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Editorial: The Voice of Interpreter Educators

George Major and Ineke Crezee, Co-Editors¹

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A recent (19 October) headline in the *Guardian* read: “Humanities research: groundbreaking, life-changing but ignored” (Busl, 2015). In this issue, we argue for interpreter educators to have a stronger voice in society, in policy and in the media, through research dissemination and engaging in discussion and debate. This is a theme that we are probably all very aware of, and of which many of us undoubtedly strive to achieve in our everyday professional lives. At a time when Europe is facing its biggest influx of migrants and refugees to date, however, it seems very appropriate for the *International Journal of Interpreter Education* to revisit and highlight the need to make interpreting research findings applicable to interpreter education, professional and personal development and society at large.

Several contributors to the volume (Lee and Choi, Salaets and Balogh, and Verstraete) mention the common misconception that anyone who knows two languages can interpret, and the implications this can have for policy and (lack of) targeted interpreter education. It is precisely interpreter educators and researchers (and practitioners and consumers too) who need to educate policy makers of the need for trained interpreters. This is a particularly pertinent issue for rare languages such as refugee languages, which are often classed as languages of limited (or ‘lesser’) diffusion (LLDs; Slatyer, 2006), a term which can refer to both signed and spoken languages. LLDs are often used by small and geographically-dispersed communities, and in the case of refugee languages, may have also had the status of minority language in their original country (e.g., languages such as Hmong, Chin, Karen, and Rohingya). This status may have resulted in them not having been used in a wide range of domains (Fishman, 1999; see also Salaets & Balogh, this volume), meaning that technical terminology (e.g. health terminology) can be underdeveloped (e.g., Johnston & Napier, 2010; Major, Napier, Ferrara, & Johnston, 2012), which can pose particular challenges for interpreter education.

At our Translation and Interpreting programme at Auckland University of Technology in New Zealand, we have been running ‘language neutral’ programmes for spoken language interpreting students since the early 1990s, and as such we are very aware of some of the pedagogical issues involved in training much-needed interpreters of rare languages. However, such an undertaking also has a unique set of challenges, particularly around assessing practical skills and addressing the limitations of a ‘one size fits all’ approach, for example, with students from majority languages and those from LLDs working together in technical domains. We are constantly trying to improve our pedagogical practices as we build on past experience. Such is the need for interpreters in LLD in New Zealand that several government departments have decided to work with our university in offering rare-language interpreter scholarships to meet that demand.

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Editorial

World events such as the unfolding refugee crisis—which is inextricably tied to the need for skilled professional interpreters—certainly remind us when it is time to take stock of where we are, and where we might need to be headed. To this end, the current volume of *IJIE* offers a thought-provoking mix of papers from both signed- and spoken-language interpreter educators and researchers, from the USA, Australia, South Korea, and Belgium. We begin with two research articles, both of which have broad relevance to educators and practitioners working in many different areas. We then move on to commentary and open forum contributions, which continue the important focus of this journal as a forum for interpreter educators, researchers, practitioners and consumers to exchange ideas and reflect on the work we do.

Previous work by interpreting researchers (Bancroft, 2013; Bontempo & Malcolm, 2012; Crezee, Atkinson, Pask, Wong & Au, 2015; Heydon, & Mulayim, 2015) has shown that vicarious trauma (VT) is an oft-encountered element of our work that needs to be recognized so educators, interpreters and service providers can address it. In the first research article of this volume, Michael Harvey builds on his long experience as a therapist, moving the discussion beyond the obvious need for interpreters to engage in self-care toward ways we might actually benefit from such traumatic experiences. Harvey's article thus illustrates a mode of inquiry which may allow VT to become a catalyst for growth and personal development for those affected by it. His approach can be implemented in professional development, interpreter education, mentoring or supervision and debriefing, and is particularly timely in regard to world events; it also links closely to several other contributions in this volume that describe interpreting in potentially traumatising settings.

