, less than ideally, inherited the ethics of conference interpreting, which partly explains the mediators’ present ‘zone of uncertainty’ predicament. Merlina’s main concern here is how to legitimize the very human need for empathy while providing language support during medical interviews. At present human involvement by public service interpreters tends to pit itself both against current interpreting ethics and against “the voice of medicine”. Drawing on “empathy in action” studies and the growing acceptance of patient-centred rather than a doctor-centred care, she goes on to analyse a number of recorded interpreter mediated doctor/patient meetings carried out in an Italian hospital. She notes that the mediator as a full-fledged participant can and often does empathise, which improves the outcome for both partners. As she notes, the ability to be ‘tuned in’ to the speaker allows the interpreter to, if not ‘mind read’ (Crystal in Cultus 6), “cue read”. This means, though, as discussed also in Baraldi and Gavioli that the triadic interaction becomes temporarily dyadic, as both primary participants begin to confide with the interpreter.

Claudio Baraldi and Laura Gavioli analyse recorded talk interaction between “linguistic-cultural mediators”, immigrants and the Italian authorities. They focus on the “delicate issue” of direct coordination whereby the mediators are seen (following Merlina, above) to do much more that relay messages. They distinguish between coordination which opens up and investigates potential cultural differences on both sides (dialogic coordination) and cultural, which closes around the voice of authority, medicine, and the presuppositions of the healthcare system. In
both cases the mediator spends time on dyadic sequences to the exclusion of ‘the other’, which is “a complex and risky task”. Interestingly, the authors note that dialogic coordination helps treat the clients as “individuals” rather than as “members of cultures”, which would lead to a priori stereotyping. They also note that the mediator can also facilitate dialogic coordination by allowing more direct patient/doctor access through zero/minimum renditions.

Carmen Valero-Garcés investigates foreign victims of gender-based violence in Spain. It is, in fact, immigrant women who bear the brunt of the violence, and who consequently, for the most part, require the services of a public service interpreter. Carmen highlights the huge gap between the theory and the practices, and her analysis of published case studies shows that the role is still mainly filled by unqualified volunteers, and that the service providers themselves have little understanding of the professional public service interpreter. Also, the service providers appear to lack any form of ‘customer-care’ for this particularly vulnerable group (women left standing in corridors, in close vicinity of their aggressors). The interpreters and mediators themselves have a low understanding of the vital need for confidentiality. It is clear that ethics is a vital but yet unaddressed issue. With regard to the question of culture, there is hardly surprisingly a wide variety of (uninformed) approaches and views, which leads to a further general state of uncertainty regarding role.

Raquele Antonini investigates the world of children obliged to interpret for their family in immigrant medical settings, until recently, as Valero-Garcés noted here, “a fairly common yet under-researched occurrence”. Antonini, presents a timely review of the state of the art regarding the specific area of non-professional interpreting (NPI) that has been called Child Language Brokering (CLB). Her own research centres on interviews with a number of health care workers and operators, to gauge attitudes towards and perceptions of CLB as well as a large collection of essays, narratives and pictures by the child-interpreters themselves regarding their own perception of their work in this very adult world. The results show a generally positive view of their responsibilities and the quality of the work done, but yet it is only the children who focus on the emotional fall out – their unease, frustration and fear of failure when interpreting. As Antonini concludes, the most important part of the project was the raising of awareness of this unacknowledged and growing practice – and that countries engaged in this practice might like to listen to the children first before obliging them to discuss their parent’s medical issues with strangers.
in white coats.

Cinzia Spinzi closes this section, beginning with how ‘mediation’ and ‘interpreting’ have been understood in theory and in practice in Italy, the Mediterranean basin and in the Anglo-Saxon countries. The mediating role differs markedly according to social, cultural and historical factors. Italy is singled out for its high-context ‘holistic’ approach, which in part Spinzi links to the role of the Italian church, while the Anglo Saxon approach is very much more ‘text’ and language oriented. She then reflects on her own personal mediated encounter as an Italian client adopting twins in Hungary. Her Hungarian interpreter was linguistically competent, but the net result for Spinzi was an extremely strong feeling of personal disempowerment throughout the variety of meetings: with the authorities; in court, and above all with the other all-important other party – the twins. Spinzi explains that this was due to two main issues, the interpreter-mediator’s evident one-sided advocacy and loyalty, and also to the mediator’s strong, and personalized, decisions regarding gate-keeping.

Introducing the second section is Mette Rudvin who interviews Erik Hertog, a founding member of the European Association for Legal Interpreters and Translators. In the interview, Hertog charts the history of court interpreting from the first recorded court interpreted event in Europe through to the complexities in managing The Truth and Reconciliation Commission in South Africa, whose remit was to ensure a fair hearing for all, regardless of language or ethnicity. With regard to the intercultural question, Hertog makes two very interesting points; first we should not ‘overculturalise’ and blame culture on all (mis)communication, and second that it should not be interpreters in the first place, but the “legal professions” who “should receive training on how to work across languages and cultures” – so that interpreting quality, ethical standards and a fair trial can be enforced.

Hertog has been closely involved in drafting EU policy in this area. This framework, as he openly accepts, is very much a first step in regularizing this profession, in that “crucial notions are deliberately left vague” such as the authority that will regulate the standards and indeed what the standards should be, which is the focus of the next paper.

Fabrizio Gallai investigates the world of court interpreting, and the qualities a legal interpreter should have in order to interpret effectively. The interpreter can no longer be thought of as a translating machine. Here
s/he becomes an “intercultural agent”, which begs the question of what makes a successful interpreted-mediated interaction. Revisiting relevance theory Gallai concludes that ‘pragmatic equivalence’ could be combined with a more socio-cultural/interactional theory, such as Goffman’s, and introduces his Footing theory to highlight the problem of power relations which go far beyond ‘translating’. And he concludes, using corpus from police interviews that Legal interpreters can be seen as a culture broker co-structuring the interaction by turn-taking initiatives, actively participating in meaning negotiation and topic management.

Jeremy Breaden looks at how ‘internationalisation’ is being understood in Japan and investigates the exploding phenomenon of professional interlinguistic and intercultural mediators in Japanese organisations, known though as ‘specialists’ (senmonshoku). Making use of ethnographic analysis, observation and extended analysis at an ‘internationalised’ university he discovers that these mediators take on a wide range of roles, many of which have little to do with ‘interpreting’. They are also perceived as custodians and exemplars of ‘the Other’, so they automatically forfeit any possibility of invisible disinterested mediation. Indeed they are highly visible and are awarded expert status also in non-linguistic areas. Hence, as Breaden puts it they become not only facilitators but also “dealers in conflicting cultural paradigms”.

So, in this issue we have both the theories and the practices of, mainly oral, mediating. It is absolutely clear that ‘text’ oriented traditional interpreting theory clashes with actual practice. In the first place ‘mediators’ are visible and this presence has important repercussions, not discussed in traditional theory, and allows (or obliges) the mediators to do more than interpret. The interpretation in practice is clearly more sensitive (and necessarily so) to the interpersonal, human and affective element in communication. More recent interpreting theory, which builds on ‘empathy in action’, intercultural and relevance theory clearly demonstrates that successful interpreting (from the client point of view) logically includes attention to what is implicit, and if not ‘mind reading’ then ‘cue reading’. Indeed, the mediator should be presumed to “take account of the impact of cultural distance when translating or interpreting” (Katan 2013: 84).

It is also abundantly clear that a carte blanche to be more empathetic and interventionist to under-aged, under-qualified and under-trained ‘mediators’ not only creates serious issues regarding the need for professional behavior and for translation quality, but, unregulated as it is,
creates not just uncertainty but actual damage. The solution is not a return to the low-risk world of well-trained professional (conference) interpreters but rather the provision of well-trained mediators, qualified to take the risks necessary to allow all clients to feel empowered.

References

The meaning of accuracy and culture, and the rise of the machine in interpreting and translation.

A conversation between
Sandra Hale and Anthony Liddicoat

Hale: Maybe I should start by saying that the terms ‘translation’ and ‘culture’ are very complex and multifaceted and may mean different things in different contexts and settings. Let me start with the term ‘translation’. There is the major distinction between written translation and oral translation (Interpreting). I would like to concentrate on interpreting, as that is my main area of expertise. Within Interpreting there are also many different types, which will in turn determine what an interpreter is expected to do and how interpreting tasks are approached. This is very much related to Skopos theory (Vermeer, 1978), where the skopos or the purpose of the ‘translation’ or ‘interpreting task’ will determine what accuracy means and how it is achieved and how culture will relate to achieving such level of accuracy. For example, conference interpreters concentrate on propositional accuracy, generally striving to improve on the delivery of the speaker by omitting repetitions, backtrackings, hesitations, mistakes, etc. – which are not important to the purpose of the speech being interpreted. Such editing will make for a more enjoyable conference for the delegates who are listening just to two people for the whole conference – the two interpreters. On the other extreme, all those extra linguistic features are of utmost importance in court interpreting, where the witnesses are assessed based not only on what they say but also on how they say it (Berk-Seligson, 1990; Hale, 2004). In court interpreting, therefore, interpreters strive to achieve accuracy of content and manner. This requirement must not be confused with a ‘verbatim’, ‘literal’ or ‘word for word’ translation. The way I approach accuracy as an interpreter myself and as an educator of interpreters, is by looking at the task as a pragmatic reconstruction of the
original (House, 1977).

**Liddicoat:** I agree that we are dealing with very complex terms here and in this discussion we’ll be talking across aspects of translation because my own area of interest has been much more in written translation than oral translation so some of the emphases will be a bit different just because of that. I’d also like to add ‘language’ to your list of complex terms as I think we often risk over simplifying what language is and focus more on it as code (grammar and vocabulary) rather than also seeing it as a meaning-making system. I would say that ideas such as ‘verbatim’, ‘literal’ or ‘word for word’ translation reflect such an oversimplified version of language where the code gets privileged over the complexity of meanings, so like you I would want to move beyond such views in looking at the idea of accuracy, which for me is also a complex term.

The idea of accuracy is one where there are quite different possibilities for determining what it means for a translation to be ‘accurate’ and the idea of accuracy has been a key area of debate in the linguistically based scholarship of translation. If we start to think about what makes a translation accurate, we need to move beyond a narrowly language-focused view of what a message is. This is where your idea of a pragmatic reconstruction of the original becomes a very powerful idea but also a complex one. In dealing with pragmatics, we need to bear in mind that pragmatics is the area of language in which language and culture most closely interrelate in creating meanings, but not the only area.

In a paper I wrote a couple of years ago (Liddicoat, 2009) I argue that this interaction between language and culture is potentially present at all levels of linguistic communication from the macro-level things like the ways assumed shared knowledge shapes how we speak and write to the very micro-level of linguistic forms. The problem that faces the translator or the interpreter is the need to recognize when something other than language forms influence what is being communicated. David Katan (2004) puts this quite nicely when he says that the translator needs to attend both to the explicitly expressed and the implicitly expressed. The explicitly expressed is relatively easy to identify, even if it can be hard to translate into another language. The implicitly expressed is often a lot harder to notice, if we are not used to looking for it and can be missed in translation. The implicitly expressed can even influence very basic levels of communication, for example the comparative level of politeness found between requests such as *ouvrez la fenêtre s’il vous plait* and *open the window*.
please in which the French is appropriately polite in situations where the English is not. This is a quite tangible example, but sometimes the complexity of the implicitly expressed can be much harder to identify.

**Hale:** Yes, I totally agree with everything you said above. As David Crystal said, the overarching aim in translation is “... to convey the effect of what would happen if the same situation arose in the other language” (Crystal and Jiang 2013). That aim will require many changes at the word and sentence levels in order to be accurate at the discourse/pragmatic level. So, accurate interpreting is for the most part very distant from the original words and structures used in the source language. And yes, pragmatic differences trickle down from the macro to the micro levels of communication, as you state above. Your example of politeness exemplifies the different ways languages and cultures express politeness. Unless the purpose of the translation is to show such differences, the translator or interpreter would change the utterance to match the level of politeness in order to be accurate. Another similar example that relates to court interpreting, is the way courtroom questions are understood and accurately rendered. A common question type used in court during examination-in-chief (direct examination in the USA) is the modal interrogative, such as “Can you tell the court what happened on that day?”. Semantically, this is a question of ability, but pragmatically, it is an indirect speech act – an indirect polite request to tell the court what happened. When an interpreter is interpreting into a language for which such a question would not elicit the desired answer, then in order to be accurate, the interpreter will need to change it to the pragmatically appropriate question, which may be a direct speech act such as “Please tell the court what happened”, otherwise, the answer elicited by a semantically translated question may be “yes” or “no”. In fact I have research data showing this very result when interpreters interpreted at the semantic rather than the pragmatic level (Hale, 2014). This type of cross linguistic pragmatic difference is what Thomas (1984) calls “pragmalinguistic differences”, which can be addressed by interpreters as a matter of course, without the need to explain anything to the audience. The difficulty for interpreters arises when “sociopragmatic differences” (Thomas, 1984) arise. These are extra linguistic cross-cultural differences that may lead to communication breakdowns, such as inappropriate social behaviours, taboos, etc. This is when interpreters are unsure about what to do and reluctant to offer any advice for fear of stereotyping (Hale, 2013a).
Liddicoat: It’s this level of sociopragmatics that is one of those instances where the implicitly expressed become less tangible and may be overlooked in translation in ways that mean that the translated message is not the same as the original one. This for me is where the idea of the translator as a mediator is an important one. There is a need to intervene in some way in the text that is being produced in the target language but also a need to understand what is a legitimate intervention. As Jull Costa (2007) notes translators need to be selective in determining how and when they intervene in the text and to consider how consequential a concept, practice, etc. is for understanding the meaning that is being conveyed. If sociopragmatic or other knowledge is central to understanding what is being said, then reluctance to intervene can obscure what is being communicated.

Hale: Yes, that’s right. Again, the approach to ‘accuracy’ will depend on the type of translation and its purpose. And I agree that the term ‘accuracy’ is also very complex for this very reason, but generally, the guiding principle for interpreters would be to alert the parties to a potential cross cultural misunderstanding when it is caused by a cultural issue that is understood by the interpreter because of shared sociopragmatic knowledge which would also be shared by other speakers of the source language but not by those of the target language. These are those issues that go beyond the pragmalinguistic level and cannot be conveyed through a pragmatic reconstruction of the original. In translation, translators would alert the reader via a translator’s note or by explicitation in the body of the translation. And this leads me to the original point about the term ‘culture’. Speakers of the same language can of course share cultural aspects with each other, but also differ culturally on many others depending on their background, social status, profession, education levels, religion, etc. So, it is risky to attribute any difference or any communication breakdown to a ‘cross-cultural difference’ (see Felberg & Skaaden, 2012).

Liddicoat: For me, culture is one of the most difficult concepts for the languages professions to work with and the ways we have talked about culture, especially in language education, have often been really problematic. In particular, the idea of culture as national culture or of culture being in some way co-extensive with language are especially problematic as they obscure the variability that exists within all cultures.
We need to move beyond seeing cultures as discrete, static entities and see cultures as varied, subjective and power-based constructions of lived experience. I also feel we need to be more skeptical about culture as the explanation for communication problems. Ingrid Piller (2011: 172) makes the point that “Culture is sometimes nothing more than a convenient and lazy explanation”. At the same time, culture is nonetheless present in communication and we need to be able to recognize it as consequential in shaping communication at various points. For me, this is not the same as saying culture is the cause of communication problems. Rather I am saying that the cultural frame in which we communicate shapes how and what we communicate. This idea is particularly significant for a translator of written texts as the reader and writer are not only separated from each other at the moment of reading a writing, but they are not knowingly involved in intercultural communication, as the original writer wrote in a particular language to address speakers of that language and had particular assumptions about what such readers know and how they understand meanings communicated in their shared language. A translator has to make a text comprehensible for someone other than the intended reader. I think that the problem exists to some extent also in interpreting, although the co-presence of the participants in the interaction introduces different possibilities and different dynamics. In each case the translator needs to get a message across to a recipient who does not share the same meaning-making resources.

Hale: Yes, in live interpreted situations, especially dialogue interpreting, the participants have the opportunity to ask for clarification if something is unclear or seems inappropriate, whereas in translation, the reader does not have that option. I have previously stated that in terms of accuracy translation can be seen as more ‘target reader-oriented’ and dialogue interpreting as more ‘source speaker-oriented’ (Hale, 2007). What I mean by that is that translation tends to require more explicitation to convey the intended message because of the reasons we discussed above. In dialogue-interpreted situations, the source speakers can take more responsibility because they can react immediately to what was said. I agree with Crystal (Crystal and Jiang 2013: 41) that interpreters cannot be mind readers, and can only go by what they understand on the surface, which is of course complemented by their shared knowledge with the speakers for whom they are interpreting. The more interpreters know about the setting, the goals of the interaction, the backgrounds and
cultures of the speakers, and the subject matter, the better equipped they will be to understand and to produce an accurate rendition; but ultimately, interpreters can only be faithful to their own understanding of the source utterance. This is why interpreters will often ask for clarification, to ensure that they have understood correctly. A translator may have more trouble seeking such clarification, unless the author is still alive.

**Liddicoat:** I agree with the idea that an interpreter or any other translator can only be faithful to their own understanding gets to the heart of the nature of human communication. Meanings are complex and their interpretation (I’m using this word in the hermeneutic sense not in the sense of oral translation) is subjective – each interpreter brings his/her own resources to the interpretation. For me, it is this act of interpretation that is fundamental to the act of translation – there needs to be an awareness that the act of reading/listening for translation is a process of interpreting meaning in order convey this meaning to another. This idea of interpretation is at the heart of the way I understand the idea of mediation as it applies in translation and intercultural communication more generally.

**Hale:** Yes, and that leads me to mention the confusion surrounding the term ‘mediation’ in relation to Interpreting, which is sometimes used to mean ‘advocacy’, and I think these are very different concepts that should not be confused. In my view, there is no question about the fact that interpreters and translators are linguistic and cultural mediators, but I disagree with the suggestion that being a mediator makes the interpreter an advocate. The role of advocate for the minority language speaker has been proposed for community interpreters (see examples in Barsky, 1996; Kaufert, 1997), and research has found that many ad hoc interpreters act as advocates or gatekeepers, by deliberately editing the speakers’ turns in an attempt to ‘help’ present a better answer or to avoid wasting time (Angelelli, 2004; Davidson, 2000), with serious implications, especially in medical or legal settings (Tebble, 2012). The question has been asked, why can’t an interpreter advocate for both sides? One reason is because that is not part of the interpreting task, but another is that if you advocate for both, you advocate for none – so we’re back to the original ethical requirement of impartiality. Professional interpreters are impartial mediators, interested in the communication process rather than the outcome of the interaction. Some have argued that impartiality is impossible and should not be expected of interpreters. For sure,
Interpreters are humans and they will form judgments, but here again, I agree with Geertz’s comment (1973/2000: 30): “I have never been impressed by the argument that as complete objectivity is impossible in these matters (as, of course, it is), one might as well let one’s sentiments run loose... [It] is like saying that as a perfectly aseptic environment is impossible, one might as well conduct surgery in a sewer”. The more interpreters are aware of their own partialities and of their ethical obligations, the more they will be able to control how they interpret. There may be situations, of course, where it may be impossible for an interpreter to interpret; if there is a conflict of interest, that’s when interpreters can withdraw. However, if I were to interpret only for those I agree with, I wouldn’t be interpreting for many people!

**Liddicoat:** It is important to keep the ideas of mediation, advocacy and gatekeeping separate in the way we think about the roles of interpreters and translators as I think of these as quite different ideas, but the fact you raise these as a group points to something I believe is a key problem in how we think about intercultural mediation – the overlap of mediation into many different domains of activity. My starting point in thinking about mediation as a linguist working on issues of language and culture is language as a meaning making system; and for me, mediation is fundamentally associated with interpretation of meanings. This is what separates it from the other terms. I think Gohard-Radenkovic, et al. (2004) provide a useful way of thinking about mediation in intercultural communication when they argue that the mediator is a social actor who works to give someone who does not understand the capacity to understand. This is a way of thinking about mediation that places meaning at the centre of what mediators do and allows for the possibility of disentangling mediation as an element of intercultural communication from other ways of understanding mediation - for example as it is used in dispute resolution. Advocacy is not an interpretative act in the same sense as what I mean by mediation here, rather it assumes an adversarial context between participants that needs to be resolved. This is something that lies outside the mediation of communication, which is the translator’s primary task.

Gate-keeping is even more removed from the idea of interpretation and meaning making. The fact that these terms come together in discussions of intercultural mediation is problematic as it shows how terminologies can obscure different ways of thinking about and through questions. As
language professionals we need to remain focused on mediation as a linguistic and communicative practice and to understand our roles and ethical responsibilities through this focus. At the same time, we need to recognize that this is mediational work and that there are complex issues of language and culture that we do need to engage with in a principled and mindful way.

**Hale:** Yes, I agree with you again.

**Liddicoat:** I think what this discussion has shown is that the issue of translators’ and interpreters’ agency is something that we need to give a lot of thought to. If we think of the translator or interpreter too narrowly as a ‘language’ specialist recasting language forms, then we are likely to miss the realities of the mediational process that is involved. To do so, is almost to reduce the translator to the role of a machine processing linguistic structures. The translator is an active interpreter of meanings, and of meanings that lie to some degree outside purely ‘linguistic’ forms. When we move the activity of interpretation to the heart of the translator’s work we are forced to think in different terms about what is both possible and desirable for translation and to recognize the sophistication of this work. In particular we need to recognize the human dimension of translation work and to understand the ways in which translators are social actors within processes of border-crossing and intercultural understanding.

**Hale:** Saying that interpreters and translators only switch words from one language to another like machines shows a basic misunderstanding of the complex process of translation, as we’ve discussed above.

**Liddicoat:** The human dimension is fundamental to seeing how the field of interpreting and translating will be understood in the future. The developments in machine translation are sometimes taken as eclipsing or even replacing the human interpreter and translator. With the advent of easily accessible translation software on mobile phones gives the appearance that interlingual communication is unproblematic and independent of professional expertise, something that is emphasised in the promotion of such software. For example, Google Translate’s latest upgrade claimed to be “one step closer to turning your phone into a universal translator and to a world where language is no longer a barrier to discovering information or connecting with each other” (Google 2015).
That is, Google claims a reality in which technology has replaced the human element in cross language communication. While such software is undeniable useful, the emphases in discourses about such software is ultimately problematic as it is based on a fundamental misunderstanding of the nature of the act of translation. Such software is based on a decoding of meaning at the level of word and grammar and is organized on structural principles such as collocation. What is missing here is the idea of the translator as an interpreter and rewriter on meanings as opposed to a simple decoder. Meaning is complex and is not located simply in the lexis and grammar of the language sued to communicate. It also lies in allusions, connotations, and cultural conventions of language use; in the inherent heteroglossia of language as a mode of expression. This means that there are aspects of meaning-making that lie outside the competence of technology and which will not be the outcome of improved software.

**Hale:** I am no expert on machine translation, but I know that translation memories and other machine translation tools should be used only as aids to human translators, not as replacements. Although these tools are improving, I doubt they will ever replace humans, and so far nothing has come anywhere near producing adequate oral interpreting for anything other than very simple exchanges. I must say, that many humans who call themselves ‘translators and interpreters’ make the same mistakes as machines, translating at the word and sentence levels and ignoring the discourse pragmatic dimensions we have discussed so far. This has a lot to do with the theoretical underpinning of any translator’s and interpreter’s practical work, which is acquired mostly through formal education in translation and interpreting, which is something not everyone has had the benefit of. This leads us back to the argument that not all ‘bilinguals’ (another complex and loaded term) are automatically translators or interpreters, which is what many seem to believe.

**Liddicoat:** The ultimate issue, I believe, lies in the recognition of the ways in which translators and interpreters must and do act as mediators between languages and cultures. The sorts of machine translation envisaged by Google Translate throw the onus of mediation on to the end user of the translated text: that is by definition on to those without access to the language of the source text and its cultural context of production and consumption. It can create an illusion of comprehension without
ensuring the reality of that comprehension – or rather it creates of superficial comprehension of what a spoken or written text says but provide an interpretation of what the speaker or writer meant in producing the text. While in many low stakes contexts, this may not be a problem, in higher stakes contexts it is highly consequential.

**Hale:** Yes, I agree, and again I stress the same argument can be used for incompetent interpreters and translators. I have written a lot about the damage an incompetent interpreter can do, which for the majority of cases, will simply go unnoticed, except in the rare cases of appeals or complaints (Hale, 2010; Hayes & Hale, 2010). Many assume that all that is needed to ensure effective communication between two people who do not share a language is to have an interpreter present, regardless of their level of expertise and regardless of the speakers’ coherence, speed of delivery, register, etc. One example I can cite is a government organization’s requirement for interpreters to sign a form at the end of the interpreted interview certifying that the non English speaker had understood everything. It is not the interpreter’s role or responsibility to ensure understanding, and in any case, there is no way the interpreter could guarantee someone else’s understanding of what was said. I’ve often argued for the need for the speakers to take much of the responsibility for adequate interpreting (Ozolins & Hale, 2009). This includes briefing the interpreter, making sure the interpreter is well qualified and well prepared, ensuring that the interpreter has adequate working conditions, and is allowed to intervene when needed to ask for or make clarifications (Hale, 2011; 2013b). Even with expert interpreters, this type of interaction is crucial. With machines, that is impossible.

**Liddicoat:** The claims of organization such as the one cited from Google above create unrealistic expectations of what such software can do, especially among those who have little insight into or experience of cross language communication. Sometimes the consequences of this are highly problematic. For example, recently the Australian Department of Health started to use Google Translate to convey health information in a range of languages (see [http://www.health.gov.au/internet/main/publishing.nsf/Content/Other+Languages-1](http://www.health.gov.au/internet/main/publishing.nsf/Content/Other+Languages-1)). The results are texts that are frequently ungrammatical and often difficult to comprehend; and the Department effectively distances itself from the information provided in a disclaimer at the foot
of the page. Although developments in the software may overcome some of the problems of such translation work, I see the larger problem as being one that fails to recognize the real nature and complexity of the information that is being communicated and the mechanization of human communication that underlies such initiatives. It is an un-nuanced and unsophisticated view of human communication that devalues not only the work of professional interpreters and translators, but also the texts being communicated and the audience receiving them. Such solutions are obviously much cheaper that professional work and so the ideologies that underlie the mechanizing of cross language communication support a powerful neoliberal agenda in government services.

Hale: This is really alarming. These solutions may seem cheaper on the surface, but they mask the many problems miscommunication can cause, which almost always translate into higher costs. I hope we can do something to convince this department to change its practices. As the new president of the national professional association AUSIT, I will put it on our agenda!

References


Empathy: A “zone of uncertainty” in mediated healthcare practice

Raffaela Merlini

Abstract

The paper investigates empathic behaviour in the context of linguistically mediated healthcare communication. By preliminarily addressing the issue in terms of professional ethics and from the dual perspective of both medical and interpreting practice, the study analyses two encounters taking place in an Italian family planning clinic. These involve Italian-speaking healthcare providers, a Russian-speaking mediator, and two undocumented immigrant women; one from Ukraine enquiring about fertility tests, and one from Estonia requesting a voluntary termination of pregnancy. Given the lack, in the Italian context, of nationally recognized standards of practice and of centralized training and accreditation programmes, cultural mediation can safely be described as an ill-defined occupation. The contention here is that one of the major “zones of uncertainty” accounting for the instability of this professional field is empathic conduct. Albeit within the narrow confines of the present study, the qualitative analysis of interactional data would seem to indicate that, far from clashing with the medical goal of responding appropriately to a patient’s problem, empathy may be functionally and successfully used both to show compassion to a human being in need and to complete the institutional task at hand.

1. Empathy as an issue of professional ethics

Conference interpreting, the most firmly established of all interpreting types, has traditionally kept a distrustful distance from any such notions as emotional involvement, affiliation, affective proximity, etc., that refer more or less directly to the theoretical construct of empathy. In the many contexts of international cooperation – be they diplomatic, technical,
scientific, or commercial – where conference interpreters typically work, providing a professional interpreting service has long been tantamount to guaranteeing confidentiality, maximum objectivity, impartiality, and self-effacement. Historically, the basic equation between professionalism and emotional detachment was placed at the very core of the codes of ethics and standards of practice for interpreters,¹ which were first produced precisely in the field of conference interpreting where the process of professionalization has been relatively fast and unproblematic.

Decades later, when dialogue interpreting² began to attract increasing public attention, it was thought that the best way to professionalize its largely ad hoc practice was to adopt the same rules and principles laid down for conference interpreters;³ this initially resulted in the stigmatization of any form of interpreters’ empathic display throughout the diverse settings of their activity – from courtroom trials to immigration hearings, from welfare interviews to medical consultations, to name just a few. Gradually, however, thanks to the empirical data collected and analyzed by researchers,⁴ a number of radical differences between the conference and dialogue interpreting domains came to full view, calling for a more reasoned debate on their implications for professional ethics. As highlighted by Martin & Valero-Garcés (2008: 2) in a volume devoted to the issues of roles and ethics in community interpreting,⁵ one of the most distinctive traits of the latter practice is that it is invariably carried out in “circumstances in which it would be difficult for any human being to remain unperturbed”. Emergency and often dramatic situations, power imbalances between participants, clients’ conflicting expectations, and wide cultural gaps account for the multiple and mutable dilemmas with which practitioners are constantly faced. In light of the variety of interactional contexts falling under the heading of community interpreting

¹ For a comprehensive worldwide overview of the main codes of ethics and standards of practice in the areas of both conference and community interpreting see Bancroft (2005).
² For an in-depth definition of “dialogue interpreting” see Merlini (2015).
³ One of the most eloquent examples is the adoption of the interpreting-in-1st person rule (see Merlini & Favaron, 2009).
⁴ Starting from Wadensjö’s (1998) seminal work, analyses of real-life face-to-face interpreting sessions have appeared in special issues of major translation and interpreting journals (e.g. Mason, 1999, Pöchhacker & Shelsinger, 2005, Dal Fovo & Niemants, forthcoming) as well as in Benjamin’s Critical Link series, and dedicated volumes (e.g. Valero-Garcés & Martin, 2008, Baraldi & Gavioli 2012).
⁵ “Community interpreting” is generally viewed as a sub-domain of dialogue interpreting. For a definition see Hale (2015).
– with dialogue interpreting encompassing an even wider range – setting-specific guidelines were soon seen as the most sensible response to orient professional conduct.

The first sector to explicitly address the issue of empathy has been healthcare interpreting. The *National Code of Ethics for Interpreters in Health Care*, a most influential document drawn up by the US National Council on Interpreting in Health Care (NCIHC) in 2004, talking about the principle of impartiality, clarifies:

> [Impartiality] is a principle that is misunderstood and misinterpreted by many to mean that interpreters should be disinterested in or uncaring with regard to the patient. To the contrary […] one of the overarching values of the health care interpreter’s code of ethics, a value that is shared with other health care professionals, is the well-being and welfare of the patient. In upholding this value, interpreters fully recognize and accept the humanity and the human needs of the parties in the encounter. Responding with *empathy* to a patient who may need comfort and reassurance is simply the response of a caring, human being (NCIHC, 2004: 16; emphasis added).

Here, not only is empathy acknowledged as a natural response to a patient’s plight – the lack of it being implicitly viewed as tantamount to inhumaneness – but, even more importantly, the interpreter’s empathic behaviour is linked and made instrumental to the achievement of the overarching goal of medical practice, i.e. the well-being and welfare of the patient. Despite this authoritative stance, which marked a breakthrough in the debate on the prescription of interpreter neutrality, empathic attitudes are still viewed with suspicion. While the reluctance of many practitioners may be due either to a traditionally empathy-unfriendly training or, more simply, to their personality traits, account must be taken of a more objective datum problematizing recourse to empathy in institutional interaction, be it monolingual or interpreter-mediated.

As discussed below in Section 2, the literature has supplied ample evidence that empathy leads people to improve other people’s well-being. And yet, in encounters between a professional and a client, unlike ordinary conversations, improving the other’s well-being may be perceived as conflicting with expressions of empathy, given that the trouble reported by the lay party is generally the problem to be solved by the other party, who is therefore called upon to provide an objective and focused task-related response. In other words, the institutional representative’s orientation towards a restriction of empathic displays may serve the purpose of preserving problem solving as the focal activity of the
interaction. In the specific field of monolingual doctor-patient communication, Ruusuvuori (2005) resolves this contradiction by identifying types of conversational actions through which the healthcare provider can relate humanely to the patient, while keeping within the limits imposed by the professional activity at hand. Drawing on “empathy in action” studies (see, for instance, Suchman et al., 1997, and Beach & Dixson, 2001), Ruusuvuori analyzes sequences of trouble-telling by patients and their reception by medical practitioners. In those cases where affiliation⁶ is present – a minority of instances in the overall corpus⁷ – failure to maintain the focus of talk on the patient’s complaint was due to interactional moves of experience sharing, whereby the doctors talked about their own experience of finding themselves in an analogous condition, so as to make the patient feel more at ease. Where, instead, professionals simply manifested understanding of the patient’s troublesome situation, and made this understanding relevant to the consultation, empathy was functionally, and successfully, used both to complete the institutional task and to respond to a human being “in search not only of a solution to their problem but also of understanding and compassion” (Ruusuvuori, 2007: 598).