Jim Hlavac then provides a systematic comparison of the standards for certification (as well as training and/or testing) of community interpreters in four countries: Australia, Canada, Norway and the UK. The features of each system are analysed and discussed in relation to the recently released ISO Guidelines for Community Interpreting, with a focus on the range of skills required by different credentialing systems and implications of shifting trends within those systems. Hlavac's contribution provides a timely 'stocktake' of sorts, especially in light of the urgent need for professional interpreting services that several contributors in this volume highlight.

The Commentary section offers two papers that again focus on the interface between interpreter education and the reality of interpreting practice and societal needs. Relating closely to Hlavac's analysis of credentialing systems, Jieun Lee and Moonsun Choi describe the South Korean government's response to the need for interpreter education in rare languages, particularly in relation to asylum seekers. Lee and Choi describe the need for prescreening and assessment of basic interpreting skills, and propose a framework for developing interpreting skills for speakers of these languages in South Korea. Their framework could be adapted by interpreter educators and policy makers in other countries working with LLDs.

Brenda Nicodemus, Janis Cole and Laurie Swabey describe how we can draw on the narratives of experienced interpreter practitioners to help students in the classroom learn and reflect on the skills that they will need to develop as practitioners. This includes ethical decision making, in addition to linguistic and cultural competencies. Their open and innovative approach involved educators and students sharing ideas and constructing learning together. The paper provides a practical guide for other educators wishing to implement this approach in their classrooms, and is an excellent example of drawing on the community of practitioners to help develop the community of learners. Although it focuses on signed language interpreting it will no doubt have much broader relevance to spoken language interpreting and translation also.

Our Open Forum section features two contributions from traditionally multilingual and multicultural Belgium. In their opinion piece, Heidi Salaets and Katalin Balogh, educators and researchers at the University of Leuven, call for policy makers to implement the findings of interpreter education studies to meet newly arrived migrants' and refugees' urgent need for language access. The interview with Filip Verstraete adds the perspective of a consumer of interpreting services who has been advocating for language access for the Deaf community in Flanders, Belgium, ever since he was a young adult.

We also continue our Dissertation Abstracts section, so that readers can keep up to date with the latest doctoral and master's research theses that are of direct relevance to interpreter education. In this volume, the four abstracts all relate to ASL interpreting. We enjoy giving new and emerging researchers the opportunity to share their work with the readership of this journal and encourage graduates and supervisors to keep us informed as to interesting dissertation summaries for us to feature in future volumes.

We would like to remind our readers that we have a rolling call for manuscripts and we encourage those working in interpreter education to send in submissions, be they evidence-based research articles, book reviews, (ideas for) interviews, commentary pieces or summaries of dissertations.

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Does the refugee crisis and the increased need for interpreters of LLDs imply a shift away from the traditional focus on language-specific interpreter education? We would welcome contributions to this discussion for future volumes. Another interesting area for a future themed volume might be the benefits of digital technology for interpreter education and professional development. In fact, the 2015 InDialog conference on community interpreting involves presentations on the implementation of technology in interpreting and interpreting education; the 2016 Critical Link 8 conference has also called for presentations on similar themes. The 2013 InterpretAmerica Summit focused on the need for interpreters to make social media work for them professionally, and this is another topic on which we would welcome submissions. Please note, however, that these are *ideas* for future themed volumes and not restrictions; we welcome any submissions that have clear relevance to interpreter education.

This issue of *IJIE* combines many contributions which emphasize the exchange between interpreter education research and society: both the need for educators to draw on real life experiences and the need for society to sit up and take notice of the findings of research on and relating to interpreter education. We need to keep pushing the voice(s) of interpreter educators in the media and in policy making. To cite again from that powerful article in the Guardian:

Humanities research teaches us about the world beyond the classroom, and beyond a job. . . .
Humanities scholars need to take what feels—right now—like a risk, and engage in more public scholarship. (Busl, 2015)

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Reaping the Benefits of Vicarious Trauma

Michael Harvey¹

Abstract

This article illustrates a mode of inquiry for reaping the benefits of experiencing vicarious trauma that can be utilized in interpreter education, mentoring and supervisory relationships, debriefing, and personal reflection. An adaptation of constructivist self-development theory and a narrative therapy approach are described. The latter approach includes the uncovering of what is absent but implicit, the uncovering of actions reflective of one's personal agency, the relevant skills that one utilizes, and the social/relational history of these skills. Mitigating the risks and reaping the benefits of vicarious trauma may catalyze significant professional and personal growth such as clarification of values, self-identity, and skills, and provide interpreters with the essential fuel to sustain their passion for the work they do and the lives they live.

Keywords: vicarious trauma, interpreters, benefits, narrative therapy, Constructivist Self-Development Theory

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1. Introduction

Trauma is contagious. The high prevalence of trauma and oppression for Deaf persons has been well documented (Tate, 2012). And those who bear witness to trauma, such as interpreters, may experience *vicarious trauma*: the transformation of one's inner experience as a result of empathetic engagement with another's distress (Andert & Trites, 2014; Barrington & Shakespeare-Finch, 2014; Bontempo & Malcolm, 2012; Hetherington, 2012; Lai, Heydon, & Mulayim, 2015; Moulden & Firestone, 2007; Røkenes, 1992; Saakvitne & Pearlman, 1996). Simply put, when we open our hearts to someone in emotional pain, we are changed. In one interpreter's words, "I felt as if I had been attacked, too."

In previous publications (Harvey, 2001, 2003), I described common psychological dynamics that catalyze vicarious trauma and coping strategies for sign language interpreters. The present article provides further illustrations of these effects and a mode of inquiry that can be utilized in interpreter mentoring relationships for reaping *benefits* of experiencing one's own vicarious trauma as well as that of one's peers. Although there are several factors in interpreting situations that cause stress and trauma (Dean & Pollard, 2005), the specific focus of this article is the effects of witnessing perceived *oppression*. The conclusions are based on my perspective as a clinical psychologist; 14 structured interviews that I and an interpreter, Pamela Gunther, conducted; and 81 interpreter responses to a longitudinal survey (2000 to present) that I have posted on <http://www.michaelharvey-phd.com>. The protocol begins with the following request:

If you'd be willing, would you think back to some interpreting situation in which you felt that a hearing person somehow oppressed a Deaf consumer? It can be significant oppression or not significant oppression; anything that kind of got under your skin as you observed the event. Please describe that interpreting situation and give as many details as possible.

Table 1: Survey participant demographics

Characteristic	<i>n</i>
Gender	
Female	73
Male	8
Religion	
Protestant	29
Christian	23
Catholic	15
Jewish	11
Jehovah's Witness	2
Quaker	1
Race	
Caucasian	75
African American	6
Age	
21–30	16
31–40	27
41–50	33
51–60	5

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Table 2. Interpreting context

Context	<i>n</i>
Work	
Private practice	52
School	12
Agency	10
Mental health clinic	7
Situation	
Work	18
School	17
Out-patient treatment	15
In-patient treatment	13
Community	7
Other	4
Court	3

One of the survey questions was, “How did you feel in the situation?” It is striking to observe the interpreters’ intense and overwhelming emotional reactions, because, in accordance with their professional training (Registry of Interpreters for the Deaf, 2005), these emotions cannot be expressed during interactions. For example, recalling a situation in which a hearing coach demeaned a Deaf football player, one interpreter reported,

If I didn't have the control I had, I think I would have killed that coach. Now for you to understand just how grave that statement is, you need to know that I sometimes get teased for seeing something good in every situation. In high school, I was labelled as “the peacemaker.” What bothers me most is that I still harbour such awful feelings for this man. I have met him since at various school functions, and I always maintain composure in these professional situations. However, give me a dark alley some night and the story might end differently.

Other examples of emotional reactions:

- “The oppression which was shown from this teacher was uncalled for and made me sick.”
- “Inside I was on fire.”
- “Long after my interpreting was over, I finally broke down in tears.”
- “I was scared, stunned, shocked and then angry.”
- “My heart was pounding and my head felt like a large rubber-band had been snapped around it.”
- “I felt (in succession) curious, personally challenged, confused, helpless, irritated, really pissed off, empathic to the Deaf consumer, conceding, newly energized, and as I left, I felt used, taken advantage of and REALLY, REALLY PISSED OFF at the farcity of the whole thing.”
- “Be prepared for heartbreak!”