Since Mishler’s (1984) seminal discussion of the “voice of medicine” vs. the “voice of the lifeworld”, the notion of humane medical care as characterizing a patient-centred rather than a doctor-centred approach has become more and more pervasive in medical literature, to the extent that Coulehan et al. (2001) unhesitantly state that empathy lies at the very heart of medical practice. Countless studies (see, among others, Nightingale et al., 1991, Suchman et al., 1993, and Roter et al., 1997) demonstrate that appropriate use of empathy promotes diagnostic accuracy, therapeutic adherence, and both patient and physician satisfaction, while others (e.g. Spiro, 1992, Brock & Salinsky, 1993, Coulehan et al., 2001) argue for its inclusion as a teachable communicative skill in medical curricula. Whereas in monolingual consultations the adoption of a given discourse model as the most effective means for successful provision of medical care rests in the hands of the doctor, and, to a minor extent, of the patient⁸ in

⁶ For a definition of the concept of “affiliation” see Zorzi & Gavioli (2009).
⁷ The corpus consists of 228 sequences of patients' descriptions of their problematic experiences and professionals' responses to them in videorecorded general practice and homeopathic consultations.
⁸ See Fairclough’s (1992) insightful analysis of alternative doctor-patient interview models.
linguistically mediated encounters dynamics are inevitably more complex, given the impact of the interpreter’s own choices as a third participant in the interaction.

In those instances in which the healthcare professional follows a patient-centred model, the interpreter may opt either for further reinforcing the doctor’s displays of affectivity towards the patient (Merlini & Favaron 2005) or, conversely, for blocking out altogether the patient’s “voice of the lifeworld” as medically irrelevant, through reduced and discursively reframed renditions (Bolden 2000). In a doctor-centred model, on the other hand, where priority is given to the “voice of medicine” with its scientific objectivity and emotional detachment, the interpreter may decide to make up for the doctor’s lack of involvement, affiliating, on her/his own initiative, with the patient’s expressions of concern or embarrassment. As illustrated in Baraldi & Gavioli (2007) and Merlini (2009a), this may, or may not, favour a successful outcome of the encounter, depending on how affiliative moves are managed in the local turn-by-turn conversational context. Baraldi & Gavioli, in particular, expose a two-fold pattern. Contrary to what is frequently observed in the literature, i.e. a loss of emotional expressions in the interpreted renditions (Davidson 2000), in their corpus interpreters are invariably found to challenge affective neutrality through responses which provide reassurance and support, and treat the patient’s manifestation of feelings and worries as conversationally relevant. Yet, in some interactions, the patient’s affective contribution is cut out of the rendition, which prevents the involvement of the doctor in the affective interactional sequence. In others, instead, interpreters first affiliate to encourage the patient to say more, and then formulate their understanding of previous talk for the doctor, conveying the emotional gist of the patient’s utterances, to enable its topicalization and elaboration by the healthcare professional. Only in the latter case is an “affective triadic interaction” achieved.

The diversity of approaches and behaviours that emerges worldwide from studies on affectivity in healthcare interpreting speaks of a largely undefined area of practice lacking in concerted mandatory prescriptions, and leaving practitioners with a wide room for manoeuvre. This is all the more true in those countries, such as Italy, where communication between public service providers and immigrants has been entrusted by policy-makers to a hybrid, multifunctional figure, i.e. the “cultural mediator”. While referring readers to an earlier study (Merlini 2009b) for an in-depth description of this profile in the specific Italian context, one aspect needs
addressing here as bearing most relevance to the topic under discussion. In 2000, the Italian National Council for the Economy and Employment issued the first ever guidelines on “Cultural mediation policies. Training and recruitment of cultural mediators” (CNEL, 2000), thereby giving practical implementation to the corresponding normative provision contained in the 1998 Immigration Act. No explicit mention in the guidelines is made of the neutrality principle, though the indication that “the mediator [...] acts as a ‘bridge’ between foreigners and institutions [...] without taking the place of either of them” (ibid.: 3) would seem to rule out any advocacy model. Further down in the document, on the other hand, the last point in the list of requisites for the job reads: “motivation for and disposition towards relational and social work, personal capacity for empathy and confidentiality” (ibid.: 4; emphasis added). Given the above, the highly generic sentence closing the description of the mediator’s varied tasks, and requiring compliance with an unspecified code of professional ethics is evidently of no use to the practitioner when it comes to setting the boundaries between empathy and undue advocacy.

Taking stock of a decade’s experience in the provision of cultural mediation services, an updated version of the guidelines was produced in 2009 with the title “Intercultural mediation and mediators: Operational instructions” (CNEL, 2009). Albeit hardly noticeable, the change in designation (from “cultural” to “intercultural” mediation) is overtly meant to foreground social cohesion as the overarching goal, to be attained by favouring personal relations, mutual knowledge and dialogue between native and immigrant cultures. In line with this new perspective, greater emphasis than in the earlier document is placed on the need to “personalize and humanize” (ibid.: 2) the provision of public services. While the instruction to take neither the service users’ nor the service providers’ place is reiterated (and even reinforced here by the use of italics), the list of requisites is introduced by a newly added paragraph foregrounding relational, communicative, and (as a brand new entry) interpreting skills. More significantly still, the empathy requisite, which ranked last in the 2000 guidelines, is first of the list in the 2009 ones (ibid.: 2). Considering the increased weight assigned to the interpersonal dimension, one would have expected to also find a more detailed discussion of aspects pertaining to professional ethics, rather than just the selfsame cursory reference to an unidentified code of practice. The inclusion, in this later document, of “professional ethics” among the subjects of the recommended syllabus may partly justify the absence of a
specific section. Thus, as responsibility for organizing training courses is delegated to local authorities working in partnership with non profits and social enterprises, so too is guidance on professional conduct.

To conclude, in the highly fragmented Italian scenario transmission of normative models of behaviour is hampered by the lack of authoritative and nationally recognized standards of practice, as well as of centralized and uniform training and accreditation programmes. As a result, mediators’ interactional moves can be seen, and fruitfully investigated, as manifestations of autonomous agency, within a psychological arena of seemingly conflicting pulls towards, on one side, identification avoidance through emotional distancing and, on the other, trust and rapport building. Drawing on Pierre Bourdieu’s social theory (2000), (inter)cultural mediation can safely be described as a “still ill-defined occupation”. My contention is that one of the major “zones of uncertainty” accounting for the instability of this professional field is the issue of empathy. The interest in analyzing the mediators’ empathic behaviour in real-life interaction lies precisely in this uncertainty, which, as Inghilleri (2005: 82) poignantly highlights, affords practitioners the opportunity to “define a role for themselves that corresponds to ‘who they are’ rather than to an already established notion of ‘who they must be’”.

2. Empathy and its devices

Originally, the notion of empathy, which translated the German “Einfühlung”, developed within the field of German aesthetics and referred to the subject’s self-projection into the objects of perception; Titchener, who coined the term, described the empathic experience as one of “feeling ourselves into them” (1924: 417). Throughout the first half of last century, conceptualizations of empathy in psychology were

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9 The foreign origin preferential requisite envisaged both in the Immigration Act and in the CNEL guidelines is meant to ensure the mediators’ deep understanding not only of the service users’ cultural backgrounds, but also of the full import of the migration experience. This ethnic and existential closeness, though a valuable resource, exposes mediators to the risk of identification. Warnings against it are pervasively found in the Italian literature on cultural mediation. Quoting Morniroli (2009: 25-26), for instance, “neutrality means emotional distancing” entailing, in its turn, “a management of identification processes”.

10 Bourdieu’s notion of “zone of uncertainty” is used here in a more restricted sense than in Merlini (2009b).
predominantly influenced by this view foregrounding the empathizer’s vicarious emotional response. Despite the multiple theoretical and disciplinary perspectives from which the concept has been studied since then (see Håkansson, 2003) there seems to be general consensus among researchers on at least three points: 1) empathy entails, at a very basic level, a sort of awareness of another’s experience; 2) empathy correlates with beneficial effects for the receiver; 3) empathy is not only an interpersonal phenomenon that exists inside the empathizer, it is also an interpersonal activity, whereby empathy is communicated to a receiver.

If awareness of the other’s experience represents a minimum common denominator, more fine-grained and often conflicting definitions of empathy have multiplied. One factor behind the extreme diversification of approaches is the classic distinction between two dimensions, namely the emotional and the cognitive one. Whereas the former can be defined as an instinctive and involuntary reaction to the experiences of others, the latter entails recognition of the emotional experiences of others without any vicarious experiencing of the state. Given the relevance of this latter dimension of empathy for the present study, close consideration should be given to the following definition:

The state of empathy, or being empathic, is to perceive the internal frame of reference of another with accuracy and with the emotional components and meanings which pertain thereto as if one were the person, but without ever losing the “as if” condition. Thus it means to sense the hurt or the pleasure of another as he senses it and to perceive the causes thereof as he perceives them, but without ever losing the recognition that it is as if I were hurt or pleased and so forth. If this “as if” quality is lost, then the state is one of identification (Rogers 1959: 210-211; italics added).

Taken from the seminal work of Carl Rogers, the father of contemporary research on empathy who brought the notion centre-stage in psychotherapy, the quotation holds a significance that goes beyond the specific context of the therapist-patient relationship. Two points, in particular, are worth underlining. First, empathy towards the other and identification with the other are not one and the same process – the “as if” condition being a sine qua non for the two to remain separate. Second, Rogers’ cognitive orientation integrates an emotional component, but keeps this firmly anchored to an unfaltering awareness of one’s own self as distinct from the other.

Whilst some authors have used the term empathy to refer to either an exclusively cognitive phenomenon or an exclusively emotional one, others
have opted for two different terms, drawing a clear-cut theoretical distinction between “empathy” and “sympathy” (see for instance Wispé 1986). Empathy is thus viewed as perceiving the other’s emotional state without acquiring it; the maintenance of a dual perspective remains fundamental even when a degree of emotional resonance is envisaged. Sympathy, on the other hand, always entails emotional identification – i.e. sharing the other’s experience and sensations.

Reuniting these diverse conceptualizations within a single theoretical framework, Davis treats empathy as a multidimensional phenomenon; in his own words, a “set of constructs, related in that they all concern responsivity to others but [which] are also clearly discriminable from each other” (1983: 113). He identifies four such constructs: 1) fantasy, i.e. the tendency to imaginatively transpose yourself into the feelings of fictitious characters in books and movies; 2) perspective-taking capability, i.e. the tendency to spontaneously adopt the psychological view of others in real everyday life; 3) empathic concern, i.e. the tendency to experience other-oriented feelings of warmth, compassion and concern for unfortunate others; 4) personal distress, i.e. the tendency to experience self-oriented feelings of apprehension and discomfort at witnessing the distress in others. Highly significant are the correlations Davis establishes between the four constructs. In particular, he demonstrates that a greater perspective-taking capability is associated with more concern for the others and with less distress in the face of others’ negative experiences. In other words, the more able we are to cognitively apprehend another person’s perspective, the less self-centredly distressed and the more other-oriented concerned we are.

This takes us to the second and third consensual statements. The idea that empathy is beneficial for social relations, in that people are more likely to help others and less likely to harm them when they feel empathy towards them, is firmly established and well documented in the socio-psychological literature. Experiments by Batson et al. (2002), in particular, have not only validated Davis’ correlation between perspective taking and concern for the other, but have also demonstrated that empathic concern leads people to improve the other’s well-being through altruistically motivated efforts. Precisely because of the intrinsically interpersonal nature of the empathic process, the current trend is to study empathy as a communicative activity rather than as an inner perceptual experience or a general organizing principle of social interaction. Underlying this new theoretical angle is a dialogical paradigm whereby empathic communication is no longer construed as a
set of acts practised unidirectionally by the empathizer on a passive recipient, but as a joint activity in which the empathic experience is co-constructed by interlocutors (Della Noce, 1999, Myers, 2000).

For the purposes of the interactional analysis conducted in the present paper, some major empathic communication cues have been singled out and grouped into three broad areas:

- **attentive listening cues** - e.g. confirming understanding through feedback tokens (mhm, yes, right, etc.) to invite the speaker to continue;
- **perspective-taking cues** – e.g. checking understanding through requests for clarification, reformulation of speaker’s utterances, elicitation of listener’s questions; expressing understanding/approval of the other’s point of view, reassuring, encouraging, offering advice;
- **non-verbal cues** – e.g. eye contact, facial pleasantness, smiling, laughing, head nods, frequent and open hand gestures, touching.

3. **Analyzing empathy in (inter-)action**

The conversational excerpts analyzed in this section are taken from two encounters that were audio-recorded in 2011 in an Italian family planning clinic. Given the language-unspecific focus of the present analysis, idiomatic translations into English replace the original utterances in Italian (showing in normal typeface) and Russian (in italics). To further increase readability, conventional punctuation is used, while only the most relevant of the originally transcribed orality traits have been maintained (see note 7).

In the first interaction (hereafter I1), an undocumented female immigrant from Ukraine (U) goes to the clinic to enquire about fertility tests, giving that she has unsuccessfully tried to get pregnant for over a

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11 The two encounters (lasting 16 and 29 minutes respectively) are part of a corpus of seven linguistically mediated consultations that took place in 2011 in two Italian family planning clinics. Since permission was obtained only to audio- and not to video-record, detailed notes on contextual and non-verbal aspects were taken by the observer during the consultations. To this end, an Observation Sheet was drawn up beforehand under the supervision of the present author. For a detailed description of the encounters discussed in this paper see Gatti (2011-2012), Observation Sheets 3 and 4. Questionnaires were subsequently submitted to the mediators, as illustrated in Merlini & Gatti (forthcoming).
year. She is received by one of the clinic’s healthcare assistants, an Italian female nurse (N). Though the immigrant woman has a good enough knowledge of Italian, a Russian-speaking female Armenian mediator (M) is called in “just in case”. M has long been permanently resident in Italy, and is an experienced mediator, well known to the clinic’s staff. At the time of the recording, she also worked as a journalist for a local paper, writing articles on intercultural issues and immigrants’ integration. The encounter starts with a long sequence of exchanges in Italian in which N asks about U’s personal details to register her as a new patient. N explains how, in the absence of a residence permit, a provisional health card can be issued giving access to emergency healthcare services. It is only at the end of this bureaucratic and general information-gathering sequence that N enquires about U’s reason for her visit. Significantly, in introducing the change of topic N waits for M (who has momentarily left the room) to come back, thus implicitly requiring a shift of language, as excerpt [1] shows:

[1]  **I1 (156-163)**

156 N: Now, to enquire about why you’ve come here let us wait for ((utters M’s first name)) so maybe we get to understand each other better.
158 ((M comes back into the room))
159 M: Okay.
160 N: I was saying that to—to accurately explain the reasons why she is here we’ve waited for you
161 ((utters M’s first name)) [ she
162 M: [What kind of problem do you have?
163 U: I want to have kids, as it were.

There follows a history-taking routine, alternating between bilingual and monolingual sequences, and displaying the typically repetitive pattern of healthcare provider’s question-(M’s translation)-service user’s answer. N conducts the questioning in a matter-of-fact style, shifting topics abruptly, and acknowledging U’s answers (especially those delivered directly in

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12 Line numbers refer to their place in the original transcript. The following transcription conventions have been used:

[ ] overlapping utterances
= latched utterances
°word° decreased volume
word— abrupt cut-off in the flow of speech
word lengthened sound
word emphasis
( ) untimed pause
(() ) contextual information; characterizations of the talk that cannot be spelled
(...) unrecoverable speech
Italian) without commenting on or assessing them. A representative fragment of this part of the interaction is shown in [2]:

202 N: So, you’ve never got pregnant until now.
203 U: No (…), but there has been an abortion before.
204 N: So, you did get pregnant once.==
205 U: Yes, [in—
206 M: [A pre ] gna [ncy.
207 U: [Yes () in 2005.
208 N: Was the abortion a miscarriage or did— or did you want it?==
209 U: I wanted it.

M intervenes to translate, on the request of both U and N, only when reference is made either to anatomical parts or to diagnostic tests and procedures. In one instance, the mediator is seen to initiate an autonomous line of questioning to establish whether U has ever had a cervical smear test. Apart from this occurrence of comprehension checking, and the frequent cues indicating attentive listening, neither N’s nor M’s interactional behaviours are particularly empathic. U, who was very relaxed at the beginning of the encounter, has in the meantime become visibly more tense. Yet, a complete change of tack occurs following N’s enquiry about the presence of any gynecological symptoms. Excerpt [3] displays the new dynamics:
The first feature worthy of note is the sudden intra-turn shift of language (from Italian to Russian) and addressee (“you can tell her”) in line 255. As the content of the utterance is in no way a technical one, the shift can most plausibly be put down to a psychological reason rather than one of linguistic competence; U is unsure whether what she’s about to say is medically relevant, and feels embarrassed at mentioning her intimate parts (see also 264–266). Her selection of M as her direct referent is at the same time a request for support and an attempt to reduce the distance between them. Recognizing U’s intention and embarrassment, M does not straightforwardly produce a translation into Italian, but enquires further (257) so as to be able to relay a more detailed description to N – note also the attentive listening cue “Is it so?” in 259, through which M
momentarily interrupts her translation to acknowledge U’s answer. Having immediately realized U’s misapprehension, N, on her part, reacts in a non-judgemental way; in fact, her subsequent requests for clarification (268, 270), uttered in a gentler and softer tone of voice, are clearly meant as empathic perspective-taking devices. The atmosphere has become so relaxed that the three women burst out laughing (274). Further evidence of empathic involvement are M’s reassuring words in the excerpt’s final exchange in Russian, and N’s offering to illustrate female genital anatomy, which she does quite at length in the subsequent sequence; excerpt [4] reproduces the most indicative turns – besides non-verbal cues, note, in particular, M’s echoing of U’s humorous and even self-ironical perspective, not only when a translation from Russian is needed (291-295), but also when exchanges are in Italian (301-309).

[4] I1 (291-295; 301-309)

291 M: The neck of the uterus, the no—here, this is the neck of the uterus. =
292 U: =I got it, yes, but what’s it doing up there? []((laughs))
293 M: []((laughing)) What’s it doing here? =
294 N: This is the vagina. () Eh?
295 M: =The neck of the uterus, what’s it doing up here, she says?

[...]

301 N: and this is the neck of the uterus and this is its place [inside the vagina.
302 M: [Now she feels better,
303 otherwise she [thought tha—
304 U: [Well, because, I didn’t— () I hadn’t noticed it before, then (…) 
305 I called some friends— female friends, that there was this thing, listen, what is it? 
306 What’s there? What do I have there? Th::s unknown— =
307 M: =What’s this? Meaning a thing that is []((laughing)) unknown
308 N: [](Instead°, it must be right there, because=
309 M: =((keeping on laughing)) extraterrestrial!

M’s presence is required also in the second interaction (I2) where an Estonian woman (E) goes to the clinic for the opposite reason, i.e. a voluntary termination of pregnancy. The service provider who meets her is an Italian female sociologist (S). Compared to I1, I2 has a reverse structure, as the main topic is addressed by S right at the beginning, while the administrative information-gathering phase takes place towards the end of the encounter (E too is an irregular immigrant with neither documents nor permanent residence). The sociologist’s initial turns soon display a markedly empathic attitude; her enquiring about E’s personal circumstances, particularly the relationship with her boyfriend, however, annoys the woman, who does not understand why she is being questioned and closes up. Though E has an adequate knowledge of Italian, in an
attempt to overcome her mistrust, S invites M to step in and speak to her in Russian. Excerpt [5] shows M tactfully relaying the request (40, 42), and E openly expressing her objection for the first time (43):

39 S: Now, shall we speak Russian so she will maybe relax a little bit?
40 M: You speak Italian well.
41 E: Mhm mhm.
42 M: She says, do you like us to speak Russian so that you may relax? That’s all.
43 E: Now, why all these questions? Is all this necessary?

In [6], which reproduces the continuation of the sequence, M takes two apparently contradictory decisions. She first translates E’s question into Italian (44), thus conveying to S the woman’s reluctance. Her translation restores the triadic interactional pattern by implicitly giving the floor to the other primary speaker. Yet, as S starts answering, M butts in again in Russian (46) most likely feeling that, for the conversation to proceed smoothly, she needs to preliminarily reassure E that she has nothing to fear since all the professionals working at the family planning clinic are there to help. This sudden alteration of the turn-taking sequence reallocates the floor to E, most significantly enabling her to fully manifest her expectations and apprehension (47-48). Knowing that S is by now perfectly aware of E’s emotional state, M feels free to give a humorous twist to her rendition in Italian (49) – a language that E understands – so as to ease the latter’s discomfort. E’s laughter (50) shows that M’s strategy has been a successful one. Further evidence of the mediator’s delicacy towards E’s feelings is her reticence to utter the word “abortion” (51) and her opting for a rendition (“to solve my problem”, 53) that attempts to keep the indirectness of the original wording in Russian (“what I have to do”, 47-48).

44 M: She’s asking, what’s the point of these questions?
45 S: Well, because=
46 M: =This is a safe place where people try to give women help and support.
47 E: Yes I know, I thought I’d come here, the doctor would simply examine me, I would do what I have to do, and go away. That’s all, isn’t it?
48 M: Because, you see, she is pragmatic, [she says ] I thought I’d come here
49 [[(laughs)]]
50 E: to have a– ((hesitates))=
51 M: =abortion=
52 S: =to solve my problem and go away.
In the extended turn that follows upon M’s translation, S explains the purpose of the counselling session, as shown in [7]. Worthy of note is that as she addresses E directly in Italian, S invites the immigrant woman to ask M in case she does not understand. Even more relevant for the present analysis is the perfect tuning between S and M, the sociologist’s words being but an amplification of the mediator’s reassuring ones in the earlier sequence (46). Considering that the latter were uttered in Russian – a language unknown to S – and that they were not translated into Italian, one can safely assume that M’s autonomous contribution was meant to convey, in a timely and more immediate way, the service provider’s as yet unspoken intention. Familiarity between S and M was no doubt a determining factor, as was the abundance of empathic cues displayed by S right from the beginning of the encounter.

[7] 12 (54-65)
54 S: Yes, but in Italy, on the other hand, there’s a law to terminate a pregnancy
55 — when you don’t understand you ask her okay? —
56 E: Mhm yes, yes.
57 S: (clears her throat) to terminate a pregnancy, that gives the woman a chance
58 to speak () with a service provider, () to speak about herself, because one is in
59 despair — right? — when they’re pregnant and don’t want to carry on the °pregnancy°
60 so don’t take it as if () someone came to you to: to ask you () questions, and::
61 you are on the defensive and say no, I don’t want them, okay? [See it instead ] as=
62 E: [Mhm mhm ]
63 S: = an opportunity to cry, to let your pain out but also to see (() someone knocks at
64 the door and comes in)) what is positive about it, () the consequences (() stops
65 talking to attend to the person who’s entered the room)).

While S is momentarily engaged in a parallel conversation with the newcomer, M initiates a sequence in Russian (see [8] below) to check E’s understanding (66). Before translating the service provider’s turn into Russian (omitted lines), M reiterates her earlier reassurance (68). Highly revealing of the empathic communication model characterizing the interaction is her remark “we are simply trying to understand your state of mind” (74), which she utters in Russian and then translates back into Italian (76). S, who is thus involved again in the affective exchange, confirms the orientation towards the patient’s well-being (77). Highly eloquent of their being at one with each other, is the sociologist’s completion of the mediator’s utterance.
4. Conclusions: “They talk about me, not to me. Why?”

The qualitative interactional analysis conducted in this paper has yielded the following findings. Firstly, despite the service users’ adequate knowledge of Italian, the mediator’s assistance was nonetheless required and language shifts occurred frequently in both encounters. These appear to be psychologically rather than just technically driven, since recourse to Russian did not merely coincide with conversational segments focusing on anatomical descriptions or diagnostic procedures requiring the explanation of medical jargon. In I1, the nurse waits for the mediator to come back before progressing from the routine information-gathering phase to the medical consultation proper, implicitly requiring a change in language; later on in the encounter, the Ukrainian woman suddenly shifts from Italian to Russian, in the middle of her turn, to address her doubts to M. In I2, while discussing one of the core topics (i.e. the Estonian patient’s relationship with her boyfriend), the sociologist invites M to go on in Russian as a means to overcome E’s mistrust. The mediator is thus positioned by both primary speakers as the participant with whom the service user can more easily affiliate.

This positioning entails the risk for service providers to be excluded from affective sequences, as interpreters may be tempted to manage the patients’ emotional expressions autonomously. Yet, in both encounters, M keeps the healthcare professionals fully involved by conveying to them the gist of the patients’ utterances. Affective triadic interaction is thereby achieved, also in instances of M’s independent agency. In one such case, M was found to interrupt the service provider at the opening of the latter’s turn and make, on her own initiative, a perspective-taking move of reassurance aimed at enabling the patient to fully manifest her emotional state. M’s empathic intervention turned out to be but a timely anticipation of the sociologist’s subsequent turn. This latter episode presents us with
the opportunity to answer the question raised, for the purpose of the present issue, by Cultus Journal’s editor David Katan, namely: To what extent do you agree or disagree with David Crystal when he says: "I don't expect my translator to be a mind-reader [...] knowing about the presuppositions and intentions underlying the utterances made by the participants" (Crystal & Jian 2013: 41). The mediator was so tuned in to the sociologist’s empathic approach that she was able to convey the latter’s intention even before her producing a complete utterance. What the mediator is performing here is not some kind of “mind-reading”, but rather “cue-reading”. Whereas in other translational contexts this cue-reading activity is hampered either by displaced situationality (as in written translation) or spatial and technical arrangements (as in conference interpreting), in dialogue interpreting it is favoured by both the physical proximity and the interactive discourse format; hence, the dialogue interpreters’ full-fledged participant status and their possibility to grasp, account for, and co-construct intended meaning.

This leads to a third consideration. Corroborating the current view of empathy as an intrinsically interpersonal communicative activity, the present analysis has evidenced not only that empathy is co-constructed by all participants, but also that the empathic process can be initiated by the interactional move of any one of them. In I1, it was U’s candid, though hesitant, anatomical enquiry that set the encounter onto a more friendly and even cheerful path than the one it had followed until then. In I2, it was the sociologist who adopted, right from the beginning, a markedly empathic attitude. Empathic displays were further reinforced by M in an attempt to help E open up. As for the actual devices, over and above the numerous cues of attentive listening and perspective taking (see in the excerpts the high frequency of words referring to understanding), field notes record frequent smiling and constant eye-contact, with the mediator occasionally touching the patients as an affective display. Significantly, no instances of sympathetic experience sharing were found in the encounters.

Finally, although the above interpretation of data could not be discussed and confirmed by interactants in post-session interviews given the tight working schedules, interactional evidence combined with the findings from the questionnaire submitted to the mediator (Merlini & Gatti forthcoming) make it reasonable to argue that, far from clashing with the medical goal of responding appropriately to a patient’s problem, empathy may be functionally and successfully used both to show compassion to a human being in need and to complete the institutional
I’d like to conclude with a personal anecdote. I started writing this paper in a hospital where I was being treated for pneumonia. I was sharing the room with a Rumanian woman who had been in Italy for ten years and knew Italian well enough not to require any language assistance. One morning, during the routine ward round, the doctor in charge came in with a smiling face; after checking with her that she spoke Italian, she briskly delivered the diagnosis, i.e. tumours of the parathyroid glands, using this very jargon. She then turned to the junior doctor and the nurses, and joked: “The patient has won a bed in the thoracic surgery ward!”. Without leaving the room, the doctor went on commenting the results of the tests with her younger colleague in an inaudible tone of voice expressing contrived concern, and with a suddenly sombre face. As they all left the room without interacting any further with the patient, the woman turned to me to ask if I had understood what was wrong with her, and uttered the sentence I’ve quoted in the heading of this paragraph. My subsequent course of action, being on this occasion simply the response of a caring fellow patient and not the response of an interpreter, falls beyond the scope of this paper. A number of observations, however, bear relevance to the topic under discussion. Firstly, though she did not understand the medical jargon, the patient caught the contradiction in the doctor’s non-verbal signals, and was far from reassured by the inappropriately cheerful delivery of diagnostic news, followed upon by the peer-to-peer gloomy confabulation. Secondly, she lucidly summarized the core of the problem, i.e. not being addressed, which in this case was even less justifiable given the patient’s linguistic competence in Italian and the absence of a mediator. Finally, over and above the patent violation of the patient’s right to clear and full medical information, the episode indicates that the non-empathic doctor-centred communication model is still a reality, despite the wealth of medical literature arguing, over the last decades, for a change in approach.

Coming back to our specific field, the above raises an interesting set of hypothetical questions. Let us assume that the Rumanian patient did not speak Italian and an interpreter was provided. What, in the circumstances, would have been an ethically suitable behaviour on the latter’s part? What kind of conduct would have been most effective to guarantee the patient’s rights and pursue her wellbeing? Could an empathic attitude by the interpreter have steered the interaction towards a different outcome? This paper has attempted to provide some initial and,
necessarily partial, answers. Though, at present, the empathy zone remains one of uncertainty, interpreting practitioners may find food for thought in the following quotation:

To be with another in [an empathic] way [...] means that you lay aside your self and this can only be done by a person who is secure enough in himself that he knows he will not get lost [...] and can comfortably return to his own world when he wishes. (Rogers 1975: 4; emphasis added)

Admittedly, this way of being empathic is so complex and delicate that, as Rogers himself notes, it “is rarely seen in full bloom in a relationship” (1975: 2). And yet, “security in oneself” and in one’s own professional competence might be the most promising way to steer one’s course amidst uncertainty.

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184-256.
Interpreting as coordination in doctor-patient interaction: talk organization and (inter)cultural presuppositions

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Abstract

Studies of dialogue interpreting have shown that interpreters are active participants in the interaction and that their contributions are oriented to and oriented by both the local interactional context and the wider institutional system. Wadensjö, in particular, has discussed the work of the interpreters in the interaction on the basis of a distinction between two main interpreter activities: translating and coordinating (1998: 108-10). In this paper, we discuss the notion of coordination and we look at types of talk organization involving interpreters in healthcare services. Our thesis is that different contributions of the interpreter to a possibly translatable turn (non-rendition, rendition and which type of rendition) have different consequences in the interaction. They envisage different organizations of turn-taking and make reference to different participant expectations. We observe that coordination of turn-taking organization and of participants’ expectations has implications for either promoting intercultural dialogue and/or constructing cultural filters.

1. Introduction

Studies on dialogue interpreting have shown that interpreters are active participants in the interaction and that their contributions are oriented to and oriented by both the local interactional context and the wider institutional system (Mason 2006). Wadensjö, in particular, has referred to the complex dynamics of interpreting in the interaction by introducing a distinction between two interpreter activities: translating and coordinating
In this paper, we discuss the notion of coordination and we look at types of talk organization involving so-called “linguistic-cultural mediators”, the staff who provide interpreting service in the healthcare institutions examined here. Our study is based on the analysis of recorded and transcribed data from two perspectives. The first is derived from Conversation Analysis (CA, Sacks et al. 1974). CA suggests that talk can be seen as a coordinated system of turn-taking where participants’ contributions are made relevant at particular points in the interaction. The concept of relevance thus refers to organizational or topical issues which are introduced and negotiated in talk as matters calling for the participants’ attention and involvement. So we look at participants’ contributions in our data “as relevant” to achieve particular actions and goals (see Mason 2006: 364). A second perspective is based on the observation of cultural presuppositions (Gumperz 1992; Gumperz and Cook-Gumperz 2009) of interpreter-mediated interaction. In particular we look at the ways in which interpreter-mediated interactions either reproduce and/or clash with particular cultural presuppositions.

Our thesis is that, following a participant’s turn, mediators may provide a variety of contributions and that the selection of one or another contribution makes reference to different participant expectations and has consequences for the organization of turns at talk. Mediators’ contributions thus coordinate turn-taking and, in so doing, make different participant expectations relevant in the interaction. This mechanism has implications for promoting dialogue and/or creating cultural filters.

2. Coordination in interpreter-mediated interaction

Wadensjö notes that interpreters coordinate the interaction both implicitly and explicitly. Implicit coordination takes place by translating into one or the other language; the selection of which language in most cases also works as a selection of the next participant(s). Explicit coordination is instead shown by actions, such as requests for clarification, requests for time to translate, comments on translations, requests to observe the turn-taking order, invitations to start or continue talking, and the like (1998: 110). These actions are not renditions of talk in the other language, but serve to coordinate turns at talk. Wadensjö’s idea of coordination is interesting because it treats non renditions as relevant translation actions.
in the interaction, rather than translation accidents as they seemed to be regarded in more traditional perspectives on interpreting.

Interpreter’s explicit coordinating activity is a delicate issue in interpreter-mediated interaction and the line separating what can be considered interpreter coordinating activity and what is instead “non-interpreter” or non-professional behaviour is sometimes thin. In particular, on one hand research on healthcare interpreting (Pöchhacker and Shlesinger 2007) recognises the primary role of coordinating activities in interpreters’ co-construction of meanings and in making consequent renditions of information possible. On the other hand, “by replacing monolingual interlocutors, by aligning with the parties by communicating affect and expressing solidarity, by exploring answers, by expanding or summarising, by sliding up and down the register scale and by controlling the flow of information” (Angelelli 2004: 78), interpreters become visible and may get “in the way”. These activities require a high degree of professional interpreter control and awareness and, if they are not managed well, interpreters may substitute doctors in their role duties and prevent patients from an adequate expression of their perspectives (see e.g. Aranguri et al. 2006; Bolden 2000; Bührig and Meyer 2004; Cambridge 1999; Davidson 2000; Meyer 2002; Pöchhacker and Kadric 1999; Roberts 2009; Tebble 1999).

In this regard, Hale invokes a “direct” approach to interpreting where “the interpreter interprets every turn, and the doctor and the patient address each other through the interpreter” (2007: 41-42), rendering exhaustively all the pieces of the information (including those conveyed with minimal responses). Hale’s position is that a “mediated” approach where the interpreter talks alternatively with the doctor and with the patient in two “interweaving conversations” may be difficult to coordinate efficiently and her clear preference for direct interpreting is first and foremost a preference for a type of coordination, implicit coordination, which keeps the interpreter in a more systematic turn-by-turn translation organization.

While, on the one hand, studies of dialogue interpreting recognise that coordination is functional to achieving success in translation, on the other, they risk overlooking its complexity. The distinction between the notions of “translation” and “coordination”, in particular, is sometimes considered to coincide with particular actions: translating actions (i.e. repeating or reformulating items in another language) or coordinating actions (e.g. asking for clarification). This distinction, though, is not implied in
Wadensjö’s work (see Wadensjö 1998: ch. 6.5) and may indeed be reductive. Rather than distinct actions, translation and coordination may be seen as different functions of same actions. In other words, interpreters’ actions are “translational” insofar as they make reference to potentially translatable turns and “coordinating” in that they make a series of consequent participant contributions relevant in talk. In this sense, asking for clarification and translating a participant turn are both translation (as they refer to potentially translatable turns) and coordinating activities (as they refer to former participant contributions and make new contributions relevant in the interaction).

In the next sections, we look at patterns of sequences of actions and analyse different types of interpreting contributions looking at their function as both “translating” and ”coordinating” activities. In particular, we analyse two aspects of interpreting contributions. The first has to do with the ways in which translating/coordinating activities promote the participants’ involvement in the interaction, at which point in the interaction and with which type of contribution. As coordination “distributes” turns, it provides interlocutors with opportunities to participate in the interaction, thus achieving conditions under which interpreter-mediated interaction “promotes” participant actions and their “voice” (see also Merlini and Favaron 2007).

The second has to do with the ways in which translating/coordinating activities favour the reproduction of the presuppositions of one (majority or minority) culture or rather promote diverse perspectives in communication (Baker 2006). In the healthcare system, interpreter-mediated interactions orient to expectations which traditionally concern generalised technical standards of treatment of illnesses, doctors’ performance and patients’ will to adapt to the doctor’s suggestions (e.g. Heritage and Maynard 2006). This is what has been defined by Mishler (1984) as the “voice of medicine”. By coordinating the interaction, interpreters may contribute to meeting the expectations of the healthcare system. Working in intercultural situations, though, interpreters are supposed to coordinate encounters in which different cultural expectations might emerge (Leanza 2007). The ways in which interpreter-mediated interaction is coordinated influences the forms of intercultural communication that are achieved (Angelelli 2004, 2012; Baraldi and Gavioli 2012a; Penn and Watermeyer 2012; Spencer-Oatey and Xing 2009). Intercultural communication constructs cultural differences (e.g. Holliday 2011; Koole and Ten Thjie 2001; Piller 2011; Verschueren 2008;
Zhu Hua 2014), showing different “cultural presuppositions”, or expectations regarding who can participate, what topics can be discussed and which norms regulate participation (Gumperz 1992; Gumperz and Cook-Gumperz 2009). In interpreter-mediated interactions, then, it may be expected that the voice of medicine may clash with a different set of cultural presuppositions that the migrant patients have been socialised into. This confrontation may concern expectations of treatment of illnesses, doctors’ performances and patients’ will to adapt to the doctor’s suggestions (Baraldi 2006). Interpreter coordination may need to deal with these differences.

3. The data

The data analysed in this study were recorded in three Italian hospitals, in two provinces in Northern Italy, an economically affluent area with a long tradition of efficient welfare services, including healthcare and more specifically migrant-friendly services (see Chiarenza 2008). The data consists of 150 interactions, involving Italian doctors and nurses, immigrant patients and bilingual staff providing interpreting service. The healthcare settings involve surgeries in or out of the main hospital building. Most surgeries deal with gynaecological diseases or prevention and pre- or post-maternity follow-ups so most of the patients in our data are women. Some encounters (about 10%) take place in surgeries of clinical medicine and these include male patients. The doctors and nurses are male and female native Italian speakers. The patients are migrants from North and West Africa (mainly Ghana, Nigeria and Morocco) and China, and belong to rather large immigrant communities in the district where the hospitals are situated. The languages spoken by the patients in the data are three: English (Ghanaian, Nigerian), Arabic (Jordanian, Moroccan) and Mandarin Chinese. Even though our data may allow for some cross-cultural analysis of the different language groups, here we look at those characteristics of interaction which seem to occur throughout the corpus as a whole.

The interpreting staff is composed of 7 women, all in their thirties: 2 Nigerian, 1 Ghanaian, Jordanian and Moroccan and 2 Chinese. They are part of a permanent staff of officially-called “linguistic-cultural” mediators hired by the medical institutions with the purpose of facilitating communication with immigrant citizens, both by providing interpreting in
their conversations with the medical staff and by helping them understand institutional conventions or requirements. There is an acknowledged preference for the Italian healthcare services to work with mediators from the guest-immigrant community rather than the host-Italian community (see Merlini 2009; Baraldi and Gavioli 2012b: 10-11), even though things are now slowly changing. Mediators in the area in which we have collected our data receive formal training in socio-cultural and communication topics, but are not necessarily trained in interpreting and translation skills. In order to acknowledge this professional peculiarity and in line with the preference of the Italian healthcare service itself, in this paper, we shall refer to this staff as “mediators”.

Due to reluctance from the institutions to accept the intrusion of video-cameras, the data are audio and not video-recorded. Comments on non-verbal aspects (e.g. participants’ posture, look or mime) are thus not included in this analysis. Transcription conventions are those commonly used in Conversation Analysis (Jefferson, 1978; Psathas and Anderson, 1990). All personal details mentioned have been altered in the transcription to protect participants’ anonymity. These audio-data were collected with the permission of the institutions and of the speakers involved, were recorded with the help of the mediators and transcribed with the aid of expert collaborators of Arabic and Chinese.

4. Three coordinating patterns

In our data, we have found that there are three main types of mediator contributions which follow a potentially translatable turn.

1. the mediator translates the previous turn (direct interpreting, Hale 2007: 41-42)
2. the mediator provides responses (acknowledgment tokens, continuers, requests for clarification or replies) to one of the interlocutors, postponing a (generally summarised) translation after the conclusion of the dyadic sequence (mediated interpreting, Hale 2007: 41-42)
3. the “third” interlocutor replies to the potentially translatable turn and the mediator does not translate (following Wadensjö 1998: 108, we can call this “zero-” or minimum-rendition).
These different types of contributions normally open different sequences of talk organization which we shall look at in detail below. Different sequences of talk seem, in their turn, to make relevant different participant expectations and different opportunities for cultural presuppositions to be expressed. We look at coordination as both turn coordination and coordination of expectations and presuppositions. In what follows, we draw a distinction between dialogic coordination and cultural coordination. Dialogic coordination favours expression of different voices, and therefore potentially different cultural presuppositions, while cultural coordination promotes the reproduction of the voice of medicine, or the presuppositions of the healthcare system.

4.1 Direct interpreting

When the mediator translates the previous turn, we have “direct interpreting” (Hale 2007: 41-42), a direct “passing” of that turn on to the next interlocutor allowing her/him to reply immediately after the completion of the translated turn. This interactional organization keeps the participants in contact and seems functional to the transmission of information. In our data, mediator translation response after a potentially translatable turn is not very frequent and is associated with activities like collecting details about patient’s histories or giving simple instructions (“sit down”, “tighten your fist” and the like). It is very often negotiated in the interaction, and consequently is less “direct” than it seems to be in Hale (2007).

Extract 1 provides an example. Translation is almost but not precisely turn-by-turn. The doctor’s (D) question in turn 78 is translated immediately in turn 79 by the mediator (M). The patient’s (P) answer “no” in turn 81 overlaps with doctor’s continuation in turn 80. In turn 82 the mediator produces a false start (seemingly a translation of doctor’s turn 80), but the patient’s answer “no no no” in turn 83 interrupts her. In turn 84 the mediator reformulates her translation and then checks that the patient understood the doctor’s question correctly (“nothing?” turn 86). The mediator then repeats the patient’s answer to the doctor (“no”, turn 86).
Direct translation as in turn 79 does not only pass the turn to the next speaker, it also achieves the interactional function of showing that interpreting is non problematic and that the mediator can carry it out quite smoothly, using same or similar words and contents in the two languages.

Direct translation seems functional to the achievement of shared expectations. By providing immediate translation, the mediator simply passes the turn to the next interlocutor showing that the speaker-in-turn has produced utterances that are fully understandable and “translatable”, with no need to negotiate the meaning of what is said or participants’ possibly different expectations. While mediators may address cultural differences in their renditions, direct translation does not raise these differences to the interlocutors’ attention. For instance in extract 1 above, the word “nipoti”, which in Italian could either mean “grandchildren” or “nephews/nieces”, is rendered by the mediator with the general expression “in the whole family”, the problem is nicely solved by the mediator and no language or cultural difference is brought to the attention of the interlocutors.

An important point is that non problematic interpreting does not necessarily coincide with an absence of problems in what is talked about; it has rather to do with the mediator’s treatment of the turn that is provided. There are cases where simple instructions are treated as problematic. See for instance the doctor’s instructions and the mediator’s reply in extract 2.
Here, rather than translating, the mediator turns to the doctor and explains that pasta is not a real alternative for the patient, as pasta is not a type of food she normally has. In so doing she poses a problem in the accomplishment of translation, since “pasta” has no equivalent word and may be considered “non-informative”, not a real alternative, on the part of the patient.

Extract 2

100 D Può mangiare un po’ di pasta e un po’ di carne a pranzo, un poco di riso
She can have some pasta and some meat for lunch, some rice

101 M Perché i nostri mangiare sono riso specialmente, pasta poco perché non è nostra
Because our food is rice especially, pasta not much because it is not ours

In these cases, the mediator’s choice to suspend translation signals that the turn is not easily translatable and some “visible” coordination operation needs to be carried out by the mediator to get to what can be a “translatable” unit of meaning. The operation of suspending translation, as in extract 2 above, is very frequent and can be complex, leading to mediated interpreting.

In brief, from an interactional point of view, direct translation is not only a form of translation, but it accomplishes the communicative function of treating language or cultural problems as not relevant in the interaction.

4.2 Mediated interpreting

Following a first potentially translatable turn, the mediator often responds by providing items which are, strictly speaking, different from translation. These are acknowledgment tokens, continuers, requests for clarification or direct replies. These mediator contributions treat the previous turn as “non-immediately translatable” and are frequently correlated to “problematic” or delicate issues, e.g. doctor’s instructions for therapies where the collaboration of the patient is very important, doctors’ or patients’ expression of doubt, worries or embarrassment, patients’ need for reassurance.

By responding with acknowledgment tokens, continuers or direct replies, the mediator aligns with the speaker-in-turn (either the doctor or the patient) as the responder, constructing those “interweaving”
conversations which Hale (2007: 42) sees as a characteristic form of mediated interaction. This type of coordination suspends direct interpreting and initiates a dyadic sequence involving the mediator and one of the interlocutors. This talk organization separates the participants (Baraldi and Gavioli 2008; Hale 2007), but is clearly functional to the provision of clarification and expression of problems and doubts on the part of one or both interlocutor(s).

Let us look at two different examples of mediated interpreting, where the mediator coordinates two dyadic sequences, one with the doctor and one with the patient. We can see that even though both examples are formed by two dyadic interweaving sequences, forms of coordination and participants’ contributions are very different. In extract 3, below, we have an example of two dyadic sequences involving first the doctor and then the patient. The patient has a heart disease and needs to take medicines regularly and have constant check-ups. The doctor explains this problem to the mediator in talk occurring before this extract and says that the present patient’s problem is probably due to the fact that he did not take medicines regularly. When the first part of the extract starts (extract 3a) the doctor is deciding next check-up appointment for the patient (turn 87). The mediator provides an acknowledgment token which is also taken up as a continuer by the doctor who in turn 88 explains that check-ups will be very frequent for this patient. The mediator acknowledges this (turn 89) and poses a new problem (mentioned by the patient previously in the conversation). In turn 90, the doctor replies that this new problem will be dealt with soon and that for the moment the mediator needs to warn the patient about the necessity of frequent heart check-ups. So a negotiation of different expectations takes place in this first part of the extract, where the doctor and the mediator negotiate what needs to be translated to the patient, first and foremost. The mediator in turn 90 provides an acknowledgment token and then starts translating.

Extract 3a

87 D martedì è sette, vero?
Tuesday is the seventh, right?

88 M mmh, mmh.

88 D allora gli dici di portare pazienza perché per le prime due settimane ci vedremo spesso
now tell him to be patient because in the first two weeks we’ll meet very often

89 M ok, però l’orecchio -
ok, but his ear -
no, no, no. adesso ci occupiamo dell’orecchio, intanto digli che
deve portare pazienza.
no, no, no. in a minute we’ll take care of his ear; for the moment tell him
that he has to be patient.

ok. (.) 翻译：你这个月尽量多****，下个星期二，七号，
下午两点半来这里，我们再给你做血压检查，心脏检查，
吃这个药，中药不要吃了
This I recommend you, ((??)), next Tuesday, the seventh, at two thirty you
come here so that we check your blood pressure, your heart. And take this
medicine, don’t take the Chinese medicine any longer.

In turn 91 above the mediator provides a translation of the doctor’s turns
and also mentions what was said by the doctor in previous turns in the
conversation, i.e. that the patient needs to take the medicines that have
been given to him regularly and that he has to stop the Chinese treatment.
In turn 92, in extract 3b below, the “don’t take the Chinese medicine”,
represents a patient change of state token (Heritage 1984) and indicates a
mismatch in participant expectations. The dyadic sequence that follows
provides negotiation of understanding of such change of state.

Extract 3b

92 P 患者：中药不要吃了?
ab, don’t I?
93 M 翻译：中药一概不要吃了，不要忘了，到意大利来不要吃了，听懂了没有?
No, remember this, you are in Italy now, you do not have to take those any
longer, you understand?
94 P 患者：中药不好，不能吃?
the Chinese treatment is not good? You can’t eat it?
95 M 翻译：不能吃的，ok? 清楚了？还有没有不清楚的?
no, ok? Is it clear? Is it clear now?
96 P 患者：这药给我吧。这个药。
this medicine, they’ve given me
97 M 翻译：这个药不要吃的 ok? questa non gliela do perché loro
( ) allora sto cercando di
((in Chinese)) You do not have to take this medicine okay? ((in Italian))
I don’t give him this because they (.) so I’m trying to (.)
We can notice that the mediator’s confirmation of the change of state, in turn 93, elicited by the patient in turn 92, is not immediately accepted by the patient. There is thus a sequence where the patient tries to re-establish the former state (see turns 94, 96, 98) and the mediator insists on the non-possibility of re-establishing it. Evidently, after the patient’s recognition of a change of state the mediator insists that the patient stops the Chinese treatment and takes the Italian/Western one, that is to say, the mediator insists that the prevailing cultural presuppositions of Western medicine are accepted.

The patient’s reluctance is not fully passed on to the doctor. In turn 97, the mediator produces an attempt to explain to the doctor what she is trying to do. She does not, though, report the problem to the doctor, rather she insists that the patient accepts the view proposed as “the only possible one”. This extract shows that Hale’s doubts on the difficulty in coordinating interweaving conversations are well-grounded. Here we suggest that this difficulty may have to do with coordinating the participants’ expectations and interactional presuppositions, and that looking into how these are treated in the interaction may explain some of the problems related to interpreter coordination activity and its complexity.

Differing expectations pose translation problems and are addressed “visibly” through talk. In extract 3 above, different expectations are raised both in the doctor-interpreter interaction, where the heart disease and frequent check-up is established to be the priority issue to be translated, and in the patient-interpreter interaction, where the patient’s expectations clash with those raised by the interpreter-mediator. For the moment, let us just note that while the mediator aligns to the doctor’s expectations in the first part of the sequence and accepts the medical presuppositions that are referred to, she does not align to the patient’s expectations nor accepts the patient’s presuppositions.

In suspending translation, the mediator becomes the interlocutor of the speaker-in-turn and her participation as an interlocutor may take at least two forms: 1. she may promote participation of the speaker-in-turn,
showing understanding and encouraging her or him to go on; 2. she may align to the positions of one of the interlocutors. In the first case, the mediator’s contribution is oriented to the promotion and encouragement of the interlocutor’s “disclosure” as preliminary to making that disclosure relevant in the interaction with the other interlocutor. In the second case, the interlocutor’s disclosure is treated as directed to the mediator and shared with her/him. In the latter case, suspension of translation, where the mediator and one of the interlocutors negotiate and share one participant position, leads to ethnocentric interaction (Gudykunst 1994; Pearce 1989). The mediator’s coordination of talk in these cases promotes an “in-group” (“us”) position shared by two participants and excludes the third one.

In extract 3a above, the position of the doctor is accepted and shared by the mediator, who, in extract 3b keeps that position in rendering and impedes the interlocutor, the patient in this case, from negotiating a translatable reply. While the resistance of the patient here leads to the expression of his position (and to the clash), that position is not translated to the doctor, which prevents the different views to be treated in talk by the interlocutors. So the two dyadic sequences in extract 3 show two very different types of coordination. In talk with the doctor, the mediator aligns with the doctor favouring the doctor’s talk and expression of expectations. In talk with the patient she maintains the doctor’s position against that of the patient and does not render the patient’s view to the doctor. Expectations are thus negotiated between the doctor and the mediator and the medical “in-group” presuppositions are imposed on the patient. As this form of gatekeeping (Davidson 2002) constructs a We-identity (Ting-Toomey 1999) reproducing (even forcing, as in the extract above) its cultural presuppositions, we have called this type of coordination “cultural” coordination.

A different type of coordination is visible in extract 4, below. Here too we have two dyadic sequences, first the mediator talking to the doctor and then the mediator talking to the patient. In the first part of the extract, the doctor looks at the ultrasound test of a pregnant patient and says that the baby’s posture is podalic (turn 49) and that a new ultrasound test needs to be taken after four weeks (turn 51). Even though the information is given in a straightforward, directive way (the doctor is probably compiling a prescription) the mediator does not translate immediately, but elicits the doctor to say more (“maybe it will turn from here to January?”, turn 52). The mediator’s elicitation takes the conversation with the doctor from
mere communication of prescription (‘‘a new ultrasound test in four weeks’’ turn 51) to ‘‘what can be said to the patient’’. The doctor checks with the mediator whether the patient can be reassured (‘‘previous deliveries were all spontaneous?’’ turn 53) and opens the possibility that the baby in fact will turn (‘‘it turns yes’’, turn 53). While engaging in a dyadic sequence with the doctor then, the mediator here does not confirm or agree with the doctor’s statements. Instead, she collects information and asks questions which may enable her to render the news to the patient accurately and adequately. Mediator’s turn 52 in particular calls the doctor’s attention to a possible patient’s concern (‘‘will the baby turn?’’) and elicits reassurance. From turn 55, the mediator translates both the doctor’s prescription (to take a new ultrasound test) and reassurance (the baby’s position may still change) to the patient.

Extract 4a

49 D  ((to I, reading records)) Perché qua vedi (.)
terzo trimestre presentazione podalica
Because here you see (.) third month podalic version
50 M  Eh.
51 D  Ulteriore ecografia tra 4 settimane
A new ultrasound test in 4 weeks
52 M  Perché può darsi che da questo momento fino a gennaio (.) può darsi che si gira?
Because maybe that from this moment on until January (.) maybe it
turns?
53 D  Si gira (.) si. Le altre volte ha partorito tutte spontaneamente?
It turns (.) yes. Previous deliveries were all spontaneous?
54 M  Si.
55 M  [if God wants that will be
good.
56 D  [Speriamo bene –
[Hopefully -
57 M  بتقللك حالياً هلّ موش مدور بعد الرأس
She tells you that for the moment he hasn’t turned his head down
58 P  Mmh mmb.
In interacting with the doctor, then, the mediator raises issues that may be important for the patient and attracts the doctor’s attention to them. So, what is to be translated to the patient is negotiated interactively by the doctor and the mediator.

In the continuation of extract 4, the patient does in fact get involved and it is interesting to see that (similarly to what occurs in extract 3) there is a change of state on the part of the patient and she does not simply accept the mediator’s reassurance. In turn 64, she asks what happens if the baby does not turn and after the mediator’s further reassurance (turn 65) she insists on further information, also doubting the mediator’s cultural reference to God’s generosity: “And if it doesn’t turn like (.) God doesn’t want.” (turn 66). This prompts the mediator to get back to the doctor and ask about the consequences of a possible podalic extraction: “in case it doesn’t turn? Caeserian?” (turn 67) which the doctor confirms in turn 68. The mediator’s comment in turn 69, to avoid the possibility of a caesarian delivery, leads to the patient’s laughter (turn 70) and to the doctor’s reassurance expressed to the patient directly (turn 72).

Extract 4b

If it doesn’t turn?

If it doesn’t turn (.) for God’s sake (.) don’t think of that right? (.) Keep psychologically calm and for God’s sake it will turn.
While the form of patient reply to the mediator translation here is not so different as compared to that in extract 3, here coordination is carried out quite differently. In particular, the doctor is re-included in the interaction and both doctor and patient expectations are raised and dealt with in the interaction. We have called this type of coordination “dialogic coordination” as it orients to the perspectives of both the doctor and the patient, and the mediator’s rendition opens up to their involvement in the interaction making the two interweaving dyadic sequences merge.

Summing up, extract 3 and 4 above show a number of similarities with some relevant differences. In both cases dyadic sequences are constructed involving the mediators and each of the interlocutors separately and in both cases, the mediator aligns with the doctor and collects details that are afterwards rendered to the patient. In both cases, the patients react to what is rendered by the mediator and show resistance, which in both cases takes the form of questions. In example 3, the patient’s resistance is not rendered to the doctor, the mediator shares the doctor’s position and imposes it to the patient. In example 4, while the mediator shares the doctor’s position and attempts to reassure the patient, she also renders the patient’s “resisting” questions to the doctor. This, as well as acknowledging the doctor’s authority and re-involving her in talk, gives the doctor the possibility to reassure the patient. Dyadic sequences then do not in se create exclusion; their (positive) function in soliciting the interlocutors’ view and positions (even contrasting positions) is clear. Once solicited and displayed, though, these positions need to be treated in
the interaction and rendition following dyadic sequences may often be vital. In extract 3, what excludes the patient from “taking part” is not the mediator’s engagement in talk with the doctor (whose position is made clear to the patient), rather the failure to render the patient’s position to the doctor, which makes the doctor’s position “the one” to be accepted (and imposed).

It is clear, from the examples above and as envisaged also by Hale (2007: 41-48), that coordinating mediated interpreting may be a complex and risky task. It seems however that mediated interpreting, more likely than direct interpreting, offers opportunities to participants to express their own (even contrasting) positions. The mediator’s coordinating activity then consists in making these positions “treatable” in talk, by “opening up” the possibility that different views can actually be dealt with. The combination between promotion of one speaker participation in dyadic sequences and inclusion of the other speaker through translation makes dialogic coordination probable.

4.3 “Zero” or minimum rendition

As we have seen above, translation is not “automatic” but is negotiated in the interaction, and the necessity to deal with and clarify different participant expectations may well postpone the rendition. Translation negotiation may also regard the actual necessity of providing a translation, and participants may make clear, in talk, that no translation is necessary to achieve understanding at particular points. Still, both translational and coordinating activities take place in the interaction making reference to potentially translatable turns and to a series of consequent participant contributions. Coordinating activities regard turn-taking and participant expectations, making cultural or intercultural presuppositions relevant.

Let us look at extract 5. In turn 31, the patient answers the doctor’s question (translated by the mediator in turn 30) in Italian. The doctor confirms understanding by repeating the patient’s answer in Italian and asks a question in English. There is a negotiation: first, of the possibility of the doctor and the patient to speak without the mediator’s help; second, of which language to speak. It can be noted that the doctor solicits and collects details from the patient, trying English (turn 32), English and Italian (turn 35) and simplified Italian (turn 37). The mediator does not translate and only intervenes at turn 42 to solve what she understands to
be an issue of clarification in turns 37-41 (what is meant with “normal”).

Extract 5

29 D Quand’è stata l’ultima mestruazione?
   When was your last menstruation?
30 M Your last menstruation
31 P [eh, ah, ventinove
   [erm, ah, twenty-ninth
32 D Ventinove (3.0) And was regular?
   twenty-ninth
33 P What?
35 D Was regular, I mean how many days? Quanti giorni è
durata?
   How many days did it last?
36 P Ehm
37 D Come? normale?
   How? normal?
38 P Si, normale
   Yes, normal
39 D Ok
   (.)
40 D Normale vuol dire cinque giorni, quattro giorni?
   Normal means five days, four days?
41 P No
42 M [how many days?
43 P Sette
   Seven
44 D Sette giorni
   Seven days

Anderson (2012) notes that code-switching is used in interpreter-mediated doctor-patient interaction particularly in the phase of consultation, when the doctor collects information from the patient, and in providing reassurance. She suggests that speaking each other’s language may create closer contact between doctor and patient and she notes that mediators may play an important coordinating role in favouring this contact. We suggest that this coordinating role is based on two main mediator activities both visible in extract 5: a. the mediator remains aside and silently allows the speakers to speak to each other (turns 32-41), b. the mediator provides
local help in case where understanding becomes difficult (turn 42). It is interesting to note that local help can be provided in clarifying the presuppositions involved in what is meant by “normal”, as in the example above, but also to clarify expectations and attitudes about particular procedures. In extract 6 below for instance, the mediator “translates” the patient’s outburst, making it clear that the patient is frightened and she probably needs more support and reassurance. She gets it first from the nurse in turn 7 (“la capisco”). In turn 9, the patient switches into Italian and calls for understanding (“fa male no?”), which is followed by a joking sequence where the mediator and the nurse make fun of their different perceptions of punctures for blood samples’ collection.

Extract 6

((The nurse (N) is taking a blood sample from the patient))

5 P Aaah:: oooh::
6 M Ha tanta, molta paura lei –
   She is very very frightened she -
7 N La capisco.
   I understand her.
8 M Don’t move your arm. Don’t (.) if you move (??).
9 P Fa male, no?
   It’s painful, isn’t it?
10 N No!
    No!
11 M No, altroché se fa male!
    No, it is painful it is!
12 N ((jokingly, to the mediator)) Ma smettita
    Stop it –

As compared to the first two types of mediator’s contribution that we have considered here (direct and mediated translation) these extracts show even more evidently that the mediator is not the only one responsible for translation coordination; the other participants as well contribute to making the mediator’s translation relevant or “non-relevant” and in the decision to switch languages or even self-translate.

The mediator, though, can support these actions by remaining aside and by simply providing that local support that is necessary to allow the participants to continue. Rather than abdicating their role of coordinators of turns and expectations/presuppositions, mediators here are promoting direct contact between patients and doctors, and are providing
opportunities for them to express themselves directly.

By postponing her intervention to a point where it is relevant in the interaction, the mediator supports direct communication between the participants and their engagement in language switching or in translation. In the extracts above, the doctors’ “translational” contributions (foreign talk, language switching) are important in the interaction as they give way to two important opportunities: (a) that the patients communicate, at least in part, directly with the healthcare provider, (b) that the doctor and the mediator cooperate in the translation process and in the achievement of understanding. The mediator can then recognize and support the doctor’s contribution in this respect (there are cases where we have overt appreciation by mediators of the doctors speaking the patients’ language). In these cases, the doctor’s and patient’s direct participation in translation and the mediator’s “keeping aside” and minimal local help are likely to promote dialogic coordination as they put the interlocutors in a condition to be able to interact with each other directly.

5. Conclusion

In our analysis we have looked at mediators’ contributions as translating activities (making reference to potentially translatable turns) and as coordinating activities (soliciting specific actions). The examples above show that there are a number of types of mediator contributions, and also that “direct interpreting” (Hale 2007) is only one of them. Indeed, it seems that when different participant expectations are involved, different types of translation organization come into play and we have “mediated interpreting” (Hale 2007) or zero/minimum renditions (Wadensjö 1998). While engaging mediators in translating/coordinating activities that are more complex than direct interpreting, these types of talk organization allow participants to make their expectations explicit in the interaction. When different expectations emerge through talk, they need to be “talked about”, “treated” in the interaction. The explicitation of diversity may thus provide a first step to mediation.

The treatment of different expectations, then, may be oriented to alignment to the presuppositions of one (majority or minority) culture or to the promotion of diverse perspectives. What we have called “dialogic coordination” is a series of mediator actions (including direct interpreting but not limited to that) which: a. allow different presuppositions to emerge
in talk and b. favour their treatment by participants, allowing different expectations to emerge and be discussed (e.g., regarding treatment of illnesses, medical procedures and patient compliance). By making participants’ contributions a treatable topic, dialogic coordination opens, rather than closes, the opportunity for participants to talk.

Paradoxically, though probably not surprisingly, our data show that while dialogic coordination “opens up” the voice and participation of the interlocutors, it tends to de-emphasize cultural differences. So while cues of different cultural perspectives may be present in talk, forms of dialogic coordination like those we have described above tend to treat participants’ as “individuals” rather than as “members of cultures”. For instance, in extract 5 above, it is not easy to say whether the doctor asks clarification about the meaning of “normal” because the “normality” of women’s periods has an ethnic component or simply because of individual variation. What we can observe is that participants’ utterances are “translated” in the interaction and made relevant to it. In this way parties are made interesting subjects in their being active participants, and not as members of groups with particular We-identities. Coordination, then, is not dialogic for the construction of different cultural meanings, but for the importance assigned to the participants’ contributions.

In this perspective, there seems then to be an overlap between dialogic coordination and patient-centred communication in healthcare systems. The patient-centred approach (e.g. Dale et al. 2008; Kaba and Sooriakumaran 2007; Mead and Bower 2000; Zandbelt et al. 2005; see also Merlini in this issue) advocates for the medical benefits (in terms of psychological status, physiological symptoms and functional outcomes) of patient-centred communication, which correlates doctors’ active listening, exhibition of care and empathy, on the one hand, and patients’ expressions of their personal “lifeworld” (Barry et al. 2001) on the other hand. Some research in this area (Meeuwesen et al. 2007; Moss and Roberts 2005; Schouten et al. 2007) has argued that patient-centred communication coincides with successful intercultural communication and the categories which indicate positive relationships and effects are very similar in the two cases. Our research shows that interpreters’ dialogic coordination can favour patient-centred communication (see also Baraldi and Gavioli 2007; Merlini, this issue).

To sum up, dialogic coordination is not necessarily, and very often is not at all, related to the emergence of cultural differences in the interaction. Coordination is dialogic if and when it promotes (a)
opportunities to express perspectives and expectations, and (b) sensitivity for these perspectives and expectations; that is if and when it promotes a form of communication which empowers participants’ personal expressions (Baraldi 2009, 2012). Translation is what creates space for such opportunities and what makes them clear and understandable to the participants in the interaction. In this respect, a point of contact may be suggested between effective translation and effective dialogic coordination.

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Insights from the field: perception of the interpreter’s role(s) in cases of gender-based violence

Carmen Valero-Garcés

Abstract

The aim of this paper is to argue for specialization in interpreting in the context of gender-based violence and to describe the risks of working with interpreters who lack training in this context. A large-scale survey on gender-based violence carried out in 2011 by the Spanish Center for Sociological Research (CIS) in collaboration with the Spanish government warns that “the prevalence of gender-based violence among foreign women is twice that among Spanish women.” The present paper will focus on the medical and social services involved in communicating with foreign victims of gender-based violence in Spain who do not speak Spanish or co-official languages. Our objective is to determine the experience of service providers in cases of gender-based violence, to understand their perception of the interpreter’s role(s) in this context, and to gauge their level of awareness regarding the importance of using professional interpreters. We intend for their suggestions to serve as a contribution to the professionalization of the field of public service interpreting and translating, particularly in the context of gender-based violence.

1. Introduction: Linguistic diversity and access to social services for victims of gender-based violence

The term “gender-sex system,” coined by Rubin (1975: 159), is defined as “the set of arrangements by which a society transforms biological sexuality into products of human activity, and in which these transformed sexual needs are satisfied.” Benhabib (1990: 125) later explained this system as follows:
The gender-sex system is not a contingent but an essential way in which social reality is organized, symbolically divided, and lived through experientially. By the “gender-sex” system I understand the social-historical, symbolic constitution, and interpretation of the anatomical differences of the sexes (my translation).

Pérez Freire and Casado-Neira (2015: 28) emphasize that this system underlies patriarchy—a concept introduced in feminist theory that argues that social organization (which drives the cultural, political, economic, and individual spheres) is based on the domination of men over women. Lorente (2001: 38) insists that the origin of violence does not lie in family ties but in the very condition of being a woman:

A woman is attacked for being a woman, not for being a wife, mother or homemaker; for this reason abuse often begins before family or domestic life is ever established (during courtship), and does not end even when the domestic or family relationship is terminated. We should not confuse the means with the grounds: the family or domestic relationship is nothing more than the setting where cohabitation between a man and a woman occurs (my translation).

This quote undoubtedly reflects the traditional view of women as the subjects of discrimination and, thus, victims of an uneven distribution of opportunities and sex/gender identification.

In 1993, the term “gender-based violence” was introduced in the U.N. Declaration on the Elimination of Violence against Women:

Art. 1. For the purposes of this Declaration, the term “violence against women” means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life (UN 1993).

Two years later, at the Fourth World Conference on Women (Beijing 1995) the term “violence against women” was defined as “an obstacle to the achievement of the objectives of equality, development and peace,” which “both violates and impairs or nullifies the enjoyment by women of their human rights and fundamental freedoms.” (UN 1995).