The protocol of the survey also included the question, “Did these reactions prompt memories of other personal experiences with oppression, i.e., gender, cultural, sexual orientation, family of origin?” The responses confirmed that the so-called “costs of caring” (Figley, 1995) may become exacerbated by family-of-origin transference issues. For example, after interpreting for an “insensitive doctor,” an interpreter reflected on her own mother’s birthing experience: “That doctor seemed to disapprove of my mother’s marriage to a man of another race and treated her like a little girl when discussing birth control options. Her anger and frustration came back to me while interpreting.” Another interpreter, a child of Deaf adults (CODA), reported, “We were the only Deaf family in the whole area and people can be stupid and cruel. I saw/heard countless examples of bigotry and oppression while

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growing up in the 1960s and 1970s. My family was treated like contagious circus freaks. It doesn't take much to remind me of all that."

Interpreter identification with the Deaf consumer is common. When asked for memories that got triggered by a Deaf student's frustration in a mainstream setting, one interpreter reported, "As a woman, I've been talked down-to, negated, and belittled by men who think they have the upper hand in knowledge, regardless of whether this is true or not." Another interpreter reported, "Having grown up in a little-understood and often-oppressed religious minority (Jehovah's Witness), empathizing with the oppression of the Deaf community has been fairly natural." Another interpreter reported, "What was happening to the Deaf consumer right in front of me reminded me of my own experiences as an incest survivor."

2. A Framework for Understanding Vicarious Trauma Effects

I use an adaptation of constructivist self-development theory (McCann & Pearlman, 1990) as a framework for understanding the emotional impact of interpreters bearing witness to perceived oppression. *Constructivist self-development theory* suggests that vicarious trauma lessens one's anticipation and security that certain psychological needs will be fulfilled, and therefore leads to emotional distress, including anger, guilt, fear, grief, shame, irritability, and other manifestations of emotional dysregulation. Briefly, the theory describes how the following beliefs, assumptions, and expectations about one's psychological needs may be affected by trauma:

Table 3: Relevant psychological needs

Need	Description
Frame of reference	Ability to view the world as just, meaningful, stable and controllable
Safety	Feeling reasonably secure from harm
Intimacy/Trust	Feeling connected to and validated by others
Group affiliation	Belonging to a larger community or cultural group
Self-esteem	Having self-approval; valuing oneself
Power	Exerting control over others
Existential meaning	Articulating the purpose of one's life
Spirituality	Feeling connected to that which transcends secular experience

Survey participants described how their anticipated fulfilment of each need was thwarted:

Frame of reference:

- "I've always had a positive view of the world, but, as an interpreter, the negative parts were beaten into me every day. It's a harsh, cruel world."
- "I thought this kind of oppressive treatment went out with the Dark Ages."
- "I knew that if he were hearing, the doctors wouldn't have given him a shot to calm down."
- "Although not all hearing people are bad, I got a sense, beginning on that day, that many supposedly well-intentioned hearing folks are not what they seem."
- "It's another example of how I completely distrust systems that are supposed to protect us."

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Safety:

- “I felt intimidated by the so-called professionals in the room—soooooo many of them.
- “It felt like I was personally stabbed in the chest.”
- “Maybe this could happen to me?”

Intimacy/Trust:

- “It made it hard for me to ‘see that of God in those people’ as we are supposed to try to do.”
- “The cumulative effect of such interactions has the potential to make me be short, critical and snooty.”
- “I have become less trustful of hearing people, including ones that should know better, i.e., interpreters.”
- “Feeling my deaf parents’ pain makes me angry at other interpreters, i.e., when they walk into situations talking to each other without signing.”

Group affiliation:

- “It makes me question whether I want to continue in this field because so often it involves these painful type of experiences. How much can one person take?”
- “I feel that as long as I’m in the role of the neutral party delivering words of the oppressor, it hinders my bond and cultural affiliation with the deaf consumer, at least at that time. It’s an awkward and uncomfortable position to find oneself in, especially after decades of working hard to establish those very bonds.”