Almost a decade later, in March 2014, the European Union Agency for Fundamental Rights (FRA) released results from the first survey on
violence against women across the 28 EU member states. This study, which was the first of its kind in scope, was based on interviews with 42,000 women across the EU who were asked about their experiences of physical, sexual and psychological violence, including incidents of intimate partner violence (“domestic violence”). The results indicate that an estimated 13 million women in the EU experienced physical violence over the course of the 12 months prior to the interviews. This corresponds to 7% of women in the EU aged 18 to 74 years. The study does not mention gender-based violence against foreign women who do not speak the language(s) of the respective countries. Nevertheless, a glimpse of this fact was included in the 2011 large-scale survey on gender-based violence carried out by the Spanish Center for Sociological Research (CIS) in collaboration with the Spanish government. This report indicated that “the prevalence of gender-based violence among foreign women is twice that among Spanish women” (INE 2014c).

The immigrant population in Spain is estimated to make up 12% of the country’s total population. Within the immigrant population, 48% are women and 85% of those women are over 15 years old (INE 2014a). Based on official data, it can be estimated that more than 70% of the immigrant population does not speak Spanish as a native language or use Spanish as a contact language in their countries of origin. Data also show that the most common nationalities (with 30,000 individuals or more) represented among female immigrants in Spain who are over 15 years of age are the following, in descending order: Romania, Morocco, United Kingdom, Ecuador, Colombia, Bolivia, Germany, Argentina, Bulgaria, China, Brazil, Peru, Paraguay, Dominican Republic, France, Ukraine, Portugal, Poland, Russia, Venezuela, and Italy. Of these 21 countries, 13 do not use Spanish as an official language.

Not included in the data are figures on tourists (which have now exceeded 60 million a year) (INE 2014b) and individuals without legal status in Spain (i.e., those who enter as tourists and remain for more than three months) (Izquierdo 2008: 621)—the latter being noteworthy contributors to higher numbers of immigrants. This population, which is doubly vulnerable given its members’ lack of legal status, furthermore includes women who are victims of human trafficking.

In terms of data on gender-based violence, according to Pérez Freire and Casado-Neira (2015: 41), the only official data available are those published by the Spanish Central Registry for the Protection of Victims of Domestic Violence (under the Spanish Ministry of Justice). It is worth
noting that these data only include cases involving a legal judgment, precautionary measures, or protection orders; that is, in cases resulting in explicit legal judgment. The subjects of these cases have come to be known as “judicialized victims.” For this reason, the data exclude cases that have not been officially reported, those that have been reported but are still awaiting trial, and reports that have been withdrawn or rejected, thus creating a great challenge to obtaining consistent data. Pérez Freire and Casado-Neira (2015: 48) offer the following information:

In the context of judicialized victims of gender-based violence in Spain, 2.98% are Spanish and 97.02% are foreigners of varying origins. Within the female immigrant population, 72.31% are from non-Spanish-speaking countries, of which between 4 and 6.5% also reside in Spain without legal status (thus limiting their level of protection and their access to health, police, legal and social services coverage).

According to the SOS-VICS\(^1\) team, there are three fundamental aspects to consider as the basis for research and subsequent elaboration of training materials when dealing with cases of gender-based violence. SOS-VICS refers to the research group that developed the pilot project “Speak Out for Support (SOS-VICS)” (JUST/2011/JPEN/AG/2912), a project whose objective is to improve training for interpreters working in the context of gender violence. This project is co-financed by the EU’s Criminal Justice Program and partner universities. The purpose of SOS-VICS is to facilitate assistance for victims of gender violence and to help raise awareness surrounding the importance of hiring professional interpreters for linguistic mediation in such cases. These three fundamental aspects are (Valero-Garcés et al. 2015: 197-198):

1. The particularities of addressing gender-based violence. Its consideration as a health issue, steps towards building awareness, and training offered by administrations for medical staff (and even techniques for diagnosis and follow-up) are described in both national and regional laws and protocols for action.

2. The distinctive characteristics of foreign patients. It takes a certain type of provider to best treat cases involving this vulnerable group. The best providers for this setting are those who are able to detect gender-

\(^1\) For more information about SOS VICS: http://cuautla.uvigo.es/sos-vics/.
based violence and treat patients without the interference of barriers (whether cultural or linguistic) throughout the entire course of treatment.

3. Overcoming communicative barriers also means using professionals in communication (interpreters, translators, mediators) who are trained in gender-based violence and who are integrated into the multidisciplinary team of experts who treat victims.

Using these ideas as a foundation, we will explore the opinions of service providers in order to determine whether they agree with the above considerations.

2. The study

2.1. The data

The data in the present study are derived from interviews, surveys and conversations with medical professionals and social workers in institutions and centers that provide care for victims of gender-based violence. Data come from two main sources:

1. Figures from “Speak Out for Support (SOS-VICS),” a pilot project co-financed by the EU’s Criminal Justice Program and partner universities during 2012 and 2014 (JUST/2011/JPEN/AG/2912). The main objective was to improve training for professional interpreters who work with victims of gender-based violence and at the same time raise awareness about the importance of hiring professional interpreters during linguistic mediation in cases of abuse. Research results and materials from the group are available online. Data from the study come from questionnaires and interviews published in Del Pozo Triviño et al. (2014) and Toledano Buendía and Del Pozo Triviño (2015).

2. A small study conducted during January and March of 2014 by individuals associated with the FITISPos group, which examined NGOs and institutions (Red Cross, ACCEM, Instituto de la Mujer [Institute of Women]), official social services centers and immigration offices (Trigo 2014).

2.2. Main objectives

The main goal of this study was to investigate the opinions of medical and social services professionals on aspects of interpreter mediated
communication with foreign victims of gender-based violence (hereinafter GBV) who do not speak Spanish or co-official languages.

Special attention was paid to the following four points:
1. The experience of medical and social service professionals (service providers—SPs from here on) in working with victims of GBV.
2. The role(s) that SPs attribute to professional interpreters working in GBV.
3. The SP’s perception of interpreter compliance with a code of ethics specific to interpreters working in GBV.
4. Training for professional interpreters working in GBV.

3. Analysis of the perception of the interpreter’s role(s) in GBV

3.1. Experience of SPs working with interpreters.

The following are three comments on the experiences that SPs have had with interpreters in cases of GBV:

COMMENT 1. I have never worked with professional interpreters, just with people that the victim chooses to bring (or so I believe) and who accompany her during the interview. In general, it’s a daughter or a female friend with great interest to help. We discuss aspects that are purely instrumental (legal and social resources) but we are unable to make progress on treating emotional damage (Del Pozo et al., 2014, #202, p. 96).

COMMENT 2. I never work with professional interpreters, just with people close to the victim. I have worked with alleged foreign victims (Romanian, Moroccan) who did not report any allegations and it was impossible to talk to them about the matter since the possible aggressor accompanied them to the medical consultation (Del Pozo et al., 2014, #4, p. 91).

COMMENT 3. Much of the time help is sought from people who speak the language of the GBV victim or people from the victim’s community rather than professional interpreters. This results in biased services since the person translating often has a stance or opinion; there are times when the translator even knows the aggressors and this could even result in the withdrawal of the allegation. This goes against the rights of the person suffering GBV, and even though we try to uphold this aspect as service providers, it is
unquestionable that the will of the GBV victim always prevails over that of the service provider (Del Pozo et al., 2014, #6, p. 92).

These three comments (emphasis added) offer a clear portrayal of the reality of treating victims of GBV. All three mention the lack of professional interpreters. Comment 1, for example, seems to indicate the nonexistence of the professional interpreter in these services (“I have never worked with professional interpreters,” “people that the victim chooses to bring,” “interest to help”), but may also suggest the possibility that the SP is unfamiliar with the profession of interpreting and what it means to be a professional interpreter. This is reflected in the respondent’s final statement where the SP says that the person who accompanies tries to help, but also that only “aspects that are purely instrumental” are discussed, as if interpreters were expected to provide something more ‘professional’. The final words in Comment 1, which bring up emotions, hint at the debate on the interpreter’s role as an “advocate” versus a “voice box” or conduit. It appears that this respondent may be more inclined towards the role of the interpreter as a collaborator and another member of the team.

In Comment 2, the phrase “people close to the victim” is emphasized, as is the mention of the “possible aggressor” as someone who accompanies the victim and interprets for her. The respondent implies that there are risks involved in using the aggressor as interpreter, such as the detriment to the principles of confidentiality and faithfulness to the original message. In this situation, reasonable doubts surface about whether the interpreter has rendered everything that is said or has omitted or added information out of self-interest. When the aggressor acts as the victim’s interpreter, the victim may also be denied of her right to speak, out of fear.

Comment 3 describes the way in which institutions tend to select individuals to aid with communication and points out that providers are aware that these individuals are not professional interpreters, in addition to being aware of the risks involved when a bilingual individual who interprets lacks the proper preparation, becomes emotionally involved, or “has a stance or an opinion.”

Comment 4 (below) explains the possible causes for the above; that is, “[t]he lack of means and protocols or specific programs,” which justifies the need to “use persons we know, other professionals or persons linked to the ethnic group and associations that provide voluntary services,”
clarifying that this is the case “at least insofar as attention provision in our service is concerned,” in reference to the resources that the organization provides. The last words (“…but our demands fall on deaf ears”), in reference to the SP’s request for help, indicates the magnitude of that which remains to be accomplished: there is certain awareness among SPs of the need to use professional interpreters; however, the same cannot be said at the administrative or political level.

COMMENT 4. The lack of means and protocols or specific programs on this subject makes it difficult to work with foreign women. Much of the time we have to use people we know: other professionals or persons linked to the ethnic group or associations that provide voluntary services (at least insofar as providing services for gender-based violence is concerned). At times, we have had to contact entities beyond the municipal level with competence in this subject matter to seek solutions to the interpreter problem, but our demands fall on deaf ears (Del Pozo et al., 2014, #78, p. 93).

Comment 5 clearly sums up the situation again from the perspective of SPs who treat this population:

COMMENT 5. I find it hard to gauge the number of victims that are seen every year because there are so many, with different ages and socio-cultural levels, and to a lesser extent foreign women, especially Arabic women. It was precisely for the latter community that I needed interpreters on several occasions but they were not paid; it was a personal favor. I do not think this is professional, but when faced with such a situation I have no option but to provide the attention needed to the victim (Del Pozo et al., 2014, #386, p. 99).

Differing opinions on the usefulness of interpreters can be observed in the opinions of other SPs (in this case, from the Red Cross), who express doubts about the need for interpreters if medical professionals themselves could provide the service. Their response to the question of whether they would recruit a qualified interpreter in cases of abuse was negative, based on their belief that “money [would be] lost by hiring an interpreter when the providers can manage the conversation” (Trigo 2014: 42). This attitude tends to be fairly common among SPs who have some knowledge of the patient’s language (usually English or French).

One former patient and collaborator at Red Cross—Emmanuel, who is from Nigeria—disagreed with the above view. When asked about the use of ad hoc interpreters (whether individuals with little knowledge of the
language or the service providers themselves), Emmanuel expressed great appreciation for sessions interpreted by someone with a full command of his language and someone who is a professional interpreter rather than an “amateur,” as he put it. When describing the differences he observes between the two, he emphasized speed and the considerably fewer occasions where professional interpreters needs to request clarification. He also added that professional interpreters do not interfere with communication; rather, they facilitate communication to the best of their ability, never deviating from this objective (Trigo 2014: 42).

3.2. Interpreter role(s) in GBV consultations

The second point that we would like to explore is the role(s) that interpreters should have, according to SPs. Examples from the previous section suggest that there is a certain flexibility or lack of consistency in terms of the interpreter’s role as either a mere transmitter of information or as a collaborator. More comments along the same lines follow:

COMMENT 6. In my job, there have been just a few times when an official interpreter was used (almost never). Women who come to the service are accompanied by persons who translate for them (Del Pozo et al., 2014, #310, p. 97).

In this case, the erroneous use of the terms “interpreter” and “translat[or]” as synonyms stands out, drawing attention to a common confusion outside the field, in addition to serving as a reminder of the fact that although the professions of interpreting and translation share some common factors, each requires different abilities. This type of confusion also leads to sometimes attributing roles to or demanding tasks from the interpreter that do not actually fall within her competences or her job description, such as translating treatment instructions, consent forms or other medical documents—all tasks that SPs often request of interpreters.

Another term that frequently comes up alongside those of translator and interpreter is that of mediator. Neither one nor the other are recognized figures while the terms are frequently used indistinctly by service providers, which raises confusion regarding the functions of all of these professional figures, who all may serve as culture brokers. As the group CRIT indicates:

Currently, there are two large players within the field that might be better referred to as "facilitating communication in public healthcare
services", CI [community interpreter] and IM [intercultural mediator]. Academic and professional training programs are designed with these different profiles in mind. Although, according to the opinion of some authors, with many overlapping boundaries. Note that the degree of difference in both figures is largely dependent on the sector of public healthcare services in which they work (Grupo CRIT 2012: 22) (My translation).

Comment 7 reflects this situation:

COMMENT 7. At my institution, we have never used “interpreters” as such but we have worked with in-house intercultural mediators. They greatly facilitate our work and offer intercultural support, which is essential for providing complete care to victims (Del Pozo et al., 2014, #365, p. 99).

This comment reiterates something expressed by a provider at another organization, indicating that ‘mediators’ do appear to serve as an existing resource.²

The following comment further evidences the widespread familiarity with the figure of the mediator and the mediator’s lack of awareness about the profession of interpreting.

COMMENT 8. I am the intercultural mediator in GBV cases and I have acted as interpreter in GBV cases. For that reason, I have turned to the Maresme Regional Council’s interpretation service on very few occasions—that is, whenever the victim does not speak any of the languages that I speak (Del Pozo et al., 2014, #410, p. 100).

From a perspective more closely tied to mediation and active interpreter participation, the CRIT group asserts:

The interpreter should render the message faithfully, clearly and concisely, and when necessary should be able to explain different cultural expressions in order to ensure complete understanding. She should also pay special attention to the patient’s non-verbal language and tone of voice when the patient speaks or answers questions; she should furthermore be aware of any nervousness, sadness, fear, etc. in the patient’s tone of voice or attitude; and should be alert to any observation of certain emotional states in the patient,

² For research about mediation in Spain see Giménez Romero 2007, Sales 2008, Grupo CRIT 2012.
such as hopelessness, embarrassment, guilt, etc. (Grupo CRIT 2012: 203) (my translation).

The following statement by Bancroft et al. (2013: 103) reinforces the above argument by Grupo CRIT:

(...) the idea that medical interpreters can, should, and sometimes must intervene to address communication barriers in order to prevent potential tragedies or injuries to the health, safety, and well-being of Limited English Proficiency patients or clients is deeply anchored in the culture of the profession.

The following comments call into question another important topic: gender. According to this respondent (Comment 9), there is a preference for providers who share the same sex as the victim; mainly, women, —a comment that was observed in more than one response.

COMMENT 9. I am unable to assess the knowledge of the interpreter because I do not speak these languages. I manage to communicate with victims in the languages I speak: English and French. Interpreters must be women (Del Pozo et al., 2014, #53, p. 93).

The explanation offered in Comment 11 is also of particular interest:

COMMENT 10. It is important for religious reasons that a woman from the Arab world (Morocco or Algeria) have a woman as an interpreter because male interpreters tend to be insensitive towards the victims in terms of understanding them and trying to convince them to withdraw the allegation (Del Pozo et al., 2014, #490, p. 101).

Comment 11 portrays a fairly common yet under-researched occurrence in the medical field: the use of children as interpreters (Jiménez Ivar & Blasco Mayor 2012; on Child Language Brokering see also Antonini). We have not found any literature on similar events in cases of GBV, but the response of the provider below suggests that it does sometimes occur in this context.

COMMENT 11: Since 2004, we have had a girl from Maghreb, who is now a full-grown adult today and who always accompanied women from her area and translated for them, trying to help and console them, not only in GBV cases but in the most unbelievable medical consultations at the
Carmen Valero-Garcés

Calatayud regional hospital. She was initially shy and ignorant about medical terminology but later became self-confident and now commands respect from all the health staff at our hospital. I would like to thank her through this survey for her invaluable work all these years (Del Pozo et al., 2014, #17, p. 91).

Again we see how someone unprepared “translated for [patients], trying to help and console them”—hence going beyond the limits of the interpreter’s profession, risking misunderstandings (“shy and ignorant about medical terminology”), and bringing up emotions (“commands respect from all the health staff at our hospital.”) Finally, the last sentence draws attention to the double-edged sword of having training but no experience, versus having experience but no training—the latter being the case of the interpreter in question, and something that many institutions tend to value over proper training.

As seen in the previous pages, the debate surrounding the action of this linking element is constant, as the SOS VICS survey showed. The general objective of the project was to determine the real communication situation between agents and GBV who do not speak Spanish or the other co-official languages in Spain, and any problems associated with interpreters during these meetings. From these results, the next step was to develop materials to train interpreters to work in GV setting (SOS VICS Training Website). One of the recommendations included in the conclusion is that the interpreter in the context of GBV should be a member of the team that treats victims of GBV. This would allow the interpreter to be an active collaborator by providing their knowledge—not only linguistic but also cultural knowledge, which could be useful in detecting cases of GBV. Thus, the interpreter would abandon the function of mere information transmission and would be able to alert the SP to aspects considered relevant for diagnosis and follow-up with the patient (Valero Garcés et al. 2014: 197).

3.3. Codes of ethics and the interpreter’s conduct

All professions have certain principles that must be observed. In discussing the ethical principles that guide interpreters, the manual resulting from research by the SOS-VICS group as one of the training material developed mentions that for interpreters working in the context

3 More information in: http://cuautla.uvigo.es/sos-vics/
of GBV, “the long-familiar principles of confidentiality, impartiality and faithfulness join hands with three principles from the field of health care: responsibility, leadership and teamwork.” (Valero Garcés et al. 2014: 230).

Nevertheless, Comment 12 demonstrates conduct that is hardly ethical on the part of institutions, which in these examples fail to uphold the minimum physical conditions for providing quality service: “[patients] are attended in corridors, floor landings, where the family members of the aggressor or the aggressor himself are present.” There is also a demonstrated lack of respect for the specific characteristics of a population not shared by the majority language and culture (“Religious, moral and cultural beliefs condition them quite a bit”).

COMMENT 12. Honestly, the victim often has no freedom to make her own decisions and feels conditioned or compelled. There are no offices or rooms where victims can be tended to as they deserve; they are attended in corridors or on floor landings, where the family members of the aggressor or the aggressor himself are present. Religious, moral and cultural beliefs condition them quite a bit. Interpreters do not always act as impartially as they should (Del Pozo et al., 2014, #381, p. 99).

Service providers also observe this lack of ethics among interpreters, as evidenced in Comment 13:

COMMENT 13. As far as I am aware, in my autonomous region there is no commitment by interpreters to keep confidentiality of the victim’s declarations at the police station. I think that this aspect is very important because there was a case where the interpreter knew the aggressor and informed him that his wife had filed a complaint. At the time, I sent a note to the Professional Code of Practice Commission of the Medical Association requesting them to refer this person to the D.G.A. and to take measures. I am unaware of whether any measures were taken; we have not heard of any measures (Del Pozo et al., 2014, #24, p. 92).

The final observation in Comment 13 (“At the time, I sent a note to the Professional Code of Practice Commission of the Medical Association…”) suggests that the service provider was aware of the gravity of the case, although, as mentioned previously, the same may not be true among decision-making authorities.

The interpreter’s role in the medical field is discussed in various codes of ethics or best practice guides, and the literature on the topic is also extensive (Cambridge 1999, Beltran Avery 2001, Davidson 2000: 390,

The comments of medical and social service professionals offer a glimpse into the variety of opinions in terms of what they expect from an interpreter in cases of GBV:

COMMENT 14: The interpreter should also try to respect and faithfully reproduce the doctor’s empathetic tone and transmit any signs of attention and understanding that he gives, at the same time that she transmits the information in an accessible and accurate manner, taking into consideration that there may be occasions where the victim possesses a low level of education or may not be familiar with the institutions and services at her disposal (Personal interview with a doctor on the Bioethical Committee of the Hospital Universitario Príncipe de Asturias in Alcalá, March 2014).

COMMENT 15. We would like to indicate that interpreters should never summarize or interpret what the victim says but that they should provide a true translation of the victim's message as best as they can (Del Pozo et al., 2014, #156, p. 95).

Another notable opinion comes from a manager in gender-based violence services, who is the head of immigration for the Gypsy Secretariat in Avilés and who also serves as a volunteer interpreter. When asked whether he believed that the fact that family members act as interpreters for their own mothers or acquaintances was worrying, he expressed that he found no problem with this and asserted that as long as the person could “translate well,” there should be no issue. When informed that this type of situation introduces certain risks, like the violation of codes of ethics, he did not find any reason for concern, given that he considers himself to be a “one who does not reveal confidences” and “a professional” and believed that other interpreters would be confidential as well. Emphasis was placed on the differences that may exist between interpreted sessions with professional and non-professional interpreters (in this case, a family member or acquaintance). The manager recognized the differences but still did not consider them to be a risk in interpreted sessions with female victims of GBV (Trigo 2014).
3.4. Interpreter training

Finally, we were interested in determining what preparation, skills or abilities institutional participants believed that professional interpreters in GBV should possess. The following comments (16, 17 and 18) coincide in three fundamental aspects, derived from the respondents’ experience in working with victims of GBV who do not speak the contact language: knowledge of the language, specific training on GBV, and professionalism (i.e., not taking sides or expressing one’s own opinion).

COMMENT 16. It is quite important that they have full command of the language they are translating, and equally important is the knowledge of the subject matter—namely, domestic violence—and above all that they are not prejudiced against the victim. (Del Pozo et al., 2014, #122, p. 95).

COMMENT 17. In our extensive experience (8 years) working with interpreters to provide attention to foreign victims of GBV with little or no knowledge of Spanish, we feel that the interpreters hired lacked professionalism and specific training in GBV, and it is fundamental that interpreters limit themselves to translating without interpreting the victims’ statements. Sensitivity and gender perspective in professionals that perform translation is important. (Del Pozo et al., 2014, #157, p. 95).

COMMENT 18. The collaboration of voluntary interpreters is very valuable in areas where the percentage of foreign women is high, and providing interpreters with training on working with victims of GBV would be a great step forward. (Del Pozo et al., 2014, #317, p. 97).

Returning to the recommendations from the SOS-VICS manual regarding GBV training for interpreters and the observation of the four basic principles from the code of ethics, our research helped to uncover providers’ opinions on the other three principles specific to the health care field: responsibility, leadership and teamwork. Two comments again illustrate the diversity of opinions in terms of seeing the interpreter as an integrated member of the interdisciplinary team that treats victims of GBV:

COMMENT 19. ...I would argue for having specialized medical staff on call along with specialized female interpreters (and payment could be on a case by case basis, for example) where emergency services could call to request this kind of attention in order to relieve some of the burden on emergency staff.
There must be an emphasis on the detection of unseen GBV. Thank you for the initiative. It is necessary. (Del Pozo et al., 2014, #20, p. 92).

COMMENT 20. I think that this is yet another step towards treating victims of GBV. But I think that this task must be performed by trained health personnel, especially in the case of emergency staff since an interpreter is not easily available nor can he/she act accordingly. Besides, the interpreter may hinder the work of the health staff and could have access to private medical records (Del Pozo et al., 2014, #52, p. 93).

Comment 19 advocates for cooperation with interpreters, whereas Comment 19 argues exactly the opposite. These conflicting attitudes demonstrate the long road ahead towards making progress in interpreting for victims of GBV. It is also worth noting that the latter comment contradicts recommendations made by SOS-VICS in its training manual:

“Interpreters and health care professionals must recognize one another’s responsibilities and roles and understand each other in order to work together towards the goal of achieving the best possible outcome for their patients. In order to form a good team, both parties should also demonstrate mutual respect, consideration and understanding” (Del Pozo Triviño & Toledano Buendía cited in Valero Garcés et al. 2014: 230).

4. Conclusions

In this study we have highlighted qualitative aspects of interactions between interpreters and service providers who treat female victims of gender-based violence when these victims do not share the majority language or culture. We have examined the specific nature of care for foreign women who are victims of gender-based violence and have used past studies from the FITISPos group, as well as recommendations and work carried out by the European SOS-VICS project.

We set out to gain a better understanding of service providers’ experiences with interpreters and their perceptions of the interpreter’s role(s), their level of awareness surrounding the importance of using professional interpreters, and their suggestions for the professionalization of the field of interpreting in the context of GBV. The topics discussed range from the experiences of medical and social service providers (SPs) in treating victims of GBV to the role(s) that SPs attribute to professional interpreters in cases of GBV, SP’s opinions regarding the ethical conduct
of interpreters in GBV, and suggestions from SPs on training professional interpreters in GBV.

The service providers’ opinions reflect the reality of the absence of professional interpreters in GBV and their differing opinions on the necessity of working with such professionals, especially when dealing with languages that SPs may be able to manage themselves if they use gestures and simplified language to aid communication (English or French). We also touched on the topic of intercultural mediators who assume the tasks of translating and interpreting. The most common solution in cases of GBV for foreign women is either using someone who accompanies the victim or finding another individual whom the service provider may know to volunteer as an interpreter.

As for perceptions of the interpreter’s role, varying opinions arose: some described a more participative role for interpreters, while others considered interpreters mere conduits. These observations go hand in hand with the fact that the interpreter working in the context of GBV is bound to face substantial ethical dilemmas that will oblige her to elect a position along the continuous line between impartiality and advocacy. It is in this way that while compliance with certain ethical principles is considered an important factor, it is nevertheless one that does not always receive sufficient attention, given that the foremost goal is to “understand” the victim of GBV.

In reference to the training suggested for interpreters, there is agreement that regardless of the stance that the interpreter takes, only those who are properly trained are capable of making a conscious decision about which role they should assume at each moment in the encounter. Ad hoc interpreters (who are untrained) will behave as any bilingual person would behave naturally and spontaneously. Hence, we lend particular importance to these three elements: knowledge of the language, training specific to GBV, and compliance with a code of ethics, in which impartiality (not taking sides) and confidentiality are the two most cited principles.

This study illustrates the long road that lies ahead towards achieving recognition of the professional interpreter as a key member of a multidisciplinary team—one who helps to guarantee the rights of foreign victims of gender-based violence and whose training allows her to manage the heavy emotional burden that comes with this context.
References


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Unseen forms of interpreting: 
Child language brokering in Italy

Rachele Antonini

Abstract

Whenever and wherever there is a lack of language services provided by professional interpreters and translators, non-professionals become the obvious and only alternative. Through schooling, the children of immigrant families learn the language of their new country of residence before their parents and thus are often asked to mediate both linguistically and culturally for their families and community members. The interpreting and translating activities they perform cover a very wide range of contexts and situations, yet no acknowledgement nor recognition is generally given to the huge cultural, economic and social contribution these children make. After a review of the state of the art in Child Language Brokering (CLB) research, this paper will provide a detailed description of the phenomenon in Italy and will then focus on the divergent perceptions that children and adults have on CLB. The discussion will be supported by data gathered with a multi-method approach, including a questionnaire survey, interviews and narratives.

1. Introduction

Child Language Brokering is an extremely widespread and equally submerged phenomenon that generally sees children from a variety of linguistic and ethnic backgrounds interpreting and translating for their families and members of their communities.

As a result of the ever-growing migration fluxes of people, the demand for linguistic and cultural mediators needed to facilitate access to educational, health, legal, and social services has grown exponentially in many countries and has contributed to shift the attention of research
towards this area of Interpreting Studies. Nevertheless, the provision of professional and trained interpreters and translators is not always guaranteed and, when there is a language barrier to overcome, owing also to financial or cultural reasons, immigrants and foreigners have to resort to the services of a non-professional linguistic mediator, a family member or a member of their linguistic community who is fluent in the language of the host country (Antonini 2011). Since children, through scholarization, tend to become proficient in a new language and to adapt to the new culture more quickly than their parents, they are very often asked to take on the role of the linguistic and cultural mediator. Child language brokering (CLB) thus defines interpreting and translation activities carried out by children who mediate linguistically and culturally in formal and informal contexts and domains between their family, friends and the members of the linguistic community they belong to and the institutions and society of the country where their families reside or have migrated to.

The term Child Language Brokering became established in the 1990s when scholars and research felt the need to find a term that could best capture the complex and multifaceted role played by children and adolescents who mediate linguistically for their parents (Shannon 1990; Tse 1995). Over the years, other terms (e.g. natural translation and interpreting) have been coined and used by scholars to define this phenomenon (Antonini 2015), however CLB is the term that is commonly used to define this practice.

2. The In MedIO PUER(I) project

The present chapter is based on the data collected within the In MedIO PUER(I) research project (the acronym stands for Linguistic and Cultural Intermediation by Young Users in Emilia Romagna (and Italy))\(^2\), which

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1 While CLB is mostly perceived and studied as a phenomenon involving children of immigrant groups and communities, it is a practice that is also performed by children who belong to specific minority language groups, such as children of deaf adults (CODAs) who have grown up learning and using a signed and a spoken language, and children who grow up in bilingual and multilingual communities (Antonini 2015).

2 Intermediazione Linguistica e Culturale ad Opera di Giovani Utenti in Emilia Romagna (e in Italia)
was devised to fill a gap in research on CLB in Italy and with four specific aims:

1. to confirm that CLB is extremely common among all the linguistic and ethnic communities that live in Emilia Romagna and, eventually, Italy at large;
2. to provide a detailed description of the participants, the situations and contexts in which CLB takes place;
3. to assess the impact that CLB has on various aspects of the life and development of language brokers, and on public institutions’ policies;
4. to gather data on children’s, parents’, teachers’ and institutional representatives’ attitudes towards CLB.

The collection of data was based on a multi-method approach that allowed the research group to observe and analyse the phenomenon from the widest perspective possible. For the purposes of this chapter, I will focus on a specific setting, healthcare provision, in which children are likely to interpret and translate for their families.

The following section will provide an overview of CLB research with specific reference to CLB in healthcare.

3. Literature review

Research on child language brokering (CLB) began in the 1970s with Harris (1973) and Harris and Sherwood (1978) seminal studies on natural translation (NT), before that any data or observation on CLB was simply a by-product, an accidental and marginal discovery within studies focussing on other research topics and areas.

Following its establishment in the 1970s, CLB became an object of study within many different disciplines that included, inter alia, bilingualism, educational studies, immigration, and psychology. It was only in the mid-1990s that research on CLB gained momentum and began to be researched by means of different methodological approaches, yet still remaining a peripheral topic in the specialized literature of many disciplines (most notably Translation and Interpreting studies).

Until the end of the 1990s research on CLB was carried out exclusively in the US and the UK and focussed predominantly on Latino and Asian communities with an academic production that was characterized by the fact that it was highly fragmented across many disciplines and which did
extend beyond contributions in specialized journals.

Morales and Hanson (2005), Hall and Guery (2010), and Orellana (Forthcoming) provide a detailed review of the CLB literature, which highlights how this phenomenon has been approached from a number of different angles, such as the impact of the mediating activity on the children's psychological development and on the educational, linguistic and cultural spheres. Other areas of research that emerge from their analysis of the literature focus on how children feel and perceive their language brokering activities. Studies that focussed on the emotional impact of CLB highlighted the fact that children very often experience mixed emotions which can make their role as language brokers a stressful and/or enjoyable experience. This emotional side of CLB is also influenced by the sensitive issues that are the object of such mediated interactions, which may occur in a wide range of settings ranging from administrative offices, to schools, banks, hospitals, etc.

The who, what, where and when of CLB have been thoroughly researched thus providing a very detailed picture of the contexts, situations, and domains in which children are required to interpret/translate and the people involved.

Less researched aspects of CLB include the shifting of family and, more specifically, parent-child dynamics that are a result of the increased responsibilities taken on by brokers within the family and of the fact that adults find themselves in a position in which they have to rely on their children to communicate and interact with the institutions and society of their new country of residence.

All these different aspects of CLB have been researched by resorting to a variety of traditional qualitative and quantitative methods used in the social sciences, which include, inter alia, questionnaires, narratives, journal entries, interviews, participant observation, simulations.

4. The provision of language mediation services in Italy

The provision of language services varies enormously across countries and is generally influenced by a variety of factors that determine whether a Government will take action by devising and implementing specific policies (Ozolins, 2010). Over the past few decades, some countries, like for instance Australia, Sweden, the US, and the UK, have been helping immigrants overcome their language and cultural barriers with “a range of
policies which can make life easier in this respect, for instance printed material produced in different languages, employing specific language speakers and so on” (Hall and Sham, 2007: 18). However, the implementation of such policies is the exception rather than the rule in many of those countries that have recently become the destination of growing influxes of immigration.

In Italy, local, regional and national authorities and institutions have not been able to deal effectively and efficiently with the ever growing request and need for language services for the new immigrant population (Antonini 2014). The measures and policies implemented are scarce and based on ad hoc solutions aimed at overcoming linguistic barriers when they occur and with no specific guidelines on how to deal with such barriers (Rudvin 2006). Funding for language mediation services is provided by the central and local governments (the Ministry of Immigration, the Regions, the Provinces and the Town Councils). Every year health authorities and centres, as well as other public offices, are allotted funding to cover the expenses linked to the issuing of contracts to professional linguistic and cultural mediators. However, since this funding is very often insufficient to cope with the demand for these services, professional mediators are usually given the task of translating information material (e.g. leaflets, brochures and notices) and are required to be present at specific times and situations. The obvious consequence of this insufficient provision of professional linguistic mediation services is that both users and institutions have to rely on non-professional interpreters and translators who, very often, happen to be children (Antonini 2014).

5. CLB in health care services

In Italy, the provision of language services in health care is based on ad hoc measures and random initiatives (Rudvin 2006). In the case of the province where we conducted the initial stages of our research project (Forlì-Cesena), the provision of language services includes pamphlets and handouts in different languages explaining how to access basic services, a phone interpreting service, and a professional mediation service offered by AUSL (local health authority). However, all these initiatives are not extended to all the health units and centres that operate on the territory. Moreover, the few existing services and resources offered to the foreign population are poorly advertised and thus unknown to both users and
operators (Cirillo and Torresi 2013). The demand for other language mediation services, for interpreting in particular, is met by resorting to ad-hoc measures applied to the communication problem when it arises. This means that family members, friends, untrained members of support staff, and strangers found in waiting rooms or in the street will be asked or offer to interpret with the increased risk, as Flores (2006) points out, of errors or misunderstandings and consequent adverse clinical outcomes.

The literature on non-professional interpreting (NPI) in health care services has developed along two main lines of research (Schouten et al. 2012):

1. the negative impact of NPI on communication and on practical and clinical outcomes in terms of interpreting errors, loss of information, the altering of linguistic and discursive features, and the negative effects on the quality of clinical care (Elderkin-Thomson et al. 2001; Flores et al. 2005).

2. the experience documented from the point of view of healthcare providers, particularly when children are involved as linguistic mediators (Cohen et al. 1999; Meyer et al. 2010). It also focuses on the experience of patients and their preferences when having to rely on professional vis-à-vis non-professional interpreters (Flores et al. 2015).

NPI/family interpreting in healthcare settings is generally seen as bad practice, something to be discouraged and condemned. Nonetheless, since many countries perceive language barriers as a transitional problem that is likely to decrease or disappear over time, the demand for language services is not met by an adequate provision of services aimed at facilitating the access of immigrants to healthcare services, and thus NPI is generally considered a necessary evil (Antonini 2015).

There are of course notable exceptions, such as the US where NPI in healthcare, and CLB in particular, have been strongly opposed with the implementation of propositions, guidelines and measures aimed at ensuring that these services are accessible to people who do not speak English by means of the services of professional and thus trained interpreters (Rice 2014).

Among the few advantages that have been identified in relation to family interpreting, within health provision services, is the fact that family members may be able to provide information and participate in the interaction in ways that other interpreters cannot, thus helping patients understand specialized or technical information, or by providing second opinions or additional information. They may also shorten the
communicative exchange by interacting directly with the medical staff. This active participation can also impact on the interaction by leading to subtle or open interventions in decision-making and knowledge transfer.

CLB in healthcare settings is an understudied topic. The few studies focusing exclusively on CLB in healthcare so far have dealt with the cognitive, psychological, relational and sociological impact of CLB on children and their families. Only a few studies have taken into account the other party involved in child-mediated events, i.e. institutions (healthcare authorities and providers). In those cases where institutions are mentioned, they are usually equated with the contextual variable of setting (Cirillo and Torresi, 2013) with no reference to the attitudes towards and perceptions of CLB shared by health care workers and operators. Research has demonstrated that children are likely to experience a varying degree and level of stress and positive and/or negative feelings attached to their role as language brokers in different domains (Hall and Guéry 2010). The main drawbacks associated with using children as interpreters and translators in the health care setting are that (a) children may not translate information in an accurate way, (b) that translating legal and medical information may have a negative effect on the parent-child relationship, and (c) that the child may be traumatized by the delivery of information about a serious medical condition concerning the child or a person s/he loves (Cirillo and Torresi 2013). As the analysis of the data used for the purposes of this paper will illustrate, translating and interpreting in contexts and situations pertaining to the provision of health care (as opposed to the other settings described) is the activity that is more likely to put the child in a position in which s/he might experience negative feelings such as anxiety, confusion, and fear and describe their role as mediators as burdensome.

The following section will provide and overview of the objectives of the In MedIO PUER(I) project and will describe the methodology used to collect the narratives contributed by children and the interviews with the GPs, which contain their description of their language brokering experience.

6. Method

The analysis presented in this paper compares data collected with a qualitative approach and two different data collection methods, namely
semi-structured interviews carried out with adults and visual and written narratives provided by children. The interviews were carried out with nine general practitioners and one nurse practising at an emergency ward. All of them are based in the Forlì area and work for the public healthcare system. The interview protocol used with the nine GPs who agreed to take part in our research project aimed at ascertaining the informants’ awareness of and opinion on four main areas: 1. The existence of guidelines/resources for healthcare provider-immigrant patient interaction; 2. The contribution made by CLB to healthcare provider – non-Italian speaking patient interaction (and delivery of healthcare in general); 3. The situations and contexts in which should CLB be excluded; 4. Health care providers’ perceptions of CLB.

The 200 narratives collected by means of two editions of a school competition were submitted by children and adolescents attending seven primary schools and four middle schools in the Forlì-Cesena province. The children either submitted an essay or a drawing describing their own experience as a language broker or a language brokering event they had witnessed. A jury then selected the visual and written narratives that were deemed to be the best description on CLB events. The winners received their prize (i.e. vouchers for school material for both the children who had won and their schools) and a plaque engraved with Traduttore ad Honorem at an official ceremony officiated by the mayor of the town of Forlì at the presence of many local authorities and the local press, and their class mates and teachers.

In the following sections I will compare and discuss excerpts from the interviews and from the narratives focussing specifically on how both GPs and children perceive the role played by language brokers with the aim of showing how these perceptions diverge.

7. Analysis of the data: GPs perceptions of CLB

This section will provide an analysis of the answers given by GPs to the four main questions and will discuss in detail their perception of the children’s performance as language brokers.

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3 In the south east of the Emilia-Romagna region.
4 See Antonini (Forthcoming) for a more detailed description of the InMedIOPUER(I) project and the school competition.
The answers given to the first question show that not all the GPs that were interviewed are aware of the existence of support material created by the local health unit and aimed at facilitating healthcare provider-immigrant patient interaction (example 1 below):

Example 1

Interviewer: Are you aware of the existence of guidelines/resources for healthcare provider-immigrant patient interaction?

“no” (R8, R9)

“I’ve been complaining for years… there’s nothing… we’re left to ourselves” (R2)

“brokers are called when there are major problems… but… as far as I know… they’re not available at night” (R3)

“we have a phone number we can call to request a cultural broker (…) but we work in real time. (…) If patients come now then I need to solve their problems now” (R4)

“there isn’t a standardized approach. (…) The local health unit some time ago sent us a brochure in a whole lot of languages, like Chinese, there were sentences like ‘Where does it hurt?’ and all the rest, one might point out to the sentence with his finger to try and understand what the patient’s problem was” (R7)

The excerpts in example 1 show that not all GPs are aware of the existence of (all) the resources that are available to them, and even when they know about them they do not find them helpful since no planning goes into scheduling appointments with patients who do not speak Italian.

When asked to provide their insight on how CLB contributes to facilitate communication between themselves and non-Italian speaking patients all the informants described this form of language mediation as a necessary evil whereby “the presence of the child is necessary, otherwise communication would not take place, even like when you have to take a

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5 The excerpts and examples from the interviews with the GPs and the narratives submitted by the children are presented in the English translation provided by myself.
medicine…” (R1) or when the practitioner needs to impart simple commands such as “sit down, pull up your shirt, breathe through your mouth…” (R2). The presence of a child who can interpret certainly contributes to making “our task easier… if you have a cold or a sore throat your child can easily help you solve the problem” (R2) and to “communicate and solve problems without wasting time” (R5). Moreover, as one of the informants observed, the children “provide a free service… they are no additional cost for the health system, which is already under pressure” (R1).

The GPs also indicated a few pros and cons linked to relying on children to mediate. The main advantages are represented by the fact that “children are more direct, more sincere usually” (R6), that they are “more involved in the context in which they live” (R7), and that they “repeat exactly what you say and ask and report exactly what they are told. Whereas it happened that adults made comments. There was a different atmosphere, perhaps a biased or mistrustful one, this doesn’t happen with children” (R8).

Among the disadvantages described by the informants, the most relevant is that having a child translate the interaction is a waste of time, as one doctor states: “I have to listen and then my answer, too, gets translated, so there’s a whole procedure that takes twice as long [as a normal interview] and then I wonder ‘Has he said exactly what I said? Has he understood?’. All right, then you can sort of guess from the mother’s or father’s expression, but… I don’t see any real advantages in all this” (R9).

When asked about situations in which CLB should be excluded, the informants provided a range of topics and health problems to which language brokers should not be exposed let alone translate (although it is not clear from their responses whether in fact they had children interpret sensitive topics or had opted for an alternative solution) ranging from “more private questions” (R1), “gynaecological problems” (R2), “sexually transmitted diseases” (R4), “birth control” (R7), or “serious diseases” (R5, R8, R10). Some of the GPs reported that when any of these issues arise, then they may ask the patient to have someone else (generally an adult family member) interpret for them.

The fourth main question was aimed at ascertaining health care providers’ perception of language brokers. The excerpts in example 2 contain the more recurrent terms used by the GPs to describe how they perceive these children in their role as language brokers.
Example 2

“They are very much into their role [as mediators] and extremely precise, they are not easily intimidated… precise, I’d say” (R1).

“These children have to grow up fast. (...) They might feel embarrassed by the fact that their parents do not speak the language” (R4).

“He is more easy-going, more open, very intelligent” (R2).

“Yes, for them it’s natural, it’s like breathing” (R5).

“I must say that the children are quite good at it. They are able to immediately grasp the problem and ask the right questions. They are exceptional interpreters. They are always willing to help. You can see that they feel important. It is a positive experience for them” (R3).

“They are very much into it. They act all grown-up, you can see how much they are into it” (R4).

“They are natural” (R8).

“They seem to be stress-free. I have always thought that they looked at ease. Also because I thank them, I mean I let them know that the role they are playing is very important” (R9).

With only one exception, all the GPs describe them only in positive terms with no reference whatsoever to any discomfort or uneasiness that the children may feel when interpreting and translating for their parents or family members (and sometimes friends or people they may not know very well) at the doctor’s.

8. Children’s perception of CLB: Narrative data

The narratives submitted for the school contest contain a huge variety of situations and contexts in which children are required to mediate linguistically for their family. Within the health sector, they report that they have interpreted/translated diagnoses, prescriptions, medicines, instructions, leaflets, verbal interactions (i.e. conversations and consultations) for their family and community members and GPs, on the
phone with emergency operators, with paramedics, and at the hospital (ER, obstetric and gynaecology wards).

The drawing in Figure 1 above illustrates well the variety of contexts and situations in which immigrant children are involved in language brokering activities: at school in pizzerias, at the butcher’s, at the baker’s, at the bank, chemist’s, supermarket and at the hospital.

The caption at the bottom (“We are all the same if we look at ourselves in the mirror of our heart”), as well as the smiling faces and bright colours indicate that this child’s feelings and attitudes towards CLB are still very positive and optimistic. The analysis of all the narratives collected by means of the school contest reveal that children/adolescents tend to express positive feelings when they describe their language brokering activities in specific domains/situations and contexts: informal as well as formal (e.g. helping school mates, in shops, etc.). However, as the following excerpts will show (examples 3 to 6), these feelings, and thus the impact that language brokering has on an emotional level, as well as the
children’s perception of the responsibilities they have to take on, change drastically when situated within the context of healthcare provision.

Example 3

At home I help my mother and my grandmother, in fact I go to the hospital with my granny and I talk to the doctor while she is really scared. Once the doctor told me that my grandmother was very ill and that she had to take important medicines: he started saying all these difficult words and I got very confused, I was really worried about my grandmother’s health.

Example 4

I have sometimes helped my mother at the doctor’s, but when I talk to him I am afraid of getting things wrong, so I listen, I listen in silence until my head aches because I am concentrating so much. When I tell my mother what he said, she always asks me the same question because she is not sure that I have understood correctly. But I do understand, it’s just that I can’t really find the words in Italian.

Example 5

One day [my mother and I] went to the doctor’s because she wasn’t feeling well. When we arrived at the surgery I was experiencing very strong feelings, I felt anxious and worried. We took a seat and waited for our turn. […] When it was our turn we went into the doctor’s office and he asked us what was the matter. Looking for the right words to explain the situation, I told him that my mother was not feeling well. In front of the doctor I felt uneasy, inadequate and I was afraid I would not make myself clear. When the doctor talked, she [my mother] wanted to know everything he was saying word for word, without missing a syllable, she didn’t even leave me time to think, she was curious and worried at the same time.

Example 6

When she was pregnant: we would go to the doctor’s 2 or 3 times a week, the doctor would talk to me, when my mother said something I would translate it for the doctor. Now that my brother is born we go to his paediatrician […]. I translate what the paediatrician says to her. I tried to teach her Italian, I hoped I would succeed but… I failed. She did not want to learn and kept watching her films: she didn’t care.
As the examples above show, the language brokering described by children in the context of a medical consultation do not fall under the rubric of either enjoyable or stress-free experience. Contrary to the GPs’ perception of how children experience their role as language brokers, describing them as natural, self-assured and stress-free, the narratives depict a completely different picture and the adjectives used to describe their experience are antonymous to the ones employed by the GPs. The children report feeling afraid, anxious, confused, inadequate, uneasy and worried. One of the main causes of such discomfort can be attributed primarily to the fact that these children are directly involved in a situation in which the health state of a loved one (one of their parents or a close member of their family) is discussed (as in all the examples below). Another cause of distress is represented by the terminology that is likely to be employed in a medical consultation (example 3 and 4) and which children may not understand and be able to translate (with the awareness of the fact that a mistranslation may have a negative impact on their loved ones’ health). Examples 5 and 6 not only describe how the children feel when language brokering, they also hint at another issue that has been raised and discussed in the relevant literature, that is child-parent and family dynamics. Although in many cases parents do not have a choice and need to rely on their children in order to be able to communicate and interact with representatives of the institutions of their new country of residence, they are not always at ease with the outcome of their children’s translation. In example 6, moreover the last three lines are indicative of two other aspects related to CLB: the desire shared by many language brokers that their parents learn Italian in order to become (linguistically) more autonomous, and the fact that CLB is an extremely complex phenomenon that is not merely limited to transferring information from one language into another.

9. Conclusions

The samples on which this study is based are in no way representative of the two populations they represent, hence the comparison of the opinions expressed by the two sets of informants has the obvious limitation of being based on data gathered by means of two different methodological tools (i.e. interviews and narratives). However, the analysis of the transcripts of the interviews with the family doctors and of the narratives
written by the children showed that there are striking differences in terms of how adults perceive the emotional impact of CLB on the child interpreters and the feelings the children describe in relation to their brokering activities in health care settings. Yet, given the scarce resources available to health care operators (or the lack of knowledge of those that are available to them) and the fact that the need for a language mediator is often impromptu and thus not always possible to plan, children will continue to be used to provide access to a variety of health care services for their families and communities.

One of the main aims of the In MedIO PUER(I) project, then, is to contribute to raising awareness of CLB as an unacknowledged and growing practice in various institutional settings and on the inadequacy of resources made available to Italian public healthcare operators.

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The multifaceted nature of language mediation and interpreting.
A personal case of disempowerment

Cinzia Spinzi

Abstract

This work aims at examining the similarities and differences between Community/Public Service Interpreter and Cultural- and Language Mediator. A personal case will be illustrated to show that delicate and complex interface of private-public-institutional-social discourse forms and discourse roles that are played out in the process of language mediation.

1. Introduction

Due to the growing interest in Interpreting Studies (see Jourdenais and Mikkelson 2015), this contribution looks at some of the many different and complex facets of the interpreting profession and how it relates to the broader area of ‘culture/language mediation’. Roughly speaking, by ‘language mediation’ we simply mean the process of transmitting meaning from one language to another and from the structural and communicative framework (“culture”) of that language to the other. (We will return later to the distinction cultural vs. language mediation. For a definition of intercultural mediation in the context of translation see Katan 2013). To emphasize rather than downplay the complex nature of language mediation and (community) interpreting, and the difficulty in establishing clear-cut borders between the two, especially in the Italian context, we will use systematically the syntagm ‘Language Mediation-Interpreting’ unless
we wish to specifically denote one of these two domains of inter-linguistic transfer.

The aim of this contribution is to bring together some of the variegated, and at times conflicting, aspects of cultural and language mediation, and as such bring to the fore one of the main paradoxes of the act of mediation: if mediation implies the bringing together and – ideally – resolution of two or more conflicting opinions, ideas or stances, does ‘culture-’ and ‘language mediation’ necessarily imply an underlying conflict and the attempt to resolve that conflict? If so, does the conflict exist simply by virtue of two different languages and/or cultures coming into contact? This underlying assumption, it has been argued (Rudvin and Spinzi 2014), is debatable in that a meeting of cultures and the intrinsic intercultural encounter that it entails, should not necessarily be regarded as an inherent conflict or be seen through such a negative filter. The paper will illustrate the complexity of the process of language mediation/interpreting by describing a personal intercultural mediation-interpreting event the author experienced this summer in Hungary.

2. The thorny question of terminology.

If we choose to classify interpreting and other translation activities under the umbrella term – or macro-category – of ‘language mediation’, especially as it pertains to the Italian situation, then we will need to untangle some of the overlapping semantic and conceptual areas. The inherent problems in classifying the domain of language mediation start with the confusion around the terminology to use to frame its functions and contents. Not only is the term used inconsistently in the international literature and different countries around the world, but the ensuing functions and the roles do not have clear-cut boundaries. As argued in Rudvin-Spinzi 2014, the problem is partly a semantic/translational one, partly a conceptual one, and partly related to different socio-demographic local traditions. To (over)simplify the issue, we could say that whilst in Italy ‘cultural- and language mediation’ arose as a political and practical response to the increase in migration in the 1980’s and the need to create a bridge (for purposes of social integration as well as communication) between the incoming migrant communities and the host country, in many Anglo-Saxon traditions the response to communication needs raised by migration from non-English speaking countries (earlier than the major
Italian immigration flows) was that of providing professionals who could bridge the language barrier (see Pöchhacker 2008, Rudvin-Tomassini 2008 and Rudvin 2002). Thus, the Anglo-Saxon tradition favoured both semantically and conceptually the more practical solution of solving what was essentially a language problem, whilst the Italian (and more widely Mediterranean) tradition embedded this in a more global integration-based approach where language was seen as only one (and often not the primary) factor.

This ‘holistic’ approach in the Mediterranean basin is borne out by the significant involvement of the voluntary sectors (also those related to the Italian Catholic Church\(^1\) as active participants in this domain), whilst in Australia, Canada, the UK, the USA and many northern European countries contact has been prevalently between migrant communities and representative of public institutions with the specific and practical aim of solving language barriers that acted as a deterrent to access to basic public services. These two terminological ‘strands’ have only recently begun to come into contact as Italian scholars have become more involved in Translation and Interpreting Studies and have begun to contribute increasingly to the literature (as we see in this volume of Cultus), thus bringing in the overlapping but different category of ‘language mediation’ and creating – often unknowingly – an ill-fitting overlap between the two (interpreting and ‘cultural/ language mediation). Another development that has brought together these two domains is the increasing cultural nature of all communicative interpreter-mediated situations, part and parcel of the ‘cultural turn’ and constructivist paradigm shift in Translation Studies and, Interpreting Studies and the humanities more generally, as witnessed by the headword “intercultural mediation”\(^2\) (Katan 2013) in the Handbook of Translation Studies. So, the foregrounding of culture (rather than interpreting as a more mechanical translational activity) in the literature has been concomitant with an increased presence of the notion of mediation, in part due to contributions from Italian, Spanish and French scholars.

That is not to say that there is no terminological confusion in the English-language literature, but it is probably more related to the intrinsic,\(^1\) The Caritas Dossier series is an excellent source of information on the involvement of this religious organization in migration-related issues. http://www.dossierimmigrazione.it/埔ro.php?cid=47_100&pid=180
\(^2\) “A form of translatorial intervention which takes account of the impact of cultural distance when translating or interpreting” (Katan, 2013: 84).
complex translational nature of interpreting in domains that pertain to institutional dialogic encounters, above and beyond conference interpreting and to the specific institutional features and constraints of each of these (for example ‘community interpreting’ vs ‘court interpreting’). While Sandra Hale’s book ‘Community Interpreting (2007) has in part consolidated this term, representing an Anglo-Saxon Australian tradition, Anne Corsellis’ book published a year later with the same publisher chose ‘Public Service Interpreting’.

Many scholars, including Sandra Hale (2015), prefer to designate specifically the area of application (medical interpreting, legal interpreting, court interpreting, educational interpreting, etc.). In the German-Austrian tradition the practice of ‘mediation’ used synonymously as an interpreting activity, is frowned upon. In Germany, Austria, Belgium, the Netherlands and the UK functions and mandate of the culture-broker/ cultural mediator are regarded as being quite distinct from that of the interpreter operating in the domain of community-related migration and public institutions.

2.1 The case of Italy

A closely related problem that adds even further to the confusion is the inconsistent use of “Cultural and Language Mediation” as an academic discipline, profession and discourse practice in the Mediterranean regions, especially Italy (as illustrated in more detail in Rudvin and Spinzi 2014). In Italy, due to its academic and socio-political tradition referred to above, the term ‘Language Mediation’ represents a broader spectrum of discourse activities than ‘community interpreting’ (see Russo and Mack 2005, Viezzi and Falbo 2014). As mentioned, the term mediation is closely tied to the specificities of Italian migration and the ideology and politics in which migration policies are embedded (see also Rudvin and Tomassini 2008). The profession has developed alongside the need to facilitate access to services and institutions for minority language speakers. ‘Language Mediation’ in the Italian context is far more closely tied to local and national migrant-related policies and services, to public institutions and to

3 Others focus on its methodological nature – ‘dialogue interpreting’ or ‘face-to-face interpreting’.
4 https://www.google.it/search?q=comparative+study+on+language+and+cultural+mediation&ie=utf-8&oe=utf-8&gws_rd=cr&ei=4q-gVuXhYOWsAHZ2aPYBw
the world of private voluntary organizations (i.e. the need to ‘connect’ or ‘mediate between’ migrant groups and the host country). It is also tied to the notion of ‘mediation’ (albeit in a rather confused and overly-generalized fashion) which on the one hand is positive in that it opens up the field to other discourse activities, but on the other hand can easily be confused with mediation in a narrower sense of the word, such as conflict resolution in legal mediation or diplomatic mediation, for example.

The other problem (as described in Rudvin and Spinzi 2014, but see also Russo and Mack 2005) is that in Italy the two ‘worlds’ of language mediation in its ‘academic’ guise and in its ‘services-profession’ guise have little contact, leading to a situation in which students are trained at universities as ‘language mediators’ or even as ‘intercultural language mediators’ – having studied translation and interpreting but are not trained to work in immigrant-related settings or with any of the languages of the main migration communities. At the same time, all over Italy, people, often of foreign origin or ‘second-generation migrants’ are working as language- and cultural mediators in hospitals, schools, legal institutions, trade unions, immigrant services, job-centres, and so on without having any training in translation-related subjects.

This confusion is compounded by the nature of interpreting in community- and public service settings, most typically health-, welfare-, educational, local government and legal domains. As Hale (2007) maintains, many of these domains are connected with the most intimate and private, but also every-day, domains of people’s lives – health, justice, employment, schooling, access to welfare services and benefits. I would argue that compared to conference interpreting (and certainly translation), these domains are marked by precisely that lack of predictability, orderliness and unilateral language domains that characterize conference interpreting and often translation (see also Rudvin-Tomassini 2008 and Merlini this volume). Face-to-face interpreting is by definition conversational (dialogic) and thus to a large extent unpredictable, hybrid in form mixing technical jargon and register with the colloquial, even in its most ritualized forms (as in the courtroom).

3. “Help! What is the interpreter saying to them?”

I would like to share with the readers a personal experience, inter-linguistic and highly intercultural, that I experienced this summer, and
which is characterized precisely by that interface of private-public-institutional-social discourse forms and discourse roles that are played out in language mediation.

My husband and I went to Hungary last summer, for forty-five days, to adopt two 6-year old twins and bring them back to Italy. Neither my husband nor I speak Hungarian, and for most communicative purposes and for all bureaucratic-legal purposes, we were dependant on an interpreter. The Embassy provided us with a Hungarian interpreter who spoke Italian well. As she told us, she had specialized in this area in that she worked primarily for the Embassy to liaise with adoptive parents from Italy. The interpreter was far from being incompetent; she had a degree in modern languages (Italian) and subsequently worked for many years as an interpreter. She also ran a translation/interpreting agency and was responsible for the recruitment of translators and interpreters. As such, she represented a method of language mediation/interpreting that for her was perfectly ‘normal’. Furthermore, as is often the case in the social, educational, diplomatic, business and sometimes medical settings, Hungarian interpreters who work in the area of adoption do not just interpret or translate written documents, but are required to fulfil a number of tasks that are not specifically related to (oral or written) translation; indeed, this is very similar to what we in Italy call a ‘cultural-language mediator’.

My husband and I depended completely on the interpreter, and quickly realized that the success of the adoption depended on our communication with her. We felt profoundly disempowered and impotent. During the six weeks we had little idea what was happening around us. We only knew how far ahead we were in the adoption process, since we had been given that information by our Italian agency. It was the mediator-interpreter who was in total control of the information we were receiving, and as such had a powerful gate-keeping role that encompassed far more than overcoming a language barrier. Indeed, every time we asked for feedback on what was going on, her response was invariably to say ‘don’t worry, I’ll take care of it’ or ‘don’t worry, I know what I’m doing’, further disempowering us and strengthening her exclusive allegiance with bureaucracy. She thus further excluded us from engaging with or even having access to the adoption agency and the bureaucratic bodies supporting it.

Crucially, we were unable to assess whether or not the interpreter was actually interpreting what we were saying to the Embassy officials or to
the other interlocutors, and vice versa. When we were able to see the children and bring them to the flat we had rented, we began to realize that the interpreter was not following any of the numerous well-known standardized codes of interpreting ethics (such as the Ausit or FIT standards, the legal interpreting codes such as Najit or Eulita, or the NCHIC code for the health services), but rather was functioning as a fully-fledged gatekeeper by censoring as well as freely adding both to our words and to the children’s words. After a while, it became clear to us (indeed she stated very clearly that this was her objective) that the main criteria that she was applying in this gate-keeping function was that of ‘protecting’ the two boys, driven by a sense of empathy and reluctance to cause displeasure or disappointment.

The interpreter informed us that she and other colleagues working in this area had no specific interpreter training, but had studied foreign languages – in this case Italian – and learned interpreting ‘on the job’. Professionals who are trained to work with vulnerable groups are generally trained not only to interact with their interlocutors, but are taught self-preservation strategies of distancing to prevent emotional burn-out. Interpreters, however, are rarely given this opportunity during training, and certainly interpreters who have not received any interpreter training (and certainly no psychological training or support) have to develop these strategies by themselves. Needless to say, not all interpreters are able to do this, also because such strategies are less intuitive and less accessible to self-learning than are translation or memory skills (see Katan 2013). With regard to translation itself, a self-trained interpreter may not fully appreciate the importance of linguistic or pragmatic accuracy. In our particular case, the interpreter/mediator’s decision to not faithfully translate anything that she felt would disappoint the children was – she told us – driven by empathy. According to the parameters of mainstream interpreting ethics, she overplayed her own role and gate-keeping ability, and was unaware of (or uncaring of) any damage that she might be causing to her other clients.

Among the many examples of this we will mention just a few: when the twins asked if there were bicycles waiting for them in their new home in Italy she replied in the affirmative, even though we had explained that unfortunately that was not the case; when the children asked if we could all go to the swimming-pool, she also replied affirmatively even though we had explained that it would be difficult. When we were in the court with the judge, she didn’t translate what the judge said. She limited herself to
mentioning the object of the meeting adding that it was useless to translate everything because it was mere bureaucracy. Practically speaking, empowered as she was, both linguistically and culturally, the interpreter functioned as a primary agent and gate-keeper in all contexts, yet was wholly untrained for any type family or intercultural mediation.

When we asked the interpreter for clarification, outside the mediated moments but also during them, she told us to be patient because she could do her job very well. Furthermore, she added that her ‘lack of accuracy’ was not so much a lack of competence or awareness of interpreting norms, but basically an unwillingness to disappoint the boys because she genuinely cared for them. However, in these intensely human cases, the messenger often becomes fully associated with the message. Where children and adults are concerned the empathy is especially towards the ostensibly more vulnerable children, and so our ‘mediator’ had become an *a priori* advocate for the children. As such, she could not be identified as the person who was not providing whatever it was the children had asked for. The mediator represented a link between the three parties (the adoptive parents, the children, the social services/Embassy). It seemed as if she was trying to prevent time-consuming negotiations, misunderstandings and costly multiple treatment (she was paid a fixed rate regardless of the actual time spent), but her role was far from transparent.

A number of issues that are typical of delicate and ‘messy’ interpreting situations in which human emotions and affect are prominent emerge from these examples: the interpreter being associated with the message in that she is seen as the invisible mouthpiece of the speaker; an unwillingness to disclose bad news and be the cause of disappointment; an “I know what’s best for everyone” attitude, and fourthly, a strong alignment with her co-nationals and in particular with the vulnerable interlocutors, the children.

### 4. The dynamics of the profession

What we want to highlight here are some of the unique characteristics of ‘mediated interpreting’. A good example is Hertog’s vivid description, in this volume, of the deeply emotional as well as anthropological and

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5 This fits in well with one of Leanza’s interpreter categories, or ‘types’, namely the “system agent” (Leanza, 2007: 29).
political factors involved in interpreting in situations of conflict (war). Face-to-face interpreting, dialogue interpreting, community interpreting, language mediation, whatever we choose to call this practice is so deeply marked by ‘human’ factors of affect as well as by interactional and interpersonal conversational dynamics, that the problem of standardization becomes highly problematic. There are a number of reasons for this. Firstly, the interactional and interpersonal dynamics of conversation do not lend themselves easily to a cut-and-dried ‘conduit’ strategy. Secondly, each area where this form and method of interpreting is carried out, has its own needs and criteria; and the specific dynamics may impinge quite significantly on the interpreting act. Thirdly, the asymmetry that exists between the various professions that come into contact (the medical profession, the legal profession, education, local government, etc.) leads to a situation in which the ethics of the host authority will be more empowered, established and with a far higher prestige, thus taking precedence over the emerging profession (in Italy at least). Codes of conduct that can be (reasonably) easily applied to medical interpreting and more easily applied to court interpreting, are not necessarily applicable to extreme situations such as warfare, or when interpreting for victims of torture or trauma, nor can they be applied – at least not easily – to the type of situation described in the case study in Hungary.

5. The intercultural aspect

As Erik Hertog interviewed by Mette Rudvin (this issue) reminds us, however, ‘culture’ is not just ‘national’ or ‘ethnic’ culture in the traditional sense of the word, but also any form of organization of norms and tradition that refer to a specific group. This might be ‘organizational culture’ as Hertog mentions, but it could also be corporate culture, institutional or professional culture – one of the many forms through which human beings organize and structure their lives in groups in the private and public sphere.

5.1 (In)accuracy in rendition

Accuracy of course, is largely dependent on the purpose and type of translation. Furthermore, as Hale cogently points out (2007), one of the
differences between conference and court interpreting with regard to the accuracy issue is the presence of extra-linguistic features: if they may be deleted in conference interpreting in order to improve the delivery of the speaker, they are crucial in court interpreting because the propositional accuracy counts as much as the way speech is delivered. This does not imply a literal translation of the original but – Hale says – a pragmatic reconstruction of the source text. When we speak of pragmatics, the deep connection between language and culture comes in to play. More particularly, the pragmatic aspects which have to be taken into account by interpreters are the ‘socio-pragmatic differences’, namely the cross-cultural differences between languages. In other words, as Liddicoat puts it (referring to Katan 2004), those ‘implicitly stated messages’ which disturb communication.

One of the differences between community- and conference or court interpreting also lies in the extra-linguistic and contextual factors that impinge on the discourse situation. Another way of putting this is that what we might call ‘inner’ and ‘outer contextual parameters may vary much more. By ‘outer’ contextual parameters we mean the physical features of the setting and the discourse act such as the acoustics and layout of the room but also the turn-taking and discoursal strategies. By ‘inner’ contextual parameters we mean the values and ideas as perceived cognitively and emotionally by the speakers that profoundly affect their communication – both in form and content.

In such highly delicate professional situations, situations where both affect and power play a crucial role, it is difficult for translators and interpreters to know where to draw the boundaries, how to maintain the interests of each of the parties as well as knowing how to honour the professional code of ethics. Although Hale and Liddicoat warn against ‘slipping into’ roles of mediation, gate-keeping and advocacy – and we would on the whole agree with this warning – the boundaries no doubt become more difficult to uphold the higher the stakes are (as in war), but also where affect is involved (as in interpreting for vulnerable groups such as children). We would also add that, unlike gate-keeping and advocacy, mediation belongs to a different category of meaning and activity because it implies a social activity in the sense that the ‘community interpreter’ is an empowering function, rather than a disempowering function; it gives the non-English (or whatever other majority language) the chance to understand the cultural system they are living in such as the legal, the health or educational aspects. This human dimension distinguishes an
interpreter from a translation machine. This is the second part of the definition of cultural mediation given by Katan (2013: 84).

The link between community Interpreting and Interpreting/Translation Studies has led to a conflict of sorts in the literature, where the standards and norms of the latter have been, in a sense, forced upon the former. As argued in Rudvin and Spinzi (2014), interpreting in the community is by definition one link in a broader chain of discourse- and social acts and activities (see also Merlini in this issue). This broader context must be taken into account both in terms of its concrete discourse parameters and broader socio-political parameters.

This is one of the reasons for the confusion in the international literature and it is exacerbated greatly where we find a semantic and conceptual (partial) overlap between Community/ Public Service Interpreting. Ideally, the two professional roles – mediator and interpreter – should be clearly delineated and differentiated.