Self-Esteem:

- “The situation damaged my self-competence because I again questioned my temperament and wondered later if my anger (even though it wasn’t expressed at the time) got in the way of doing my job.”
- “The situation was so egregious, I thought I must be reading it wrong.”
- “This event shook my esteem and undermined my confidence for a long time, and I questioned my professional competency. It’s been years and I have regularly stated that I would be leaving the field, that I could never do it justice, that I’m just not good enough, but I’m still here. I guess that emotion comes in waves for me.”
- “I think that if my student fails because of how he’s treated by the teachers, that it’s my fault.”
- “I felt dirty, like I was participating in the oppression because I was the vehicle through which the information was being processed.”
- “I was interpreting for a black, deaf male in the emergency room and all the white staff were firing questions at him. He became agitated and wrapped his hands around my neck . . . I think because we shared the same language and had eye contact. I doubted myself for many years following this experience.”

Power:

- “I have never felt so utterly helpless before or since.”
- “I felt angry, powerless, and, frankly, scared.”
- “I saw the student look to me with an expression saying ‘Help me, please!’ I was powerless.”
- “I went home feeling very shaken and unresolved.”

Existential meaning:

- “Bigotry like I observe every day is here to stay. What’s the use of trying?”

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Spirituality:

- “I recently left my church after nearly 3 years of feeling caught between the hearing and Deaf congregants. I don’t even pray anymore.”

3. An Interpreter Interview: “How Can This Be Happening?”

The following vignette from a debriefing interview in 1993 exemplifies some effects of vicarious trauma. The interpreter, Laurie Robbins Shaffer, had interpreted an in-service work training for a Deaf consumer. The training included a videotape of a panel discussion with panellists with different disabilities, including a Deaf person. However, in Laurie’s own words, the Deaf person on the tape was ignored, “discredited and vanished” which shattered her idealized world image, her frame of reference, rendered her helpless, and threatened Laurie’s self-esteem.

LRS: The videotape had something to do with ADA [Americans with Disabilities Act], I think. The videotape had representatives from the disabled community including a deaf person with an interpreter. I was interpreting the videotape for deaf people who were watching the videotape. But as the moderator got around to asking the Deaf person a question, he—as Deaf people tend to do culturally—related a whole bunch of background information before answering the question. I don’t think the Deaf person got a full sentence out before the moderator said, ‘That’s not the point of my question.’ And she never went back to the Deaf person!

I was interpreting the videotape for the Deaf consumer in the room who had no idea, I don’t think, of what had just happened on that videotape. But I almost fell out of the chair! I could literally feel the tears welling up in my eyes. I was shocked. Because it was just a neutral setting and there was nothing going on at all, I thought this videotaping would be no big deal. It came so out of the blue and my jaw almost fell to the ground. It was disgusting, the way this Deaf person was treated in this tape. And the tape was going to go out and be used for training for years!

To see someone blatantly overlooked and discredited, to see how fast it could happen, how quickly that person went from being an equivalent participant in that meeting to be totally vanished. He vanished, and it just broke my heart to see this and to know that the people who made this videotape allowed it to happen. And it also blew me away that now this tape was going to be used as the model. The whole thing, it was so fast and had so much impact.

MH: You’re feeling this as you are interpreting?

LRS: Yeah, I could feel the color going out of my face. I was thinking, I gotta cover this, I gotta cover this. Because the people in the room didn’t clue into what was really going on. They didn’t think anything of it. And even the Deaf consumer, he was tired; he had been sitting for four hours. I don’t think even he caught it. It wasn’t his responsibility to be totally tuned in, but as an interpreter, we’re tuned in 110% of the time. It just absolutely blew me out of the water.

MH: So you felt shocked, you felt tears; it broke your heart. Any other thoughts come to mind?

LRS: Well, I’m an action person. All I thought was “What can I do about this?” And I kind of ended up feeling that there wasn’t much I could do at all. . . . [The interpreter who was with me] basically didn’t even notice it and she was sitting right there in the room, too. I was beginning to think I was losing my mind. Why am I finding this incredibly offensive?

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MH: You began to feel that there must be something wrong with you?

LRS: Initially, yeah, after I saw no reaction out of anybody.