6. Concluding remarks

At the end of this personal case study, which we have framed in a brief examination of the similarities and differences between Community/Public Service Interpreter and Cultural- and Language Mediator, we would like to conclude with the questions we are left with: should a stricter job description be applied to interpreters working in the community, or is the opposite true, that the job description should be loosened, more in line with the Italian Language and Cultural mediator continuum? If so, to what degree does their role interact with that of the primary service interlocutors? How do you allocate the respective responsibilities and draw the line between the decisions taken by the interpreter/mediator? As Sandra Hale warns, handing over the decision-making power and responsibility on issues of content to interpreters and mediators, is a slippery path. And discarding the whole notion of equivalence and correspondence would be unwise.

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Interpreting for Justice

*Erik Hertog interviewed by Mette Rudvin*

In this interview Emeritus Professor Erik Hertog shares with us his journey from Medieval Literature and Chaucerian joie de vivre to being one of the prime movers in the establishment of professional standards for legal interpreters in the European Union. As one of the promoters of the first EU projects in this area, as a founding member of the European Association for Legal Interpreters and Translators, as an academic and as a policy maker, professor Hertog’s unflagging commitment to this field has yielded a rich harvest. The EU Directive 2010/64, flanked by other Directives that specifically refer to language rights, is perhaps the most tangible result of the decade-long campaign that Professor Hertog and his colleagues have poured their efforts into.

Erik tells us about his involvement in the evolution of legal interpreting and translation in Europe as an academic, an interpreter trainer and as a policy maker. He also shares with us how he has been involved in some of the more dramatic domains of legal interpreting as an interpreter trainer for the Truth and Reconciliation Commission in South Africa and in the former Yugoslavia, and how he took the experience and expertise he acquired there back to Belgium and to his work in the European Union.

Erik briefs us on the history and the development of the EU Framework Decisions on translation and interpreting in criminal proceedings explaining that although they were probably too ambitious to be implemented at the time, they did eventually lead to the establishment of a number of Directives, and specifically the 2010/64 Directive on interpreting and translation in the legal sector. He describes its strengths and weaknesses.

What slowly emerges in this interview is a set of underlying issues that relate to legal interpreting in a broad sense – to interpreting as a means to safeguard basic human rights and to access Justice in order to ensure a fair trial for all, regardless of language or ethnicity. The human rights aspect has been a hallmark of Erik’s work since he went to South Africa in 1997.
to train interpreters for the Truth and Reconciliation Commission and is also a trademark characteristic that defines Erik as a human being, alongside his commitment to scholarship and his tireless work as a promoter of interpreting standards in the European Union. During the interview Erik traces a line from his work in South Africa to Belgium, to the EU and Eulita (The European Legal Interpreters and Translators Association, www.eulita.eu), from the beginnings of legal interpreting in Belgium in 1860 to the former Yugoslavia and finally to the wars in Iraq and Afghanistan. What emerges in this storyline is the importance of legal interpreting for safeguarding basic human rights but also the harrowing effect of conflict and war on the interpreters themselves as they retell the heinous stories of perpetrators and victims. Locally hired interpreters in particular, but also embedded and civilian interpreters, have sacrificed their lives working for military and peacekeeping forces. As Erik points out, these same organizations should “take responsibility for their locally recruited people and they must face the consequences that when they leave a theatre of war, that the people they leave behind are open to reprisals.” He brings to life the story of an interpreter who lost his family in the Srebrenica massacre, and how a tragic choice he was obliged to make will continue to haunt him for years to come.

Exemplifying the theme of this issue of Cultus, Erik discusses the weight of culture in interpreter-mediated situations. His most dramatic example of how culture, in a very broad sense, can lead to miscarriages of justice is from the 1991 Regina v. Iqbal Begum case. In this case a woman who killed her husband after years of abuse sat silent during her entire trial, not understanding what the interpreter assigned to her said and not appreciating the crucial difference between manslaughter and murder. She unwittingly pleaded guilty to murder, was released on appeal years later, but then committed suicide (http://www.publications.parliament.uk/pa/cm201213/cmselect/cmjust/645/645vw52.htm). The lack of a common language was the immediate cause of this tragic event, as was ethnic culture and gender related dynamics, but even more damaging was perhaps what Erik calls ‘organizational culture’ (i.e. the lack of adequate interpreters). Erik warns against ‘overculturalizing’, though: “you have to train your interpreters or your cultural mediators working in hospitals, you have to train them not to fall into trap of ‘culturalizing’ everything. Something can be a purely personal view and a personal issue and one doesn’t have to be dragged
into turning every misunderstanding or every little conflict into a cultural ‘war’ between the system and an individual or the group.”

Erik contextualizes legal interpreting historically as he relates the story of one of the first known cases of legal interpreting in Belgium. This took place in 1860, involving two Flemish speakers who were accused of killing a widow; their status as Flemish speakers in the French-speaking part of Belgium uncovered issues of power and identity embedded in language elites. As Erik explains, “culture expresses itself in power relations - the weaker the component in a particular group, the stronger the cultural perceptions will dominate and the stronger the cultural effect can be”, and concludes that “there is a strong ideological attitude here that reflects the attitudes and prejudices towards other language speakers in the legal system.”

Rudvin: Emeritus Professor Hertog, before getting into the thick of it, I’d like to take a step back in time. You began your career as a mediaevalist, with a PhD on Chaucer, if I’m not mistaken. What brought you to such a very different path? External contingent factors, or did you always have an interest in interpreting?

Hertog: For my PhD I was looking at analogues to some of Chaucer’s Canterbury tales. At the time there was a need to republish a 1930s work ‘Source and Analogues of Chaucer’, but the problem was that nobody could really define what exactly an analogue - a story similar to the one in Chaucer - was. So I looked at a number of Canterbury Tales and their ‘equivalents’ in a number of other European languages - Dutch, German, Italian, French - trying to describe the similarities and differences and how that would allow us to define the ‘fuzzy’ notion of a prototype narrative or character configuration or whatever as well as a scale of closeness on which to situate the analogues. So it was sort of comparative literature or translation approach, and yes, very much multilingual but, nevertheless, the leap from Medieval English to Translation and Interpreting was quite considerable, also geographically.

Rudvin: you are best known in the field of interpreting for your commitment to and engagement in the development and professionalization of legal interpreting in Europe, especially through your work with the Grotius, Agis and Criminal Justice projects (http://www.eulita.eu/european-projects), and later as the founding father of Eulita, the European Association of Legal Translators and Interpreters.
Indeed, one might say that you have played a leading role in the promotion of legal interpreting in Europe and can be considered as a consequence one of the driving forces behind the 2010/64 Directive on Translation and Interpreting in Criminal Proceedings. As a policy maker, are you satisfied with the results achieved so far?

**Hertog:** I think one might say that we are satisfied if you look at what we have achieved in the field of legislation because that legislation is binding upon member states because of the Directives. The first 2010 Directive functioned as a stepping stone to other Directives, such as the one protecting the rights of the Victim, the right to a lawyer or access to information. They all contain references to the challenge of multilingualism and hence to interpreting and translation. It’s a ‘5-Directive Package’ and three have been realized so far. I would call this a great achievement in the field of legislation.

For the professionalization of legal interpreting, the establishment of Eulita was very important. Eulita gave a voice to Legal interpreters and translators (LITs) in European consultation circles. Earlier, interpreters were never present or consulted.

Also the quality of legal interpreting has improved greatly. Between 1998 and 2015, some 20 European projects on translation and interpreting have been carried out, and we have accumulated a body of recommendations and materials (see http://www.eulita.eu/european-projects) and practical things that have ‘trickled down’ into the actual practice of interpreting.

**Rudvin:** In what way are the achievements measurable?

**Hertog:** One of the ways in which the achievements are measurable is through ongoing training, which has become paramount in many member states. Another measure is the growing awareness of quality in the Member States, which can be seen, for instance, in the ongoing attempts to establish registers of qualified, accredited legal interpreters. It is certainly also measurable in the number of conferences and publications in legal interpreting and translation.

In those countries that are lagging behind, it is always a question of funding, and of funding dictated by political priorities. One must realize there is a huge time lag between the *conception* of the Directives, roughly at the Tampere 1999 EU Area of Justice summit meeting, when the Grotius Programme was implemented and 2010, twelve years later, when the Directive on translation and interpreting actually came into being. During those years, many of the more left-of-centre governments were replaced by more right-of-centre conservative governments and this ideological
shift, compounded by the budgetary crises, caused the implementation of the Directive to become both an ideological and a financial problem. Some countries were well prepared for the implementation by 2013 and did implement it, others tried to get away with a couple of cosmetic measures while others, which had to start almost from scratch, waited until it was too late and too expensive to put it into place.

Another thing that has happened and which is an enormous challenge, has been the flow of migrants these last years. There is a genuine concern for vulnerable people in the European Union, for gender issues, children, women, and victims, but the focus with reference to interpreting should also be much more on these refugees and asylum seekers. I am very much concerned about the standards, the quality of interpreting in this area, as I am in prisons, for that matter. Too often one resorts here to ad-hoc interpreting and third-language interpreting to meet this need.

The early years

**Rudvin:** One of your early experiences as an interpreter trainer and policy maker was at the Truth and Reconciliation Commission in South Africa, after the collapse of apartheid. It must have been exciting to be part of such an historic moment. What struck you most about your work there?

**Hertog:** It was during the second half of 1990's. The Truth and Reconciliation Commission (TRC) was part of the new ‘rainbow’ government of South Africa which in an effort at creating diversity in unity had just written a new constitution proclaiming 11 official languages and set up the Promotion of National Unity and Reconciliation Act, which was the framework for the TRC.

One of the purposes of Human Rights Violations Commission within the TRC was to give victims a voice in their own words and in their own language, but that meant that these voices had to be interpreted for all other hearers present, and had to be broadcast nationwide. To prepare for these hearings training was needed for the interpreters and interpreting infrastructure - booths, microphones, etc. None of this was available.

The Flemish government had a bilateral cultural agreement with South Africa, there had been official and personal contacts in the past, and there was, of course, the language affinity between Dutch and Afrikaans. The request came to fund and set up an interpreter training programme in Bloemfontein for TRC hearings but also for the provincial and national parliaments. That is how I became involved. With a number of colleagues,
we trained the trainers (who had a proficient knowledge of both English and Afrikaans) and they in turn trained their ‘booth’, their own language group. We were looking for language skills, transfer/interpreting skills, stress, personality, collegiality, etc., and I can honestly say that I consider it a landmark event in the history of interpreting – larger than Nuremberg! – and that these interpreters did a truly brilliant job in very difficult circumstances.

**Rudvin:** What was the impact of the TRC?

**Hertog:** As I said, it was no doubt a landmark event. It certainly contributed to the peaceful transition from Apartheid to the rainbow nation, and as an institution the TRC was a wonderful example of how to deal with conflicts, with peace-building in torn nations. No wonder it has become an inspirational event, also thanks to the prestige of Bishop Tutu, its chair; it has been copied a couple of times since then.

The impact on the victims was incredible, one only needs to watch some of the available video testimonies to see the anguish, the pain of the witnesses but also the relief at being given the opportunity to tell their story. With regard to the interpreters, for many of them it was a harrowing experience at times. Many of them coped well with the horror and the pain; some did not, and suffered from serious physical and psychological discomforts.

**Rudvin:** Did it have an impact on interpreting in South Africa?

**Hertog:** Interpreting certainly became more prominent in the hospitals and courts. There’s been some training initiatives, some research, but the country is obviously struggling now – both ideologically and financially - with cultural and linguistic diversity.

But we brought that incredible experience back to Belgium and to the EU, and in a sense, our involvement in legal interpreting started there and then.

**EU projects on legal interpreting**

**Rudvin:** Let’s come back to legal interpreting in Europe. Since the TRC you have been working on legal interpreting. What were the most important aims (initially) and results (at completion) of these projects in terms of setting standards and establishing safeguards?

**Hertog:** There were two streams, really. There was the strategy of the EU projects, the first being ‘Aequitas’, under the Grotius programme, and which became a sort of standard for other projects. So far, some 20 other projects have been carried out (see the Eulita website for an overview).
The other stream is legislation. During this period, after initial consultation rounds, the Commission first proposed a Green Paper on procedural safeguards in criminal proceedings (2003), which was proposed to the member states in 2004. However, the package of five safeguards turned out to be too much and too costly to take in all at once for some member states, and the Framework decision was buried in 2007 as too ambitious, too complex, too expensive.

Trying to create a new momentum and picking up on the two streams, we carried out a status quoestionis project under the Criminal Justice programme, quantitatively charting the status of legal interpreting and translation in all Member States (and hence ‘proving’ that there were still great divergences in provision, quality and practice across the EU). Secondly, if you want to increase your impact, you need to have an association. And that was the second project, the foundation of Eulita.

During the Stockholm presidency at the end of the 2000’s, a different strategy was adopted, namely to ‘slice’ the package into ‘digestible slices’ and deal with one safeguard at a time. The result was a first Framework decision on translation and interpreting. But, fortunately enough, at precisely this moment, the 2009 Lisbon Treaty came into force, now allowing the Commission to take legally binding initiatives both in principle and in practice – Directives – also in the area of justice. So the Commission reissued the proposal for a Framework decision as a Directive, a much stronger legal instrument if one wants to bring about change, and one that exposes member states to sanctions in case of non-compliance.

Rudvin: Is the Directive specific enough?
Hertog: Let me first say that it is a great instrument. For example, it requires interpreting throughout the proceedings, even in lawyer-client consultations, it requires training of legal professionals, it strongly and repeatedly introduces standards of quality. However, some crucial notions are deliberately left vague – including this norm of ‘quality’, or that an interpreter has to be ‘qualified’ – but it also allows for some dubious practices such as allowing for summary interpreting of court decisions or verdicts.

One issue which is crucial to ensure quality is the register of legal interpreters used by the police, the courts, lawyers, etc. A current EU project – the LIT-search project – is investigating this issue, because it is

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1 The Status quoestionis survey was published in 2008 as part of the 2006 Agis project (Hertog/ van Gucht 2008).
important to have national registers in the EU that abide by essential structural criteria, i.e. that interpreters are trained, tested, examined and certified by an authority; that they abide by a code of ethics, etc. – in order to be able to arrive at an EU register which is needed to increase mutual cooperation between legal systems, in cross-border cases and in remote video-link interpreting conditions.

**Rudvin:** Legal interpreting has undoubtedly come a long way since then, but what about interpreter training? And what has been your own role in the furthering of interpreter training? The 2010/64 Directive must have felt like such an achievement. In what way did it satisfy the aims you, as a policy maker, had set, and in what way did it disappoint you?

**Hertog:** The great thing about the Directive is that it’s there. It does force the member states to take some action, or to hope at least that they’ll get away with what they’re doing (or not doing) when the Commission scrutinizes their transposition measures. As I said, it mentions the ‘proceedings’, ‘register’, ‘quality’, ‘training’ etc., all extremely important aspects.

The other positive thing I’d like to come back to is that legal professions should receive training on how to work across languages and cultures. This will slowly increase the degree of awareness of and about legal interpreting, the importance and need for quality interpreters and the importance of a code of ethics. Legal professionals will be the channel of real change, I believe, rather than the interpreters. Even associations of interpreters, even my brainchild Eulita, are simply not strong enough to go against the established legal powers (prosecution, judge, police).

And although judges are the ultimate authority in their court, and by law obliged to give precedence to EU over national law, therefore also on the issue of quality of interpreting in their court, it is to defence lawyers that I turn, these are the key people. If they are really concerned about the rights of their other-language speaking client, about a fair trial, about the fact that all the information is conveyed accurately from one into the other language, about the fact that the lack of quality of interpreting might do an injustice to their client, then they are the ones who should raise the issue during the interview or in court. They should become our main allies.

Apart from what I said above, the really disappointing thing is the transposition, or the implementation. This process has been so slow, so haphazard, there are still, in 2015, two years after the deadline a number of member states that haven’t transposed the Directive into national law or measures, Belgium one of them, as we speak.
Intercultural issues

Rudvin: Cultus specifically examines issues of intercultural communication. The translation-interpreting process is by definition intercultural, at the interface of the language-culture connection. In terms of intercultural communication and the potential for misunderstandings and conflicts in the area of legal interpreting, have there been many examples of interpreting errors leading to miscarriages of Justice?

Hertog: Well, there have certainly been miscarriages of justice; whether they have to do with what you would define as cultural issues is difficult to assess. Usually it has to do with ‘organizational culture’ as you encounter it for example in a hospital or a legal system. It is the provision and quality of interpreting, usually the lack thereof, which has an enormous impact, as well as the attitudes of the other professionals, or the system as such, whether legal or medical professionals see the interpreter as a hindrance, a nuisance or as another professional who will actually help them to do a better job.

Blatant miscarriages are the Iqbal Begum case in the UK we mentioned, or to go back in time, the first known case in Belgium of legal interpreting in 1860. Two Flemish workers in the French-speaking part of Belgium were accused of having killed an elderly widow who was able before she died to tell the police that her attackers spoke what she called Flemish. On this suspicion two Flemish speakers in the neighbourhood were arrested, they were taken to court and the interpreter was actually a police officer brought in from Luxembourg, not from the French-speaking part of Belgium and who spoke very bad French as well as Dutch. The two were convicted, sentenced to death and executed. Their lawyer was a French-speaking lawyer who had no Dutch, and so had no way of communicating with his clients. Later it turned out that the murder had actually been committed by a gang roaming in the area and that members of that gang had deliberately spoken a few Flemish words to put the victim on the wrong track.

So there too, you could say, there was an issue of organizational and political culture, as well as one of identity culture, how the ‘other’ was perceived – in this case two ordinary Flemish speaking working men before a French-speaking court, an emanation of the elitist establishment. Mutatis mutandis, this is your present-day migrant or refugee who also has difficulties, but also the right to understand and be understood. But what
it deep down reflects is an attitude towards the other-language speaker caught in the legal system.

So, yes, no doubt there have been miscarriages of justice. Look at the many decisions on interpreting by the European Court of Human Rights, look at the cases brought to our attention by Fair Trials International, look at the articles documenting cases that have gone on appeal because of deficient interpreting (https://www.fairtrials.org/). When an organizational culture expresses itself in strong power relations, then the weaker, the more different the individual or the group, the stronger the impact will be. It is illustrative to look at the long list of ECtHR decisions on all kinds of Roma issues in Europe to see the point (http://www.echr.coe.int/Documents/FS_Roma_ENG.pdf). I assume it was not so different in Australia in cases involving Aboriginals.

Which brings me to the point that ‘culture’ manifests itself in a legal context also in personal or ethnic mindsets. We know for instance about body language, gestures, ways of politeness and face-saving as indicators of cultural relations. In South Africa, in the TRC hearings, we saw African witnesses struggling to express physical and sexual violations within the decorum of their culture and the ‘white’ interpreters equally struggling to decode the metaphoric veil. Notions of age, gender, religion, family, honour, nation, language, etc. – the list is not complete – pervaded and steered virtually all encounters between officials and the various groups in Kosovo. So, yes, I think that ‘organizational’ culture as well as culture in the more ‘individual identity’ sense of the word, that they are both very important in the legal system.

By the way, culture is probably an even more important issue in medical interpreting because in a situation of mental or physical illness one touches the core of one’s body, the soul of one’s being. The illness gets related to concepts that are deeply ingrained in culture – birth, death, health, sex, food, trust, faith – all that is very cultural.

**Rudvin:** How do you think these miscarriages of justice can be prevented? Simply by improving training quality and standards?

**Hertog:** I see no other solution really except training, of both the interpreters and the legal professionals working with interpreters. Idem in the medical sector. Systems as such, but in particular the representatives of systems, be they medical doctors, lawyers or prosecutors, *have to be* more sensitive to try to understand the way people think and the way people behave and the way people do things or don’t do things. One does have to have the patience to listen and the willingness to go along with a way of
seeing things that is not your own, certainly in situations where people are in distress like in medical or in legal situations.

But the training needs to go both ways: both of the service providers and of the interpreters. The interpreters also need to be trained not to ‘solve’ the cultural conflict themselves but, when and if they spot it, to alert the service providers to it. At the same time you have to train your interpreters or your cultural mediators working in hospitals, you have to train them not to fall into trap of ‘culturalizing’ everything. Something can be a purely personal view and a personal issue and one doesn’t have to turn every misunderstanding or every little conflict into a cultural ‘war’ between the system and an individual or the group.

“Interpreters in conflicts and conflicts in interpreters”

Rudvin: I’ve been reflecting on issues related to interpreting for vulnerable people and interpreting in extreme situations: does the standard code of ethics apply? It seems to me that group-dynamics and in-/out-group alignment parameters profoundly affect the behaviour of interpreters and their interpreting strategies, but that they also impact on the various participants who are not immediately involved in the situation, such as the employers and end-users, but also their fellow-countrymen or villagers and families. In such extreme situations, where lives are at risk every minute of the day and the stakes are high, often very high, affect and human emotions also are important variables in the interpreting situation both in a narrow sense (the development of the interpreted session) and in a wide sense (the interpreter’s safety). Although the Code(s) of Ethics to which community interpreting is tied is arguably more malleable and less immutable than it might be for conference interpreting or legal interpreting, the cardinal parameters of accuracy and impartiality, although at times problematic – are nevertheless the quintessence of most forms of interpreter-mediated communication. Impartiality takes on very different connotations in interpreting in areas of conflict and war, however; indeed the participant in-/out-group alignment can affect the very survival of an interpreter.

In most ‘professional’ and institutional’ situations in which intercultural and inter-linguistic communication takes place, the stakes are not as high as they are in a situation of war (or if they are – as in medical or legal interpreting – they are nevertheless carefully controlled by strict medical or legal checks and balances that safeguard a patient’s or defendant’s life and
well-being) and therefore the priorities are ‘inverted’, as it were: the necessities of survival and/or victory take precedence over professional codes of ethics. This is true of warfare, but it is also true of other situations in which the interface between private and public is not clearly defined and neat, but becomes fuzzy and ‘messy’, namely those situations in which one or more of the interlocutors is particularly vulnerable and/or when emotions run high. Very often, the two are connected, precisely because sentiments of empathy and anger are aroused as a consequence of an injustice that in its turn leads to vulnerability, for example sick people, refugees and other people fleeing natural disasters or war, prisoners-of-war, victims of torture, victims of sexual- or other forms of abuse or discrimination, etc. (Victims and vulnerable people already involved as claimants or witnesses in a trial and patients already in treatment are protected by the institutional-legal parameters of the medical and legal profession and are thus less subject to arbitrariness in communication and interpreter-mediated discourse). Other vulnerable groups, such as disabled people or children, have no causal motivation that arouses anger, but arouse empathy on ‘intrinsic’ grounds. But generally speaking, affect – empathy and solidarity but also anger, feelings of betrayal and hostility – can easily override standardized professional ethical parameters.

Erik, one of the more recent areas of investigation in Interpreting Studies – an area that has caught the attention of various media across the world in the last few years – is precisely the vulnerable position of locally sourced interpreters in areas of conflict and the dramatic consequences for so many of them. You’ve taken a special interest in this area in the recent years and spoke on this at the conference on Public Service Interpreting in Alcalà in Spain in 2014. What sparked you interest in this area? The human rights aspect? The ethical aspect? Or the testimonies of interpreters you have met? And what do you feel is the best way forward in this area?

**Hertog:** Yes, it’s become quite a topic in the interpreting literature. Well, to answer the first half of the question, the spark or impetus was an invitation by the OSCE, the Organization for Security and Co-operation in Europe. They invited me to give a training programme to community or public service interpreters in Kosovo, this was in 2011. The group of people to be trained was a mixture of Serbian speakers and Albanian Kosovar speakers. The OSCE was trying to build bridges between the various communities by training interpreters on both sides, bringing them
together, trying to use them to provide interpreting between the ethnic
groups in Kosovo and between the communities and the authorities.
This sparked my interest in the issue because it was still an area of conflict,
though the armed conflict wasn’t going on. It was the final stage of the
war in former Yugoslavia and the conflict in Kosovo broke out in 1998,
escalated throughout 1998 and then NATO forces intervened in 1999
with the bombing campaign. The visual consequences of war were very
visible still, were very much around there, in Priština, Kosovo. So I had
this feeling of being in a place where war had ravaged the country until
recently, and a situation where you still felt the ethnic and political
tensions in the city. This situation and the very composition of the training
group sort of alerted me to that issue of conflict, of interpreters working
in conflict, and turning it around, the conflicts that as a result were
provoked in the interpreters themselves, this conflict between being an
interpreter and taking sides in matters of life and death, or being an
outsider and a witness at the same time.
The experience, on reflection, took me back to South Africa because,
although the TRC hearings as a whole went exceptionally well, subsequent
articles and interviews and studies revealed to what extent (some of) the
interpreters felt emotionally caught in this dual role of detached
transmitter and ‘invisible’ go-between versus involved participant and a
subject in one’s own voice. Bishop Tutu admired their courage, their
professionalism, when switching in the I-person between the voices of the
tortured and murdered victim’s mother and that of cruel, brutal
perpetrator. It’s what led me to this double perspective: interpreters in
conflicts and conflicts in interpreters, because, indeed, many of them did
suffer serious psychological and physical consequences.
I also related it back to a story I had been following and which was heavily
covered in the Belgian media. It was probably one of the most dramatic
events that happened during the war in former Yugoslavia, the Srebrenica
massacre, the killing of some 8000 Bosnian Muslims by Serbian attackers,
a Serbian militia and army under the command of Gladić. This happened
under the so-called eyes of the Dutch UN peacekeeping force that was
supposed to protect the Muslims in a safe haven area. But there was one
particular story which caught my attention, the story of the interpreter
Hasan Nuhanović. Among the refugees in the Dutch compound were his
parents and his brother. When the Dutch under threat of a Serbian attack
were forced to release the refugees out of the safe haven, Nuhanović tried
to persuade the Dutch to let them stay with him in the compound. But
they were sent away and as a result, they were killed in a frenzy of torture, rape and slaughter. The story for me became a sort of an epitome story of an interpreter caught in a conflict, and at the same time what that conflict caused in the interpreter himself. There is an interesting BBC documentary about his story and Nuhanović has been very active ever since. He launched a lawsuit against the Dutch government, arguing that they were partly responsible for the massacre and ultimately for the death of his family. The courts in the Netherlands recently decided on the case and declared the Dutch government partly responsible. It’s not because the Dutch forces were prohibited from attacking the Serb military and it’s not because it was proven that air support was denied to them by the Supreme Allied Command, that they were not partly co-responsible for what happened. This story still continues before the ICTY (United Nations International Criminal Tribunal for the former Yugoslavia) in The Hague.

It is a complicated issue because the role of interpreters in conflicts is extremely diverse. They can be combat interpreters – so really military personnel who ‘have’ the languages needed in the conflict zone, they are in essence ‘soldiers’, they know the risks but also enjoy the support. They can be embedded civilian interpreters, contracted by one side, one army. Although they are ‘interpreters’, they cooperate, they collaborate, for example in searching out people and locations; or warning and briefing the military, on arrests and in interrogations, etc. But the largest group are actually locally recruited personnel, and they are the ones that are really vulnerable because they are distrusted by everyone: the side they are officially working for distrusts them of maybe secretly sympathising or collaborating with the other side, of making money, sometimes more than the actual combat soldier, while the other side, their own side linguistically and ethnically, often sees them as traitors, working with the enemy. The ‘outsiders’ are completely reliant on these interpreters because when they enter this small village in Afghanistan they have no idea what these local people are saying, what’s going on, who is friendly or who tries to shoot them, and they rely completely on the interpreter. Is the interpreter really helping them, or is he leading them into an ambush, into a house that is booby-trapped?

Apart from the complexity in the war zone, there is the post-conflict situation. These interpreters are also the ones that are most vulnerable in terms of reprisals and attacks, while ‘the other side’ is still there, of course, but even more so when the forces have left and they are left behind. In
Iraq, in Afghanistan, today in Syria, a staggering number of interpreters (or their loved ones) have been attacked and killed. Also in Kosovo. When the bombing attacks began and OSCE together with other international organisations pulled out of Kosovo, they left their interpreters behind, opening them up for reprisals. One commander reported how he gave his 12 interpreters the choice of coming with them or staying behind. Of the three Kosovar interpreters who stayed, one was killed immediately and one went into hiding for 52 days after he had heard his name in a Serbian broadcast.

And this also goes for interpreters working for journalists, the so-called ‘fixers’ or ‘taxi-drivers’. One Belgian war reporter ‘lost’ an interpreter in Iraq, had to smuggle one out of Afghanistan to safety and had one severely wounded in an attack in Syria. There have been instances of interpreters being kidnapped with the journalists. Usually, the journalist is released and the interpreter is killed.

**Rudvin:** And what do you see as the best way forward in terms of a solution to this dramatic problem in which the ethics (ethics rather than codes of ethics) of our profession, world politics and the needs of Western peace-keeping and/or belligerent forces intersect with human rights. Better and more information to advise the parties involved? More interpreter training? Political asylum for interpreters?

**Hertog:** I think what one needs is much greater awareness in the military, in countries and states and also in international organizations, like the OSCE or UN peacekeeping forces. They have to take responsibility for their locally recruited people and they must face the consequences that when they leave a theatre of war, that the people they leave behind are open to reprisals. So I think there needs to be much tighter international consultation and international agreement on that issue. By the way, there is this interesting initiative called *InZone* of the University of Geneva ([http://inzone.unige.ch/](http://inzone.unige.ch/)); that’s certainly a way of trying to improve the issue from the interpreting point of view, as well as the efforts made by AIIC to speak up for interpreters in conflicts.

One needs at least to consider, although it’s a very difficult question in terms of loyalty and allegiance, to give the interpreters a special protected status. If they are locally recruited, that’s not going to work, but if they were systematically of different nationalities one might think of them along the lines of Red Cross people, people you don’t shoot, don’t attack. But that is only possible if the parties involved in the conflict recognize that the interpreters are impartial, are neutral. Unfortunately, the minute
you show up on one side, you’re burned. So plan B is to take care of your interpreters when you leave the conflict zone. In the USA and in the UK, but also in Spain or Italy, there has been a huge battle over the number of interpreters eligible to repatriation visas. If you have been using them in the war for so long, then you can’t leave them behind to get shot. There’s an issue of moral responsibility here with the military forces, the NGO’s, the international organisations or countries to resettle them and their families. You’ve used them, so accept your responsibility.

**Rudvin:** Yes, this is such a delicate question. If the incentive for the locally-recruited interpreters is money, in a sense you’re buying their lives.

**Hertog:** Yes, but when I think back to the people interpreting for the South African TRC, certainly it was an issue of money, of employment, of a career, but it was also an opportunity to be part of the history of their nation. But of course the event was an extremely forward-looking one, certainly with the prestige of Bishop Tutu behind it. This was part of a rescue operation of a nation. Whereas in military conflicts, it’s different. I know for example that some of the Belgian military in the former Yugoslavia had little sympathy for their locally-recruited interpreters: it’s their decision and moreover, they’re very highly paid. “We need them, but we don’t trust them”. But Hasan Nuhanović – what could he have done? Leave the safe compound, the safe haven of the Dutch military base? Go away with his family and get killed himself? Or stay behind and hope for the best? He saved his life, but later found the mutilated bodies of his parents and his brother. What a price to pay in this conflict between personal and professional loyalty. It is difficult.

**Rudvin:** And at the same time an embedded interpreter, or their own interpreter who could solve the language problem wouldn’t be able fill that incredibly delicate role of alignment with the local population. Or knowledge of the local people and culture.

**Hertog:** No, because they’re on their side.

So it’s a very tricky issue and you could argue with either military interpreters or civilian interpreters working for the army, that it’s their job and their choice and their money and that’s it. But it’s when they start using locally recruited people that the problem really begins.

**Rudvin:** It’s a very dirty game,

**Hertog:** It is yes, and we’re talking about thousands of people, if you look at these conflicts in Iraq, Afghanistan, Central Africa, Syria.

**Rudvin:** It also forces us to re-interpret the idea of a general code of ethics.
Hertog: Yes, that whole paradigm of impartiality, the invisible interpreter. If you look at the OSCE code for their interpreters, this is very much a situation-bound and also very pro-active code, stepping outside the impartiality of interpreters as we see it defined in normative, prescriptive codes, say, of conference interpreters. The interpreters are working for them in their service and while expected to interpret accurately during the encounters, are still supposed to brief and debrief them on issues of (mis-) understanding and cooperation, communication strategies, sensitive cultural issues, etc. At the very end of that spectrum, and without in the least insinuating a link to the previous example, we know of the interpreters who assisted (or had to assist) during the interrogations (or torture) in the Abu Ghraib prison or in Guantanamo.

But generally speaking, along the spectrum one sees a move away from strictly, narrowly normative and prescriptive codes of ethics to more carefully managed latitude in response to the communication needs of the participants and the overall situation. As a matter of fact, this makes the ethics component in interpreting much more difficult than the normative approach, and requires both more intensive training and a great deal of integrated awareness of the code in one’s practice. The deontological accountability of the interpreter becomes the foundation stone of one’s professional performance.

Rudvin: Erik, as always, one learns so much from talking to you. Thank you so much.

Hertog: It’s been a pleasure.
Disentangling the complex web of language, culture, and cognition: A case for interdisciplinarity in (legal) interpreting research

Fabrizio Gallai

Abstract

Language still often represents a barrier for many citizens or minority-language speakers involved in legal proceedings. In some jurisdictions, court and police ‘interpreters’ (individuals who have no academic or professional qualifications, but have a reasonable grasp of the language) are allowed to work in public service settings on a regular basis. However, as Berk-Seligson (1990: 204) clearly states, “no amount of oath-swearing can guarantee high quality interpreting from an interpreter who does not have the necessary competency” (my emphasis).

But which qualities should legal interpreters have in order to interpret effectively? How does interpreted-mediated interaction work? Do utterances and the participants’ contextual assumptions influence each other in the construction of meaning? If so, how?

Section 1 of this paper provides an overall critical review of literature on legal interpreters’ role perceptions and expectations. Section 2 focuses on legal interpreting publications drawn from pragmatics - in particular, (socio)-pragmatics (2.1) and relevance theory (2.2) - referring to the need for interpreters to achieve ‘pragmatic equivalence’ between the original and the interpreted utterance. In Section 3, I make a case for the co-existence of different theoretical frameworks to analyse and explain (legal) interpreter-mediated events (3.1) and give two examples of this two-pronged analysis from my corpus (3.2). Finally, I shall provide concluding remarks and pave the way for further analysis.
1. The role of legal interpreters: Perceptions and expectations

In contrast with translation studies, academic work in the field of both conference and liaison interpreting has traditionally focused on the individual performing the task (i.e. the interpreter) as opposed to interpreting; this is partly due to their “visibility” (Jacobsen, 2009: 155) or the immediacy of the encounter, which requires the interpreter’s presence at the speech event. However, conference and community interpreting differ in terms of potential research areas. The stress in conference interpreting research lies on cognitive and neurolinguistic aspects (i.e. issues such as anticipation, memory span, ear-voice span; cf. Pöchhacker, 2004), whereas research in dialogue and, in particular, legal interpreting has mainly focused on role perceptions and expectations among interpreter users and interpreters themselves (Jacobsen, 2002, 2009; Mason, 2000: 216). Thus, “whereas community interpreting invites research of interaction (…), conference interpreting invites research of action (on the part of the interpreter)” (Jacobsen, 2009: 156). This is also mirrored in Pöchhacker’s (2004: 13) distinction between inter-social versus intra-social settings; whereas the former involve contacts between social entities (business, diplomacy, etc.), the latter involve contacts in multi-ethnic societies (police stations, health institutions, etc.).

The notion of role is mediated from sociology and indicates “a set of more or less normative behavioural expectations associated with a ‘social position’” (Pöchhacker, 2004: 147), which is central in analysing the intra-social settings of legal interpreting. Traditionally, the role of the legal interpreter has been linked with intermediary functions typical of a ‘messenger’ or ‘negotiator’ right from the beginning (Lang, 1976: 336). Following the professionalisation of the community interpreter in the 1980s and 1990s the issue of role became an integral part of national Codes of Ethics and Practice. The professional role generally prescribes accurate and faithful renditions, thus excluding any discourse initiative on the part of the interpreter and conceptualising her “as a ‘non-person’ in a neutral position between the interlocutors” (Pöchhacker, 2004: 147).

Over the past twenty years, this image of a passive and invisible participant - a mere translating “machine” (Knapp-Potthoff & Knapp, 1986: 152) - has been problematised by scholarly research in areas such as hospitals (e.g. Merlín & Favaron, 2003), legal interpreting (e.g. Berk-Seligson, 1990, 2009; Hale, 2004; Morris, 1995; Pöllabauer, 2004, 2006; Wadensjö, 1998), sign language interpreting (e.g. Metzger, 1999),
interpreting in conflict areas and the media (e.g. Straniero Sergio, 2007). By highlighting the linguistic, socio-cultural and interactional pattern of complexity in the actual role behaviour, these authors challenge the notion of literal renditions and argue instead for a redefinition of the (legal) interpreter as a more visible ‘communication facilitator’ (Roy, 1993/2002, 2000).

Another essential role highlighted in the literature (especially on healthcare interpreting) is that of a cross-cultural bridge, converting one set of social and cultural norms and assumptions to another set (e.g. Drennan & Swartz, 1999; Kaufert & Koolage, 1984). For the legal settings, scholars such as Laster & Taylor (1994) and Mikkelson (1998) have highlighted the necessity for the interpreter to make adjustments to promote the interests of the individual client.¹

The interpreter’s role as an “intercultural agent” (Pöchhacker, 2004: 148) has proven to be a overriding theme in research on interpreting in the asylum process, with particular emphasis on the extent to which she may or should go beyond the task of relaying the primary participants’ utterances and take more active responsibility for the achievement of cross-cultural understanding. The first example is a study by Robert Barsky (Constructing a Productive Other, 1994) of interviews with 56 applicants for refugee status in Canada, highlighting that interpreters needed to empower the claimant in an unfamiliar institutional environment by serving as “intercultural agents”.²

Taking a more ethnographic as well as a macro-sociological approach, Moira Inghilleri’s (2003, 2005) study of the asylum application system in the United Kingdom is based on Bourdieu’s sociological theory, but also on what Pöchhacker (2004: 77) describes as “Translation Theory” (TT), a well-established paradigm oriented to the textual product with regard to both its structural (intratextual) and its pragmatic dimensions, and centred

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¹ A case in point analysed by a number of scholars (Gibbons, 1998; Coulthard & Johnson, 2007; Eades, 1994) is the administration of a caution or Miranda right (see Extract 1 in section 3).
² In a survey among interpreters serving the Refugee Status Appeals Authority in New Zealand, Fenton (2004) further sought to determine the level of practitioners’ support for Barsky’s (1994) “extreme demands”. The author found that most of the 35 respondents expressed sympathy for the disadvantaged position of the asylum seekers in the face of interviewers’ hostile questioning style; however, they unanimously favoured the “accurate interpreting” norm and preferred to be “as invisible and unobtrusive as possible” (Fenton, 2004: 268).
on the notion of translational norms (Toury, 1995). The author claims that there are two distinct concepts of interpreting, namely “linguistic” and “community” interpreting, and that these differing approaches in using interpreters “can lead to substantial confusion about their role both among interpreters themselves and those who use their services” (Inghilleri, 2003: 1).

However, the most extensive discourse-based work on the interpreters’ role performance to date is that of Sonja Pöllabauer (2004, 2005). In her study of first-instance asylum hearings in Graz (Austria), she analyzed a corpus of 20 audio-recorded asylum interviews conducted by three officials with English-speaking applicants from four African countries. Drawing on pragmatics, “Translation Theory”, and critical discourse analysis (CDA), Pöllabauer analysed the three interpreters’ performance according to their role performance (Pöchhacker, 2004: 149), their positioning in the primary parties’ asymmetrical power relation, and their adherence to professional norms. As a result, she finds “highly discrepant behaviour which seems to be determined mainly by the officers’ expectations” (Pöllabauer, 2004: 174-175) and observes that the interpreters, far from being “invisible” and neutral, intervene in a number of ways. Rather than being “intercultural agents”, however, the interpreters frequently position themselves as members of the institutional “team”, thus assuming the role of “auxiliary police officers”.3

In the field of court interpreting, studies carried out in the USA (Berk-Seligson, 1990), the Netherlands (Jansen, 1995) and Israel (Morris, 1989, 1999, 2008; Shlesinger, 1991) have particularly served to illustrate the issues connected with the image of the interpreter as a translating machine by demonstrating how some interpreters are prepared to exercise latitude and modify the source text to convey their perception of meaning or to reduce the impact of their target texts on the hearer. The four studies agree that the main reason for this was the interpreters’ objective of effective communication, but they disagree on the degree of latitude interpreters should exercise. For example, while Morris (1989: 14) and Shlesinger

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3 For instance, they were found to adopt the first person plural to refer to the asylum seeker’s interlocutors, omit “irrelevant” information, and engage in “internal rounds of talk” that remained untranslated for the other party (see also Gavioli, this issue). These results are corroborated by Kolb & Pöchhacker (2008) for first-instance asylum proceedings, where they found three types of deviations from the interpreter’s normative role emerge: verbally allying with the adjudicator, acting as co-interviewer, and co-producing the written record.
(1991: 153) argue that a degree of latitude is necessary to convey speaker meaning. Berk-Seligson talks of “intrusiveness” and interpreters’ “intrusive behaviour” (Berk-Seligson, 1990: 214).

In his works on legal interpreting in Denmark, Jacobsen (2002, 2009) agrees with Morris (1989) and Shlesinger (1991) on this issue. Applying Grice’s (1975) theory of conversational implicature, he found that the interpreters were preoccupied with “building a mental model of speaker meaning and with conveying this mental model to end receivers” (Jacobsen, 2009: 158), despite the legal authorities’ assumption of literalism. In this way, the key component in an interpreter’s performance – i.e. the very fact that her presence is meant to ensure successful interaction – is argued to lead to a more active role on the part of the interpreter than the simple word-matching exercise required by law.

In this area of research an exception is represented by the work of communication scholar and interpreter Cecilia Wadensjö (1995, 1998). Whereas all of the above studies analysed role expectations and perceptions focusing on the interpreter’s role of translating conduit versus active participant, Wadensjö’s (1998) study of police and medical interviews mediated by state-certified Russian-Swedish dialogue interpreters has provided major insights into the interpreter’s role as translator and coordinator. Her full-length work drew mainly on Goffman’s interactional sociolinguistics, and in particular on his concept of footing, used in Wadensjö’s work to describe the primary participants’ and the interpreter’s relationship to each other. Thanks to such seminal works as Wadensjö’s, researchers in legal interpreting in the twenty-first century no longer seek to understand if community interpreters are visible and active participants, but rather to what degree and with what consequences (Hale, 2007, 2008; Mikkelson, 2008). It is this seminal study which, for most scholars and analysts, still defines what Franz Pöchhacker calls the “dialogic discourse-based interaction (DI)” paradigm (Pöchhacker, 2004: 79), comprising “the basic assumptions, models, values, and standard methods shared by all members” of the community interpreting scientific community (Pöchhacker, 2004: 67; cf. also Angelelli, 2004).

Furthermore, Hale (2008) states that role definition remains a controversial issue in this setting. The reason, she argues (2008: 100-101), is the profession’s “different levels of development across the world”, i.e. the lack of common professional standards that could counteract the different role expectations of interpreter users. Moreover, Hale (2008:
identifies five roles that have either been “openly prescribed” or “deduced” from the performance of interpreters:

(1) advocate for the minority language speaker;
(2) advocate for the institution or service provider;
(3) gatekeeper (controlling the flow of information by introducing, reinforcing and excluding topics);
(4) facilitator of communication (responsible for the success of the interaction), and
(5) faithful renderer of others’ utterances.

She concludes that interpreters need to consider the consequences of their choices before adopting a role and that – aware of the possible consequences demonstrated by her examples – role (5) is in fact “the only adequate role” for interpreters working in legal settings. This does not mean, however, that “interpreters must act as mindless machines”, but they should attempt to translate accurately “within human limitations” (Hale 2008: 119; reiterated in her conversation in this issue). Finally, she maintains that the higher the level of their skills, and the better the working conditions in which they operate, the better chance interpreters have to be as accurate as possible.

Hale’s recommendations for which roles are suitable in an interpreting event, however, differ from other scholars’ suggestions. For instance, whereas Leanza (2005) recommends that interpreters adopt all the roles and function not only as interpreters but also as cultural brokers and facilitators of integration, Hale (2008) posits that interpreters should carefully consider the consequences before adopting a particular role.4

In Mason’s (2009) contribution to Interpreting and translating in public service settings: policy, practice, pedagogy, the image of interpreting as interaction proposed by Wadensjö (1992, 1998) is explored further. The final outcome is an approach that veers from the static concept of role to adopt the dynamic notion of positioning. In this descriptive study of interpreted events from different sources (a television documentary on illegal immigration and a variety of interviews), the author describes “the range of moves, both linguistic and paralinguistic” (Mason, 2009: 71) in which the primary participants position and re-position themselves, affecting

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4 These and other studies (e.g. Pöchhacker, 2002; Morris, 2008) also show the increased focus on quality, a topic which is also linked to the issue of visibility and active participation.
each other’s positions. The analysis, based on six parameters (including orientation or positioning of each participant with respect to each other, use and translation of contextualisation cues, and gaze) proves that the behaviour of all participants is interrelated, and their “positionings are either accepted and adopted by other participants or rejected and replaces” (Mason, 2009: 71), i.e. they are subject to joint negotiation.⁵

In conclusion, we have come a long way since the 1990s when the image of the community interpreter as a “necessary evil” (Herbert, 1952: 4) prevailed. As discussed, the sub-discipline of community interpreting in interpreting studies has developed into an applied science in its own right, nourished by the methodological streams of various scientific disciplines. Within a dialogical theoretical frame, “the meaning of what is said is settled in and by interaction between individuals” (Wadensjö, 1998: 279; my emphasis). We now turn to the study of how this interaction unfolds at a micro-level, in terms of utterance comprehension and the way utterances and the participants’ contextual assumptions influence each other in the joint construction of meaning.

2. Legal interpreting and linguistic pragmatics

The analytical momentum in community interpreting studies has not been generated from within the discipline’s existing paradigms, but rather scholars have looked at other theoretical frameworks for relevant models and methods. An obvious source of inspiration for liaison interpreting studies has been linguistics, and in particular pragmatics.

2.1 (Socio-)pragmatics in legal interpreting

The influence of linguistic pragmatics within the Dialogue Interpreting (DI) paradigm can be seen in a number of contrastive studies that have led researchers in legal interpreting to argue against the myth of literalism and mainly applied Grice’s (1975) cooperative principle (cf. Jacobsen’s (2002) study on the issue of role in Section 1), speech act theory (Austin, 1962; Searle, 1969, 1976) and, in particular, politeness and ‘face-saving’ models

⁵ Using the Map Task as a research tool, Turner (2013) takes this issue even further by claiming that meaning can not been interpreted without “grounding” (Clark, 1996), i.e. an active, positive joint action undertaken by all participants.

In this context, scholars have “argued for the need to understand the utterance at the discourse level, rather than at the word or sentence levels” (Hale, 2006: 217) and to achieve a similar reaction in the audience as the original (Berk-Seligson, 1990, 2002; Hale, 2004; Krouglov, 1999; Mason & Stewart, 2001). According to the authors, this is achieved by looking, firstly, at the underlying ‘pragmatic point’ - or intention - of the utterance, and then at its force and potential ‘perlocutionary’ effect (Austin, 1962; Searle, 1969).

In this background, the issue of politeness has become central to theoretical frameworks in legal interpreting research. In particular, it has been linked with the use of indirect speech both in Leech’s (1983) ‘conversational maxim’ and Brown & Levinson’s (1978, 1987) ‘face-saving’ models.

In particular, authors have introduced a comprehensive definition of ‘indirectness’ as a set of politeness strategies with the objective of reducing imposition on the hearer and/or leading to the emergence of solidarity between the speaker and the hearer. These strategies include lexical and referential markers, i.e. devices such as hedges, downtoners, diminutives, and discourse markers which rely not only on their literal meaning but also on the particular situation and relationship to indirectly approach or present a claim. Hedges are mainly used for negative politeness in face-saving, in which they are used to mitigate the illocutionary force of an utterance or on any of the four Gricean Maxims (Brown & Levinson, 1987: 130). In both cases the motivation for their use is arguably the desire to save face, either that of the hearer or the speaker.6

Legal interpreting research has focused on features such as register, politeness and hedging to analyse “translational shifts” or changes in the ‘sociopragmatic’ force of the interpreted text (Pöchhacker, 2004: 144).7 Mason & Stewart (2001) focused on the issue of face in the cross-examination of Rosa Lopez from the O. J. Simpson trial. In particular, they look at the way the interpreter both reduces the ‘face-threatening’ force of Lopez’ defensive answers or increases it by her inability to render

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6 For instance, a subgroup of ‘clausal mitigators’ are utterances that begin with but, which are said to attenuate the propositional content of the utterance by providing an explanation of the speaker’s motives for carrying out a face-threatening act.

7 Nakane (2006, 2008) tackles these shifts in the domain of police interpreting, with particular reference to hedges and politeness.
into English the illocutionary force of the utterances. The following example (Mason & Stewart, 2001: 57) illustrates one such alteration caused by the interpreter’s rendition:

Attorney: So you have not made a reservation?
Interpreter: +++
Witness: No pero no voy a hacerlo no más salir de aquí (xxx) tiempo para salir. (waves arm) No voy a hablar a las diez/ a la una de la mañana…(xxx).

(No but I am going to do it as soon as I leave here (xxx) time to leave. I am not going to speak at ten/ at one in the morning…(xxx).
Int: But I will make it as soon as I leave here.
Att: Okay. You have not made a/
Int: I can’t call at 1:00 in the morning because the airlines are closed at that time. I have to wait.

In this case it is argued that the accuracy of the interpreter’s rendition would be enhanced by the addition on the ‘discourse marker’ hardly as in “I’m hardly going to phone at one in the morning…”, supporting Hale’s (1996) definition of pragmatic equivalence according to which additions or omissions of this kind are commonly needed for accuracy (see also Hale in this issue).

2.2 Relevance Theory: A cognitive approach

Legal interpreting, and in particular discourse markers used by legal interpreters have also been analysed by another pragmatic theory, i.e. Relevance Theory.

Most socio-pragmatic and coherence-based accounts are characterised by an externalised view of language (cf. Chomsky, 1986) as they describe discourse as communicative behaviour, independent of and external to the human mind. This view is radically different from that of the relevance theorists, who are not concerned with text or discourse per se, “but rather discourse understanding, or more particularly, the mental representations and computations underlying utterance understanding” (Blakemore, 2001: 100-101). In other words, the object of study within a relevance-theoretic perspective is internal to the human mind.
Building on the work of Paul Grice (1961, 1989), Sperber & Wilson (1986/1995, 1987) have proposed a relevance-theoretic model of human communication, which stands opposed to the classical code model whereby information is encoded into a message, transmitted and decoded by another party, with another copy of the code. They argue that utterance interpretation is not achieved by identifying the semantically encoded meanings of sentences, but involves inferential computations performed over conceptual representations or propositions (Sperber & Wilson, 1986/1995). Utterance comprehension, in other words, involves a modular ability for ‘mind-reading’ (cfr. Crystal’s words in Cultus 6), a general metapsychological ability to inferentially attribute mental states or intentions to others on the basis of their behaviour.

The fundamental tenets of Relevance Theory (RT) are contained in a definition of relevance and two principles, one about cognition and the other about communication. In particular, the relevance-theoretic inferential account of communication is based on a central assumption about cognitive processes: human cognition is relevance oriented (Sperber & Wilson, 1986/1995, 1987). This assumption is to be found in what Sperber & Wilson call the Cognitive Principle of Relevance (Sperber & Wilson, 1986/1995: 260):

*Cognitive Principle of Relevance*: Human cognition tends to be geared to the maximisation of relevance.

What, then, is relevance? Sperber & Wilson define relevance as “a property of inputs to cognitive processes and analysed in terms of the notions of cognitive effect and processing effort” (Wilson, 2000: 423). Relevance is thus an improvement of one’s overall representation of the world and is seen as a matter of degree, i.e. the degree of relevance of an input to an individual is a trade-off or balance between cognitive effects (reward) and processing effort (cost). This is made clear by Sperber & Wilson (1986/1995: 252) in the following passage:

Relevance of an input to an individual

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8 Grice’s theory of meaning and communication follows the tradition of ordinary language philosophy (cf. 4.1.1) and has become a “landmark (…) on the path towards the development of a systematic, philosophically inspired pragmatic theory of language use” (Huang, 2007: 3).
a. Other things being equal, the greater the positive cognitive effects achieved by processing an input, the greater the relevance of the input to the individual at that time.

b. Other things being equal, the greater the processing effort expended, the lower the relevance of the input to the individual at that time.

Thus, the more cognitive effects the hearer is able to derive, the more relevant the information. In other words information is relevant for the hearer to the extent that it yields cognitive effects at low processing effort by interacting with and modifying her existing assumptions about the world.

Further, the very act of requesting the hearer’s attention encourages her to believe that the information given will be relevant enough to be worth processing. Hence, every act of communication creates an expectation that a hearer is entitled to have – namely, that the utterance is the most relevant one within the parameters of the speaker’s abilities and preferences (cf. second principle of relevance, Sperber & Wilson, 1986/1995: 260).

As regards discourse markers, Blakemore (2002) and Blass (1990) argue that they cannot be analysed as marking connections in discourse, whether these be connections between discourse segments, connections between the propositions expressed by discourse segments, or connections between social acts (contra Fraser, 1990; Mann & Thompson, 1987, 1988; Schiffrin, 1987). Instead, a distinction should be made between two ways in which linguistically encoded meaning can provide an input to inferential pragmatic processes. On the one hand, an expression may encode a constituent of a conceptual representation which undergoes conceptual computation, and on the other an expression may encode a constraint on the sort of inferential computation (conceptual meaning) a prepositional representation (procedural meaning) may enter into (cf. Blakemore, 2002; Wilson, 2011). Following this approach, some expressions which have been classified as discourse markers by some authors turn out to encode conceptual meaning (e.g. in contrast, in conclusion, to take an example). Others, including the ones I shall focus on in my analysis in Section 3, encode procedures; they activate the inferential processes involved in establishing the relevance of the utterance that contains them.
This framework has been used by a number of translation studies scholars (Blakemore & Gallai, 2014; Gutt, 1991/2000; Mason, 2004, 2006a, 2006b; Setton, 1998, 1999; Sperber & Wilson, 1986/1995) in an interlingual context in order to analyse translation and interpreting processes. In particular, Mason (2004, 2006a, 2006b) states that “a way forward in analyzing the pragmatics of dialogue interpreting might lie in using the evidence of actual responses (…) to trace the communication of meanings beyond what is said” (Mason, 2006: 366, emphasis in original). Further, he agrees with Gutt (1991/2000) that the concept of ‘interpretive resemblance’ can be used to describe dialogue interpreting and regards the principle of relevance as “applicable to the interpreted encounter as much as it is to any communicative event” (Mason, 2004: 365). In particular, the Cognitive Principle of Relevance is argued to be particularly adequate to account for interpreted events as interpreters “are constantly conscious of the need to be brief (efficient) and to-the-point (effective) because of the perception that their interventions hold up or lengthen the communication process” (Mason, 2006b: 109).

Thus, Mason argues that the pragmatic shifts involved in the interpreters’ renditions may be analysed as translational adjustments made in order to improve relevance; in other words, the interpreter is required to adjust his/her output in order to preserve the balance between contextual effects and processing effort.

In contrast with this approach to translation and interpreting as interlingual interpretive use, Blakemore & Gallai (2014) apply Blakemore’s (2009, 2010, 2011) account of discourse markers in free indirect style or thought (FIT) representations in fiction to data from interpreter-mediated police interviews where renditions include discourse markers added by the interpreter to develop an alternative relevance theoretic account. This allows us to reconcile the hearer’s impression that the interpreter’s voice is suppressed with research in interpreting studies which shows that interpreters are in reality both visible and active co-participants in these exchanges.

3. A two-pronged approach to analyse legal interpreting

As discussed in the previous Sections, due to the complex nature of legal interpreting, scholars in this field have embraced the principle of interdisciplinarity to a variable extent. Given that the main objective for
legal interpreting researchers is to explore the overall effect of interpreters on the interaction, I argue for a combined, two-pronged approach, proceeding from the broader levels of social context to the intricacies of cognitive processes. More specifically, I make a case for both socio-cultural/interactional and relevance-theoretic approaches to be adopted in legal interpreting research in order to relate micro-level analysis of participants’ utterances to the broader, macro-level issues of role and power distribution that have dominated discussion in interpreter-mediated communication.

On a macro-level, Wadensjö’s (1998) analysis of dialogue interpreting is based on Goffman’s influential concept of participation framework. This framework is used to explain the interactional aspects of police interpreting as an activity taking place in - and, simultaneously, shaping - a specific situation, and in particular to explain an individual’s involvement (or “status of participation”) in communicative interaction. Wadensjö’s model serves to account for the dynamic changes in the constellation of ‘speaker-hearer’ roles at utterance level and for the organisation of communicative interaction “through potentially changing alignments in the ongoing flow of discourse” (Wadensjö, 1998: 86). As highlighted in Section 1 and 2.1, this analysis in the context of interpreted police interviews has proved to be a useful analytical tool to explore the nature of the interpretation by looking at the appropriateness of particular renditions and the interpreter’s shifts in footing (e.g. Berk-Seligson, 2009; Nakane, 2007, 2008).

At the same time, I believe researchers should also focus on the mental processes underlying language use and adopt the relevance-theoretical approach to interpreting outlined in Section 2.2. In particular, this approach provides a framework which explains how discourse markers – or more generally expressive devices – are used as evidence of ‘voice’. In this framework Discourse markers can be treated as a means of discovering whose voice is heard in interpreter-mediated exchanges – the interpreter’s or the original speaker’s. This raises a methodological issue. According to Mason (2006b: 114) “in the absence of access to the interpreter’s thought processes” the researcher can show evidence of ostensive behaviour, yet they “can only suggest possible inferences, except where succeeding turns at talk provide evidence of actual take-up of particular meanings by participants”. This is a point which may also been made about Seleskovitch & Lederer’s (1984) interpretive model. I would argue that a researcher can gain access to ‘deverbalised’ (Lederer,
processing – which indeed takes place in a non-verbal cognitive state – by analysing the reconstituted form of the verbalised output after the re-expression stage. Thus, one of the aims of research should be to observe the legal interpreter’s sensitivity to the pragmatics expressed, how this is conveyed in the interpretation, and the likely outcome of the interpreter’s respective choices for the interaction.

To conclude, while both Goffman’s (1981) interactional framework and Sperber & Wilson’s cognitive framework have generated spirited debate, they have also resulted in insightful analyses. However, the question is whether one type of framework on its own can be taken as the basis for the complex, multi-dimensional phenomenon of (legal) interpreting, or whether it is possible to develop an analysis which encompasses both the cognitive and the social dimensions of communication. This, in turn, raises the question of whether it is at all possible to reconcile these two theories (and their account of human communication) in a unitary interdisciplinary framework.

3.1 Sub-personal and personal levels of explanation

In a relevance-theoretical perspective, context is defined as a set of contextual assumptions, which are propositional in nature and accessed by the hearer for use in pragmatic inference. Contextual assumptions may be about anything relevant (e.g. the hearer, cultural norms, general knowledge, etc.) and derived not just from the interpretation of the preceding utterance, but also from the hearer’s observation of the physical environment and from memory. However, it should not be assumed that these assumptions must be available to the hearer in advance of the utterance. On the contrary, it seems that they are made accessible by the utterance itself or, in other words, that they are identified as the result of interpreting the utterance (rather than a pre-requisite for its interpretation). As an illustration, let us consider example (40) from Blakemore (1992: 126):

(40) A: Do you like this music?
   B: I’ve never liked atonal music.

On the assumption that B’s reply is optimally relevant, the hearer will
access the assumption “the music we are listening is atonal” in order to
derive an optimally relevant answer to A’s question. This relevance-
theoretic, sub-personal definition of context differs significantly from
theories which analyse context at a personal level and, in particular, from
Goffman’s and Wadensjö’s interpersonal definition of context.

Goffman provides new insight into the nature of social interaction. Its
original motivation for the study of interaction is however “not about the
individual and his psychology, but rather the syntactical relations among
the acts of different persons mutually present to one another” (1967: 2; my
emphasis). In fact, Goffman’s dramaturgical theory suggests that a
person’s identity is not a stable and independent psychological entity;
rather, it is constantly remade as the person interacts with others.
Goffman’s (1963, 1981) notion of situation thus represents a layer of
context which is prior to language, but where a distinction is made
between merely and inherently situated factors. The parties to discourse
are seen to play a key role in such context and to sustain various degrees
of involvement in social practice.⁹

To sum up, relevance theorists view the notion of context as a
“psychological construct, a subset of the hearer’s assumptions about the
world” (Sperber & Wilson, 1986/1995: 15) which derive from memory,
perception, knowledge of the world, current discourse, etc. Therefore the
RT framework is heavily grounded in cognition and recognises “aspects of
the world, intentionalities and meaning in language only through evidence
of their mental representations” (Setton, 1999: 267). In contrast, in a
sociolinguistic perspective context is grounded in the nature of social (and
cultural) interaction rather than cognition. I wish to conclude by returning
to the main question which is the focus of this section: given that
Goffman’s approach to communication is a personal-level approach and
Sperber & Wilson’s approach aims for a sub-personal explanation, is there
any way in which they can be reconciled?

⁹ His distinction between unfocused and focused interaction clarifies this: the former refers to
mere situations, while the latter refers to settings (called “encounters”) in which the
participants share a common orientation. In focused interactions, Goffman further
explores the degree of intensity of involvement and the distribution of such involvement
amongst the interlocutors over time. This, in turn, led Goffman to distinguish among
contexts according to how they regulate involvement (i.e. modes of occupancy of
position) and the overall “tightness or looseness” of contexts (Goffman, 1963: 198-210).
In other words, the embedding of utterance production in such (social) contexts defines a
space of involvement among agents.
I believe there are multiple points of interface between the two theories discussed above. Firstly, both theories offer alternative models to the fundamental determinacy of linguistically encoded meaning and recognise that comprehension involves much more than the decoding of a linguistic signal; see, for instance, the linguistic underdeterminacy thesis or Goffman’s (1967) sociological notion of face as a the public self-image that every speaker wants to claim for themselves.

A parallel can also be drawn between the relevance-theoretic distinction between first-order informative intention and a higher-order (communicative) intention – the attribution of which is yielded by ostensive behaviour (Sperber & Wilson, 1986/1995; Wharton, 2008, 2009) - and Goffman’s notion of communication as intentional stage behaviour, whereby not all interactions are necessarily communicative (cf. the process of “dramatic realization” as in Goffman (1959); cf. also Mason, 2006a).

However different in scope and aims, the idea of a situated context, where speech incessantly transforms and adapts to situations, is nevertheless shared by both RT and Goffman. In particular, the common emphasis on mutual shared understanding and meaning led authors such as Pöchhacker (2004: 79) to remark on the “considerable shared ground between the DI paradigm and the cognitive-pragmatic approach” (Pöchhacker, 2004: 79). In other words, both theories take seriously the “real-time on-line nature” (Mason, 2006: 360) of communication and consider it as a process of joint negotiation of meanings among participants, and the context as a dynamic set of assumptions used by participants. The utterance is thus seen as embedded in a specific immediate communicative context, and language can only be analysed in the face-to-face immediacy of spoken encounters. For instance, Wadensjö (1992, 1998) defines Goffman’s (1981) notion of footing as a “person’s alignment (as speaker and hearer) to a particular utterance”, thus emphasising the simultaneity of ‘speakership’ and ‘listenership’ and implying that talk in face-to-face interaction is carried out and ‘created’ in parallel with listening (where listening may include overt verbal activity; cf. back-channelling).

It may be the case that a single model cannot provide a complete account of every aspect of communication - or, indeed, interpreting. The relevance-theoretical emphasis on context as mental representation can be argued to downplay features of context as a form of social interaction, or

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10 In relevance-theoretical terms, I refer to the idea that communication enlarges the mutual cognitive environment of the participants; for a definition, see Cartson (2002).
“socially constituted, interactively sustained (...) phenomenon” (Duranti & Goodwin, 1992: 6), where power relations are involved. These issues have been shown to assume varying degrees of importance in any kind of ‘discourse’, but are particularly important to explain aspects of interaction in dialogue (and, thus, legal) interpreting, which has been defined as a truly triadic event or “communicative pas de trois” (Wadensjö, 1998: 12). Mey (1993) argues that in abstracting away from the social factors which govern communication, RT has portrayed human beings as mindless automatons, instead of ‘social’ beings who interact in “pre-existing [socially determined] conditions” (Mey, 1993: 82).

However, as Blakemore (2002) points out, a theory which abstracts away from the socially determined conditions which affect interaction does not necessarily assume that people do not operate in socially determined conditions or that human assumptions or beliefs cannot be culturally or socially determined. The question raised by RT is whether one can have a personal-level explanation of communicative behaviour of people in socially determined conditions without first having a sub-personal explanation of the cognitive systems that enable people to behave in such conditions. Thus, one can argue that while it is true that “the social character and context of communication are (...) essential to the wider picture” (Sperber & Wilson, 1995: 279), it is also true that “in communicating in a social context people are enabled by various sub-personal systems – grammatical competence, an inferencing system, the visual system” (Blakemore, 2002: 8). In other words, communication in socially determined conditions as described by Goffman can be said to be enabled by a sub-personal inferencing system as described by RT.

3.2 Example of a two-pronged analysis

I will give two brief examples of this two-pronged analysis featuring intercultural issues and drawn from my corpus consisting of transcribed excerpts drawn from seven interpreter-mediated police interviews in the UK. Both examples deal with the investigation into the alleged murder of the suspects’ (Letícia and Antonio’s) daughter (Maria), initially thought to have died from a head injury following abusive head trauma (AHT) or inflicted traumatic brain injury, also known as “shaken baby/shaken impact syndrome” (or SBS). In particular, interviews 4 to 7 feature the suspects under arrest: After interviews 4 and 5, Letícia and Antonio are
bailed until interviews 6 and 7, which are in turn part of the “challenging phase”, where more direct questions are made on anomalies in their story recollections.\footnote{The investigation concluded with no charges after interviews 6 and 7.}

In both extracts the interpreter’s (I4’s) voice is not heard in that she gives ‘operational’ or accurate renditions of the discourse markers in the source text, thus acting as animator, i.e. the ‘default’ role of interpreter who is responsible only for the production of speech sounds and expected to maintain impartiality and accuracy, as stipulated by most Codes of Practice (see Katan 2015). Although they represent more the exception than the rule (especially in interviews involving I4), the category of operationally rendered discourse markers found in my corpus mirror the general trend in terms of frequency of discourse markers, which is in line with previous findings in Police studies (cf. Johnson, 2002; MacLeod, 2010). According to this trend, discourse markers such as so - activating particular types of contexts - are characterised by the highest correspondence rates, followed by procedural (generally adversative) elements such as but or however.