MH: Then what feelings and thoughts came up?

LRS: I think the first thing was this total feeling of how can this be happening? I mean, I kept wanting the moderator to restate the question—then somehow this would be fixed. Again, it all happened very fast. But it then dawned on me that nothing's going to be fixed. My whole feeling was trying to maintain control of myself while thinking about the fact that this is being done. The Deaf person's been turned off. They turned the screen off of him and they're never coming back to him.

MH: And it shouldn't be happening. Would you say more about that? What do you say to yourself?

LRS: Yeah, there are two things that are a part of me. One is the fact that I believe that somewhere out there, the world is fair; and I'm always disillusioned when it's not. Sometimes I think that's an advantage because obviously I'm going to try to be fair and that's helpful, and I try to create an environment that's an equivalent. However, then I get devastated when I find out I'm wrong. It's a naïveté, I guess. It still shocks me when people aren't treated fairly.

As an experienced interpreter who was very much oriented to reality, Laurie certainly knew that the world wasn't fair, particularly for Deaf people. Nevertheless, her language demonstrates how witnessing unfairness close up devastated her: "I almost fell out of the chair," "tears welling up in my eyes," "shock," "disgusting," "broke my heart."

4. Central Benefits to Examining Vicarious Trauma

Why might verbalizing all this distress be helpful? Indeed, the retelling of the story may be retraumatizing and detrimental. A relevant principle of healing: "Pain has a size and shape, a beginning and end. It takes over only when not allowed its voice" (Brener, Riemer, & Cutter, 1993, p.9). The more words an individual has for describing her distress, the more it has a beginning and end, and the better she's able to manage it. With fewer words, the more the pain takes over; and the more she succumbs to vicarious trauma. As I have discussed in previous publications (Harvey, 2003, 2001), articulating and examining one's experience with another person who seeks to understand one's reactions and validate one's feelings often renders the detrimental effects of the vicarious trauma less emotionally toxic. This facilitates insight that ushers in the use of coping or self-care strategies, such as various physical safeguards, self-soothing activities, limit setting, social supports, organizational supports, and access to psychotherapy. The vicarious trauma self-care literature provides an extensive list of coping strategies (see, e.g., Bontempo & Malcolm, 2012; Meichenbaum, 2007; Saakvitne & Pearlman, 1996). Dean and Pollard (2001, 2005) also describe methods of reducing interpreters' stress, via the application of demand-control theory.

There is also psychological value in examining, ferreting out, and articulating one's own psychological needs, to ask oneself questions such as:

- What are my relevant psychological needs?
- How are these needs manifested?
- Which needs are more prominent?
- How might witnessing oppression be affecting these needs?
- What compensatory needs can I access when one need is thwarted?

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Sometimes this self-examination happens serendipitously. Ann, an interpreter who attended a vicarious trauma workshop I once conducted on the grounds of a national park, became overwhelmed by a recent experience in which she interpreted for a Deaf patient whom she perceived as being abused by professionals. She left the workshop with plans to leave the conference. However, as "luck"² would have it, Ann's car was one of two cars out of over 100 that were blocked in the parking lot. She walked around the lake instead, and, in a short time, decided to sit on a rock. She returned to the workshop and recounted an amazing and instructive story in regard to her need for control: She told us that she had noticed a butterfly right above the water line, trying without success to fly. It was obviously injured.

I found a stick and lifted the butterfly up. It flew for a second, only to fall down a little further in the lake. I then found a longer stick and again lifted it up. Again it flew for an instant and fell into the water. With a still longer stick, I helped it again but it was in vain. And soon the butterfly was out of my reach. Then I knew that I did all I could do. I had to let it go.

What additional emotional benefits might there be for an interpreter when debriefing from an oppressive situation other than to retell the story, express feelings, examine needs, and learn coping strategies? This question echoes emerging literature in the subfield of traumatology, referred to as *posttraumatic growth* (Nuttman-Shwartz, 2014; Splevins, Cohen, Murray, Joseph, & Bowley, 2010; Tedeschi & Calhoun, 2012). In my clinical experience, those who give expression to the myriad deleterious trauma effects will often also spontaneously mention its benefits. Many survey respondents indicated that witnessing oppression catalyzed positive, growth-enhancing effects, including a greater anticipated fulfillment of certain psychological needs:

Frame of reference:

- "It helps me to see how the world can operate, and the scope of injustices in it."