The first example includes the interpretation of the caution during the preliminary formalities of interview 5A (already mentioned in Section 1). The faithfulness of the rendition given by the interpreter in this case is a particularly significant issue for the interviewers. If this is not administered properly, it may undermine the legality of this or any subsequent suspect interview (see Gibbons, 2004: 133):

Extract 1 (interview 5A: utterances 59-70)

<p>| | | |</p>
<table>
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<th></th>
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<tbody>
<tr>
<td>59</td>
<td>P4</td>
<td>Okay (.) you are under caution</td>
</tr>
</tbody>
</table>
| 60 | I4 | È:: sotto:: al (.) l’avvertimento ((opens her arms outwards, perplexed))  
You are:: under:: the (.) the caution |
| 61 | P4 | You do not have to say anything |
| 62 | I4 | Non ha l’obbligo di rispondere  
You do not have to reply |
| 63 | P4 | But it may harm your defence |
| 64 | I4 | Ma potrebbe danneggiare la Sua difesa  
But it may harm your defence |
At this crucial stage of the police interview *Ma* (64) plays an important role in ensuring faithfulness. In particular, it eliminates an assumption assumed to have been derived from the preceding utterance (63), ensuring that the hearer (the interviewee) derives only those assumptions that are intended by the police officer. We can also observe that in this passage the interpreter’s terminology is sufficiently faithful to the original. First, the translation of legal terms such as “caution”, “questioned” and “given in evidence” is adapted to the source culture, highlighting the police interpreter’s essential role of a *cross-cultural bridge*, i.e. that of converting from one set of social and cultural norms and assumptions to another set. The adaptation to the source culture also occurs syntactically (cf. 66) and requires a ‘shift’ to ‘author’ on the side of the interpreter (Wadensjö 1998). This role corresponds to the one outlined by various authors (cf. Section 1) challenging the perspective of literalism on principal grounds and arguing for a redefinition of the legal interpreter as a more visible and accountable ‘communication facilitator’.

The second example features an operationally translated *so* at a later stage during the same interview (5A). More than an hour has gone by, and police officer (P4) is discussing with Antonio issues related to Letícia’s troubled pregnancy as well as his and his partner’s whereabouts before and after it:
An instantiation of an accurately translated discourse marker can be found in utterance 927. From a macro-perspective, it must be noticed that this time I4 steps out of her ‘animator’ role altogether (Wadensjö, 1998) and speaks on behalf of herself in line 933, thus assuming the role of a ‘principal’, which typically occurs when a need arises to coordinate the discourse in order to ensure effective communication or, more specifically, to prevent breakdown of communication. In particular, this is a case of potential cultural misunderstanding, whereby the judicious intervention by
the interpreter prevents the interview from becoming ‘bogged down’ in extraneous and irrelevant exchanges. Although I4 tends to interrupt the flow of the interlocutors’ especially Antonio’s speech very often (seemingly due to short memory), here I4 intervenes appropriately and justifiably to alert the police officer of a missed intercultural reference (Liguria) after being prompted by P4 himself (932). This shows her ability to simultaneously keep in mind production and reception formats and keep them separate (see Gavioli and Baraldi, this issue for other examples).

4. Conclusion

The topic of the legal interpreters’ role perceptions and expectations still dominate, and the controversy that Lang (1976) first discussed more than 30 years ago is still very much alive today. In the light of the authorities’ image of the legal interpreters’ role and awareness that “while competent interpreters greatly contribute to efficient legal processes, incompetent interpreting enhances the risk of a miscarriage of justice” (Colin & Morris, 1996: viii), a number of researchers from different disciplines have taken a closer look at interpreter-mediated interactions. In this paper, I have explored the question of whether the cognitive relevance-theoretic framework presented in Section 2 can be reconciled with the social, interactionist notions presented in Sections 1 and 2.1. Section 3.1 explores the tension resulting from the juxtaposition of cognitive-psychological relevance-theoretic and descriptive-social approaches to communication, and Section 3.2 shows that by examining my data at both macro- and micro-level it is possible to bring together the two frameworks in a theoretically adequate description of interpreted police interviews.

This integrated, two-fold model has proved to be a useful analytical tool to explore the complex and multi-faceted nature of interpreting, specifically to investigate the fluctuating asymmetries in operation between the discourse markers found in the source utterance and the interpreters’ rendition and the related interpreter’s shifts in footing during all phases of Enhanced Cognitive Interview. In particular, my analysis shows quite an

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12 The Enhanced Cognitive Interview (or ECI) is a well-known police interviewing method, which incorporates suitable environmental surroundings and communication techniques such as rapport, conversation and listening skills, and nonverbal behaviour such as gaze, intonation and hesitations (Kapardis, 2003: 87; Dando & Milne, 2009: 10).
extraordinary level of intervention and related footing shifts on the part of the interpreter, both as an ‘interpreter’, coordinator, and cultural mediator. Legal interpreters can be seen as a *culture broker co-structuring* the interaction by turn-taking initiatives, actively participating in meaning negotiation and topic management, and seeking to avoid a breakdown in communication. In particular, the need for the interpreter to make adjustments to ‘smooth over’ cultural differences (if not bridge a wide cultural gap) has been discussed for all domains of interpreting, essentially suggesting that the ‘ideal’ role of the interpreter is to serve not only as a linguistic but also as a cultural mediator.

In conclusion, this work demonstrates the usefulness of an interdisciplinary theoretical framework (and its underlying assumptions) in guiding the description and explanation of interpreted-mediated events both at the interactional and ‘internal’ level of cognitive processing. Further theoretical elaboration and refinement are needed, preferably exploring a different corpus and other language combinations. To proceed in the most rigorous way and in accordance with the final purposes of this paper, I have restricted the analysis to those turns within which a (procedural) discourse marker is uttered.

Overall, this theoretical framework aims both to describe and explain. It may therefore be used both as a blueprint for teaching and for new lines of enquiry. This ‘hybrid’ research paradigm can also provide a general conceptual framework for conducting research in other fields as varied as business and healthcare interpreting. Depending on the object of analysis, a collaborative project with other researchers would most certainly prove to be beneficial to explore the richness of mediated data as well as to the final interpretation of specific features.

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Interpreting internationalisation: Interlinguistic mediators in the Japanese organisational economy

Jeremy Breaden

Abstract

A large organisation is a complex economy of values, ideas and functions. The introduction of a new operational paradigm can generate further complexity and fresh opportunities for actors within the organisation to invest in different collective and individual agendas. Those equipped with skills which are privileged under the new paradigm are likely to perform crucial roles in both personifying and mediating the transformation of organisational culture which ensues. This paper scrutinises the place of interlinguistic mediators in these dynamics of organisational economy, through the lens of ‘internationalisation’ in Japan. Many large companies and educational institutions in Japan have recently adopted internationalisation as a central theme for organisational reform, pursuing strategies such as alignment with international standards and procedures, deployment of non-Japanese personnel and the use of languages other than Japanese in the workplace. Ethnographic analysis is used in this paper to explore the roles played by such interlinguistic mediators in giving concrete form to this internationalisation agenda and facilitating the organisational transactions of ideas and identities surrounding it. It is argued that a focus on mediators’ professional status and technical capacity as interlinguistic facilitators in the conventional sense tends to obscure the fact that they are also autonomous actors in the organisational economy with significant freedom to shape the processes of internationalisation which they exemplify.

1. Introduction

‘There are interpreters everywhere in Japan,’ an Australian professor recently reported to me after returning from his first visit to the country. He went on to describe how he had encountered interpreting services upon his arrival at Narita Airport, at his on-campus accommodation, at
the conference at which he gave a keynote address, in the meetings he attended with research collaborators, and in the bus on his obligatory sightseeing tour of Tokyo. Initially, I scoffed at his naivety: did he not realise that his observation was based entirely on his own status as a first-time international visitor with no Japanese language skills? It was only later that I realised that the professor had, in fact, hit the nail on the head. An abundance of interpreters is evidence of extensive impediments to mutual understanding—or at least a belief in such impediments among those commissioning the interpreters. The professor’s interpreters were not only assisting him to overcome linguistic and cultural differences, but also, through their very presence, reminding him and his interlocutors of the continued existence of those differences.

Interpreters are by no means ‘everywhere’ in Japan. Professional interpreters in the conventional sense are confined to orthodox workplaces such as international conferences and high-level diplomatic engagement. The use of interlinguistic and intercultural mediators in a broader sense, however, is widespread if not ubiquitous: walk into any Japanese organisation with an international dimension to its operations and you are sure to find ad hoc linguistic aides, bilingual paraprofessionals, in-house translation specialists, and any number of other vocational permutations. ‘Internationalisation’ is still often approached in binary terms as a task of rendering Japan visible and communicable to the rest of the world (and vice versa); linguistic boundaries inevitably loom large, and the work of bridging them is deeply embedded in the fabric of business, government and civil society.

In such circumstances, it is inconceivable that ‘intercultural’ considerations be divorced from the act of interlinguistic mediation. Mediators are the intercultural question. The linguistic transactions they manage are at the heart of the internationalisation processes to which their employers are committed. The problems of national cultural and linguistic identity raised in connection with internationalisation in Japan today, upon which I elaborate below, are distilled in the work of mediators. This makes mediators key actors in any organisational economy of internationalisation.

In this article I explore these ideas through a case study of interlinguistic mediators at work in a Japanese university. The article is not intended to propose a Japanese typology of interpreting or mediation. Its aim, a much more modest one, is to explore the positioning of mediators (which I employ as a blanket term of convenience rather than with any categorical intent) within the broader organisational economy of
internationalisation in Japan, and identify some questions and concerns that may be relevant to discussions of interlinguistic and intercultural work beyond the Japanese context. The article begins with a brief introduction to the concept of ‘organisational economy’ around which this analysis is framed, followed by a review of scholarly understandings of ‘internationalisation’ in contemporary Japanese discourse and practice, and the place of the English language within them.

2. Language and organisational economy

I use the term ‘organisational economy’ in this article after the seminal work of Philip Selznick (1948 and 1957) to focus attention on the availability of organisational resources and the dynamics of their sharing. The rational manipulation of organisational resources is the subject of the discipline of management. However, just as few centrally planned national economies ever function infallibly, organisational economies can rarely be administrated comprehensively. Stakeholders within the organisation exercise considerable agency, negotiating their own access to resources and creating markets beyond the scope of managerial authority. For example, an employee may seek, for her or his own purposes and regardless of the organisational objectives defined by management, to accumulate things such as goodwill, sympathy, recognition, and social status. This is achieved, at least in part, by the creative use and exchange of values, ideas, attributes and functions specific to what the organisation does. These transactions of social and cultural capital—like those involving the resources that are the primary interest of rational management, such as knowledge, technical expertise and manual aptitude—are enabled by the networks of people and processes that constitute the organisation.

These ‘cultural’ dimensions of organisations have long provided fertile ground for investigation not only by scholars of management and organisational behaviour, but also by cultural anthropologists and interpretive sociologists. It is beyond the scope of this article to address the vast range of theories linking culture and organisation, which range from appropriations of symbolic interactionism and ‘negotiated order’ to neo-institutional approaches (for a comprehensive overview, see Morrill, 2008). The salient point here is simply that individuals within an organisation are engaged in transactions involving both their functional
attributes and the symbols of cultural value to which they have access. In large organisations, this economy of functions and symbols is particularly complex. There is likely to be a diversity of operations, accessed differently by different actors within the organisation. The introduction of new goals and operational paradigms creates further complexity and new opportunities for actors to invest in different collective and individual agendas.

Language can be seen as both a currency and a commodity in the organisational economy. Different transactions may require the use of different languages and/or different specialist discourses within a single language. Where there is choice of two or more languages to use in any given situation, the choice may be based not only on the capabilities of the parties involved, but also on a desire or reluctance to involve other parties, or an understanding of the language’s symbolic relationship to the subject matter. Languages can carry certain ideologies, and contests between ideologies can be drawn along language lines. As explained below, English in Japan is often linked to cosmopolitanism and an affirmative outlook on globalisation; by mandating the use of English at work, an organisation may be declaring that its future lies beyond Japan; an employee’s reluctance to use English may be a symbolic rejection of such a declaration.

We can hypothesise that interlinguistic mediators will be crucial to any such organisational economy. Aside from their immediate facilitative function, mediators have access to a wider range of symbols and discourses than their less linguistically agile co-workers, and a capacity to embody the different agendas aligned with the languages they use. Where an organisational dispute is drawn along language lines, mediators can actually personify the issue at stake. In this sense, mediators are inherently and inescapably ‘intercultural’ agents.

3. Social and organisational context

Before proceeding to test the above hypothesis in a specific organisational setting, some broad contextualisation is necessary. Japanese-English linguistic mediators in Japan operate in a distinctive (but far from unique) cultural milieu, the salient features of which are the prominence of ‘internationalisation’ as a discursive and practical theme, and the significance of the English language within this theme. Each of these
contextual elements is outlined below. A good deal of detail has been foregone for the sake of brevity; readers are thus encouraged to treat the following as a mere snapshot, not a complete and authoritative depiction of the issues at hand.

*Internationalisation and English in Japan*

‘Internationalisation’ (*kokusaika*) is a perennial theme in Japanese government policy across many fields including education, business, health and welfare, and the legal system, and has been an ongoing subject of critical analysis by scholars of contemporary Japanese society and culture for the past three decades at least (see, for example, Mannari and Befu, 1983; Hook and Weiner, 1992; Breaden, Steele, and Stevens, 2014). There are numerous competing definitions of ‘internationalisation’ and copious debate concerning both its precise subject matter and underlying motives. In most cases, however, the premise is quite simple: there is a need to reform Japanese organisations, systems, and society as a whole to make them more open to and compatible with the rest of the world. For many countries today, this theme is so self-evident that it requires no articulation. This is not the case in Japan. While it would be manifestly inaccurate to characterise Japan as a mono-lingual, mono-cultural society, it is possible to generalise a comparatively high degree of mainstream linguistic and cultural homogeneity, deriving from a long period of geopolitical isolation and the subsequent absence of the kind of large-scale immigration or multiculturalisation experienced by many other societies in the contemporary era. One of the products of these conditions is an overt preoccupation with Japanese identity in an international perspective. Internationalisation is commonly conceived not as a process of integration or blending, but rather as a dialogue between an essentialised ‘Japan’ and an ‘outside world’ usually represented, for historical reasons, by North America and Europe (Befu, 2001; Clammer, 2001).

This conception has not been diminished by the onset of globalisation across all areas of economic and social life; rather, it has been reaffirmed by the positioning of internationalisation in government policy and institutional action as a coordinated approach to strengthening Japan in response to globalising trends. Internationalisation has grown into a buzzword that creates precisely the kind of ‘buzz’ which, in other situations, it is designed to eliminate: a strong sense of exclusive national identity and cultural particularity. This outcome is exemplified in many
areas of government policy, from migrant support initiatives which emphasise ‘mutual co-existence’ rather than acceptance and integration, to ‘intercultural awareness’ education that actually cultivates a stronger sense of Japanese national identity (see, for example, Aiden, 2011; Rivers, 2014; Tsuneyoshi, 2004).

As is the case in many other non-Anglophone societies, internationalisation in Japan is inextricably linked with the use of the English language. English was a key tool in Japan’s modernisation; it was the language of the victorious occupying powers after World War Two; and it is now the default language of international engagement for Japanese government, business, and cultural production. To internationalise inevitably demands that individuals, organisations, and indeed the entire society, embrace English as the language of the future. The prominence of English language in national education policy has been growing continuously over the past two decades, and corporations, universities, and many other public institutions are increasingly adopting English as a language of day-to-day operation (Seargeant, 2011). Many critics dismiss these moves as a simplistic conflation of English and international connectedness, but even the most vocal sceptics do acknowledge that English-isation is an inescapable concomitant of internationalisation as it is currently conceived in Japan (Hashimoto, 2000; Igarashi and Saito, 2014; Seargeant, 2009). One practical result is that speaking English is a distinctly ambiguous form of cultural capital in Japan. Fluency in English promises enhanced employment prospects and social prestige, but also marginalisation through association with the foreign ‘other’ to which Japan is supposedly responding through internationalisation. English speakers are carriers of powerful messages about progress and opportunity, but these messages are juxtaposed with a discourse of particularism which quarantines the supposedly ‘unique’ Japanese cultural essence from the influence of English and the globalist discourse which it carries.

Linguistic mediation is never purely about ‘language’. The specific case of mediation between Japanese and English in Japan calls into play a particularly broad and powerful range of ideological factors. The hypothesis arising from the foregoing analysis, therefore, is that linguistic mediators in internationalising Japanese organisations are likely to be empowered through both their mastery of English in a bilingual environment and their access to the broader symbolic value of that language. Furthermore, their direct involvement in the practical processes
of ‘internationalisation’ in their organisations offers opportunities to mediate the meanings associated with those processes. Potentially, linguistic mediators are both conduits and embodiments of internationalising forces.

**The ‘internationalising’ Japanese university**

One field in which the agenda of internationalisation is most visible in Japan today is higher education. The movement which in Europe has been termed Internationalisation at Home is now sweeping university campuses in Japan. Tasks such as boosting student and staff diversity, strengthening international partnerships, and establishing English-medium educational programs have become major priorities for universities across the country (Ota, 2014; Yonezawa, 2014). Reflecting the multivocal nature of internationalisation more broadly, the justifications for such moves vary significantly across different universities. For some, the aim is to boost domestic prestige by borrowing the positive connotations of internationality in Japanese society; others seek new markets for their educational services; others are eyeing the large pool of public funds now set aside to support international programs (Goodman, 2007; Breaden and Goodman, 2014). All these motivations are framed, of course, by the abovementioned ambivalence concerning Japan’s engagement with the globalised world, making internationalisation a potent yet ambiguous process.

Campus internationalisation is accompanied by major changes in work organisation and functions. While almost all Japanese universities have engaged in some international collaborations and student mobility programs in the past, most are embarking on large-scale, across-the-board internationalisation for the first time. Such activity is beyond the traditional scope of university operations, and thus requires alteration of governance structures, investments in new resources and mobilisation of previously underutilised human capital (Yonezawa and Shimmi, 2015). The surge in interlinguistic (overwhelmingly, Japanese-English) activity, in particular, has created significant demand for mediation between Japanese-speaking university administrators and non-Japanese speaking staff and external stakeholders, in areas including international student recruitment and admissions, institutional partnerships, and personnel affairs. The presence of mediators is strategic in the sense that it is linked directly to the organisational strategy of internationalisation which, as above, is in turn
aligned with current socio-political trends in Japan. As demonstrated in the analysis that follows, this strategic identity is crucial to mediators’ status and function in the organisation.

4. Mediators at work in the Japanese organisational economy

In the following pages, I explore the ideas introduced above through a case study of mediators in one Japanese university which has embraced ‘internationalisation’ as its primary operational focus. I have sought to engage with the mediators ethnographically; that is, to make sense of them on their own terms, through direct observation and extended interviews. The analysis that follows is therefore not based on methodical scrutiny of specific interlinguistic transactions using a single frame of analysis; it is a product of open-ended, qualitative interaction with the field site as a whole. The analysis begins with some general remarks on the nature of mediatory work in the organisation, followed by a discussion of attitudes to this work articulated by those actually involved in it. The aim is not to build a typology of the roles of mediators, but rather to highlight indigenous understandings of their contribution to organisational dynamics.

As part of its programme of internationalisation, the university in question has adopted English as an official in-house language alongside Japanese. Meetings are conducted and documentation produced in both languages, and there is no requirement for non-Japanese constituents, who account for close to 40 percent of both the staff and student bodies, to speak Japanese. The university describes this arrangement realistically not as ‘bilingual’ but as a ‘dual-language system’, reflecting the fact that it operates within broader monolingual conditions both on campus – most of the university’s faculty and staff are only fluent in one of the two official languages – and in wider society – which is monolingual both officially and, overwhelmingly, in practical terms as well. Mediators between Japanese and English are manifestly crucial to the day-to-day functioning of such a system.

The mediators are employed as part of the university’s administrative staff. Some have been employed previously and seconded to new roles to make use of their linguistic proficiencies; more often than not, however, they have been newly recruited from outside the university for the express purpose of engaging in tasks such as international marketing and
admissions, research liaison and international student support. Some are Japanese nationals; others are foreign nationals with extensive periods of residence in Japan. They all have native or near-native proficiency in both English and Japanese, as well as extensive intercultural experience. Very few, however, have had formal training in interpreting or translation beyond that which formed part of their regular study of the target language. Reflecting this lack of professional credentials, the mediators are rarely given the title of ‘interpreter’ or ‘translator’; it is most common to refer to them as ‘specialists’ (senmonshoku). In almost all cases they are employed on a fixed-term contractual basis rather than under the permanent employment arrangements applied to general administrative and academic staff. The contract period is usually one year, renewable up to four times. Each mediator is assigned to a specific office or department. There is no centralised organ such as an ‘interpreting/translation centre’ to oversee and coordinate their work; they report to the general manager of the office with which they are affiliated. There is thus considerable ambiguity in the mediators’ professional status: they are embedded in their workplaces and unmistakeably part of the university’s administrative system, but also distinguished from the organisational mainstream by virtue of both their limited-term, disposable employment status and by their labelling as ‘specialists’ in international work.

Distinguishing mediatory work

Mediators engage in a broad range of activities involving linguistic mediation between non-Japanese speakers (including overseas partners and collaborators, non-Japanese faculty and international students) on the one hand, and Japanese-speaking university administrators on the other. Mediation acts can range from simple facilitation, such as consecutive interpreting, to management of the entire transaction. Notably, mediators often appear to access this full repertoire within the context of a single transaction, monitoring and evaluating the interaction to determine the appropriate level of intervention in each case. For example:

If I think [the parties to the conversation] are making sense to each other, I just interpret mechanically, but if things get confusing I tend to take over and explain what I think they should be doing. (Mediator A: Male, North American, employed for 4 years)

Straight interpreting doesn’t always work so well. Sometimes I have more experience [in the work being discussed] than they [the parties] do.
Then, rather than interpreting, my role is to explain how to get it done, bilingually. *(Mediator B: Female, Australian, 3 years)*

Mediators’ preferred roles can also change over time.

I used to try and interfere, but it’s just too stressful. I now just try to stay as hands-off as possible . . . *(Mediator C: Male, North American, 2 years)*

It’s so frustrating to be just a go-between when you’re also more of an expert than the people you’re interpreting for. These days I don’t even try to hide my expertise. I do whatever I can to get the job done, rather than just helping others do what they think is needed. *(Mediator D: Female, Japanese, 5 years)*

Mediators thus move both up and down Jalbert’s cline of interpreter roles (Jalbert 1998, as cited in Leanza 2007, pp.13-14), from simple facilitator to advocate to bilingual professional, and in the opposite direction. They appear to be largely free to determine their own location on the spectrum at any given time.

A further observation is that no clear division is made between linguistic mediation and other aspects of mediators’ work. For example, one mediator may be a member of a departmental committee and also interpret informally for other committee members at meetings; another may translate an institutional partnership agreement which she has helped to draft in the source language.

I don’t know what you mean by distinguishing [between interpreting and other work duties]. That’s impossible, because I need to do some interpreting in all of my work. There are people who need to understand what’s going on and it’s easier for me to do my job if I help them understand. *(Mediator B)*

Moreover, mediation is rarely a stand-alone event: it is routinely preceded and followed by extensive contextualisation. For example, mediators are often drawn into the process of garnering informal support for a proposal before it is tabled in a formal venue (a process termed *nemawashi* in Japanese), when they are consulted regarding strategies for approaching key non-Japanese-speaking stakeholders. They are also involved in the informal wrap-up and reflection activities (*hansei*) which inevitably follow major events and important meetings. Mediators appear to view this extra-
linguistic work as essential to their success as mediators, rather than constituting any compromise on the integrity of their work.

Managers often take me out for drinks after a big day and sound their ideas and impressions. ‘Do you think it went well today?’ ‘How could we have handled that situation better? Is that how it’s done in the UK?’ and so on. (Mediator E: Male, British, 5 years)

Non-Japanese-speaking professors approach me after a meeting to talk about what went on and sometimes to argue a point which didn’t get attention during the meeting. I used to tell them, ‘I can’t help you, I’m just the interpreter’, but now I realise that sometimes I’m the only person on the administration side who they can talk to. So I have a responsibility to listen to them, educate them, and do what I can to help them out. (Mediator A)

In the course of fieldwork, I observed many other examples of informal editorialising by mediators, ranging from requesting that a Vice-President remove Japan-specific cultural references from a speech before presenting it to an audience abroad, to prefacing interpreted content with explanation of the speaker’s background and expertise—unbeknownst to the speaker. In all these instances, the mediators were perceived as competent to provide expert commentary on the progress of internationalisation-related activities. The perception derives, I would suggest, from the position of English as an essential component of ‘internationalisation’ rather than merely an adjunct thereto. When they are interpreting, mediators are enacting, not just facilitating, internationalisation. This enactment in turn entitles them to expert status in other (non-linguistic) aspects of international work.

Involvement in mediatory acts therefore extends the influence of bilingual workers considerably. It lends weight to their opinions and grants additional exposure to their ideas. Many of these extended mediatory functions are performed in informal spaces outside the formal organisational ambit; they are rarely apprehended as subjects of managerial attention. Managers’ own perceptions of this fact varied considerably. Some were clearly troubled, even distrustful:

We’ve set up a system in which some of the key people running the university are excluded from what goes on in it because they don’t have the language skills. Yes, there are people who speak both languages who can interpret for us, but we can’t ‘manage’ them either. It seems they spend more of their time talking with English speakers than interpreting
for non-English speakers. Their role is really unclear. *(Administrator A: Male, Japanese, 8 years)*

Others were far more sanguine:

Of course people are going to do things we don’t know about, they’re going to say things behind people’s backs. Gossip is the oil that lubricates the organisation. If we start poking around we’ll only tire ourselves out. I think it’s great that we have in-house interpreters who are so much a part of our system. If we outsourced, we’d never get the same depth of knowledge. *(Administrator B: Male, Japanese, 4 years)*

**Visibility of mediators**

The lack of functional distinction between mediation and other aspects of work, and the extensive informal interventions which accompany mediation, have the effect of embedding mediation heavily within organisational processes. This embeddedness is accompanied, perhaps counter-intuitively, by a high degree of visibility for mediators.

I can’t imagine a faculty meeting without an interpreter. It’s just part of the way we work. Interpreters get centre stage. They talk more than anyone, and they are the only people in the room authorised to interrupt the Dean in mid-sentence! *(Administrator B)*

Now that we’ve set up a bilingual system for running the university, we have to accept that they [mediators] are always going to be essential. Until all of us become bilingual, at least . . . Having to interact via interpreters is actually good training for us in understanding cultural differences. It gives us an international mind-set, and keeps us alert to any other kinds of misunderstandings which may occur when dealing with non-Japanese counterparts. *(Administrator C: Female, Japanese, 5 years)*

The combination of high visibility and importance in day-to-day activities thus fosters an assumption that linguistic mediation is both intrinsic and inseparable from international work. Linguistic and cultural impediments are understood as part of the basic infrastructure of internationalisation. The high-profile presence of mediators in the workplace enables the organisation to overcome these impediments, while also rationalising their continued existence. In this sense, the act of linguistic mediation becomes self-justifying. This observation resonates with the aforementioned critique of internationalisation in Japan as more concerned with elevating
consciousness of borders than it is with erasing them. Foreignisation, not domestication, is the assumed outcome.

This arrangement also runs contrary to the conventional relationship between involvement and visibility in mediation. In regular typologies, the degree of visibility of mediators is commensurate with their degree of involvement in the transaction: simple interpreting is a lower-visibility act, for example, than advocacy. In the organisational culture described above, interlingual transactions constitute a ritualised component of internationalisation itself, and the mediators to such transactions are therefore highly visible even when they are ‘simply’ interpreting. If they were not, the ritual would lose its potency.

**Mediators’ proficiency**

The general consensus among organisational constituents is therefore that mediators are essential to international work. They enjoy a wide mandate to regulate the scope of their own mediatory work, and their opinions appear to hold considerable weight. But what of their actual skill as interpreters? The relationship between mediators’ authority as agents of internationalisation and their interlinguistic proficiency is a complex one.

When confronted with questions regarding the proficiency of the mediators with whom they worked, most staff members appeared nonplussed; they had given very little thought to what actually the mediators were supposed to be doing. Both linguistic proficiency and organisational/cultural knowledge were cited as important, but the connections between these two were far from uniform. Non-Japanese speakers’ assessments typically took the following form:

"[The mediator] is my window into the university administration. For me, Japanese is like there’s a curtain drawn over the window: I can’t see in. She [the mediator] can pull the curtain aside for me, at least so I can get a glimpse. She can also tell me what’s inside and what it means, because there’s no curtain for her, of course: she’s an expert. The aim for me is to tear down the curtain eventually... the sooner the better." *(Faculty member A: Male, North American, 2 years)*

For informants such as this one, mediators’ capacity to transcend linguistic barriers (i.e., to speak Japanese) establishes them as ‘experts’ in their job. The Japanese language itself is perceived as the fundamental dividing line
between status as an organisational outsider and an insider. Japanese speakers not fluent in English, however, often perceived mediators as far less proficient.

I understand that she [the same mediator as above] is good at speaking Japanese. But she needs to work harder on understanding our university. She uses a lot of terms that are more suited to the corporate world, and doesn’t seem to understand the way academics communicate. But certainly she’s very good at explaining things to English speakers, like how we run meetings and how they need to teach in a certain way. To internationalise further, we need more people like her. (Administrator A)

Here, the mediator’s incapacity to grasp specific organisational discourse in Japanese makes her appear less competent. When speaking in English, however, she is assumed to be something of an expert on internal operations. Again, the association between proficiency in English and internationalisation is strong, and appears to compensate for organisational illiteracy signalled by the mediator’s performance in Japanese.

These differences in perception are less closely related to mediators’ actual proficiency than to each informant’s outlook on the university and its approach to internationalisation. The first informant represents a constituency of organisational newcomers, engaged in a process of making sense of the university from the outside in. The further internationalisation, or at least English-isation, progresses, the more empowered this constituency will become. The latter is from a constituency of insiders, with extensive social capital and cultural literacy within the university. For them, the key question may be how to preserve these vested attributes in the face of the new operational paradigm of internationalisation. They see the mediator as able to assist in this task of preservation by ‘explaining things’ about how the university currently operates. Ideally for this constituency, internationalisation will be confined to this kind of explication, rather than any fundamental modification or reorientation. By acting as a cultural informant in both directions, the mediator supports the interests of both constituencies simultaneously. A final comment from one of the university’s most experienced mediators encapsulates this duality:

The university says it’s trying to be ‘international’, but that’s very ambiguous. Do they mean more international than other Japanese
universities, able to just cope somehow with diversity on campus while still using Japanese? Or do they mean they want to reform their domestic mind-set completely? I don’t know. But maybe it’s people like me who need to decide the answer to that question. (Mediator D)

5. Conclusions

In the internationalising organisational economy examined in this article, interlinguistic mediators are omnipresent and multifunctional. The starting point here is the dominant Japanese construction of ‘internationalisation’ as inter-national: the nation-state of Japan and its mainstream cultural and linguistic attributes constitute the primary subject, one that is not eroded but rather fortified by a self-conscious, premeditated process of engagement with the outside world. By mediating transactions between the national language, Japanese, and its stereotypical ‘international’ counterpart, English, mediators both expedite and embody internationalisation. In an organisational setting, this Japan/Other dynamic is replicated in the re-negotiation of pre-existing organisational parameters (Japanese) to fit the new operational imperatives of international engagement (Other), which, once again, is reduced to a binary equation by its enactment through the medium of Japanese and English languages. In such a setting, mediators are inevitably positioned not only as facilitators of communication, but as dealers in conflicting cultural paradigms. What, then, of the ‘intercultural question’? Indigenous understandings of mediation make no necessary distinction between what is ‘cultural’ and what is not. The organisational dynamics of internationalisation provide an all-pervading context. Not only the practical content but indeed the very existence of interlinguistic mediation is part of this context, and mediators are therefore valorised as curators of the internationalisation agenda. Mediators can choose how much control they wish to take over this agenda, but they cannot disavow it entirely. A similar example may be the role of IT technicians in an organisation embarking on a major technological upgrade. Such technicians are custodians and exemplars of the technology itself: it would be patently artificial to characterise them as mere disinterested facilitators, regardless of the actual content of the work they undertake. The ongoing scholarly interest in the roles of interpreters often focuses on the degree of involvement in coordinating or managing communication (see, for example, Angelelli, 2004; Foley, 2006; Pöchhacker & Shlesinger, 2007;
Wadensjö, 1998; papers in this volume). Here, we have a case where involvement is in fact antecedent to participation in any specific communicative event. The social and organisational context ‘involves’ the mediators regardless of how they approach their roles in practice.

In these circumstances, relationships between technical competence and authority and between objectivity and subjectivity become blurred, and it is difficult to formulate clear recommendations on how mediators should conduct themselves as professionals. It is perhaps preferable, therefore, not to particularise mediatory work, but rather to re-envisage mediators as part of the broader dialogue between organisational capital (an organisation’s capacity to change in order to secure its future - in this case, to ‘internationalise’) and cultural capital (individual attributes that facilitate workers’ success in the organisation – in this case, linguistic proficiency) that encompasses all members of an organisation undergoing cultural change in any form. Such a suggestion may be a perverse way to conclude an article that purports to analyse mediators as a distinct and indeed anomalous occupational category, but perhaps it is sometimes useful to admit that mediators are not exceptional, they are ordinary; and that is what makes them important.

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GUIDELINES FOR CONTRIBUTORS

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