Intimacy/Trust:

- "I've learned to value my friends who are deaf and their experiences more."
- "I came home and cried with my husband."

Group affiliation:

- "For the first time, I realized that I didn't want to just get through it and shrug it off and say 'tomorrow will be better.' I knew from then on I wanted to connect more with the Deaf community."
- "After a while, I began to see incredible strength in Deaf people sustaining oppression and felt privileged to be invited to be part of these experiences."

Self-Esteem:

- "I let myself get off the hook. It's okay to cry; it's okay to feel helpless sometimes. I am being much more gentle with myself these days."
- "This has made me a much more introspective interpreter, a more human person in the world, and a person who can better understand (regardless of the pain or joy it may cause me to feel) that the lives of Deaf people are full of all kinds of pain and frustration. Perhaps I only knew this intellectually before this situation."

Power:

- "I was astonished at my brazenness to stand up to a judge. Where in the world did I get the balls to do that?"

² In Jungian terminology, this is referred to as *synchronicity*: a perceived meaningful coincidence between two or more events that mirror or echo one's personal concerns.

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Existential meaning:

- “I know that I am where I need to be and must continue serving the Deaf community in order to educate the hearing community and make a difference.”
- “I guess I created meaning from this experience by going on to work for the Department of Mental Health to train interpreters in working in mental health settings and educating hospitals and providers about their obligations to Deaf persons, and to create specialized programs that are linguistically and culturally affirming.”
- “This event made me consciously decide that I no longer wanted to be a 'hidden' oppressor. If I had supposed issues or questions about the Deaf community, Deaf culture, I was now going to face them and openly talk about them. I have no doubts that the experience taught me a lot about integrity and who I want to be as a person and as an interpreter.”
- “It helps me to construct meaning out of life by guiding me away from practicing injustices, and being extra aware of them in my daily life. I’ve attained a level of awareness that if I hadn’t witnessed oppression frequently for 18 years in this field, I wouldn’t have attained.”

Spirituality:

- “Deep reflection about the emotional and practical consequences of oppression had intensified my spiritual awareness.”
- “My spiritual faith came out deep within me, thinking, ‘I will survive.’”
- “That event showed me that my spirituality is ever-present inside of me, ready to be drawn from when needed.”

Evident in these responses is the plethora of self-perceived anticipated fulfillment of existential and spiritual needs, as compared to the previous listing of thwarted needs. This is consistent with Tedeschi and Calhoun’s (2012) finding that individuals who face trauma may be more likely to become cognitively engaged with fundamental existential questions, to value the smaller things in life more, and to examine important changes in the religious, spiritual, and existential components of life.

5. Are There Even More Benefits to Be Realized?

Can we do even better, “kick this up a notch”? How might interpreters achieve more profound, long-lasting benefits from vicarious trauma, ones that sustain them and – at the risk of asking too much -- perhaps even *enrich* their lives? One survey respondent recommended, “Prepare your own internal environment to allow for good things to come from horrible situations.” At first glance, this directive reminded me of a complicated recipe that says, “Cook it carefully.” Not helpful. Beyond the standard self-care advice to eat right, exercise, set limits, take breaks, meditate, how exactly can interpreters prepare? In my work with vicarious trauma for others and myself, I find myself repeatedly coming back to the following piece of wisdom:

In order to transform vicarious trauma, you must love your work or some important aspect of your work This work is too difficult and too personally demanding to do without a sense of mission or conviction. . . . The work must be meaningful to you. Then, paradoxically, your work itself is part of your antidote to vicarious trauma. (Saakvitne & Pearlman, 1996, p.72).

I have found a narrative approach to be most useful for understanding how vicarious trauma can promote finding meaning. Narrative therapy was developed by Michael White (Australia) and David Epston (New Zealand) for use in psychotherapy, but its applicability extends far beyond this context, including, as will be elaborated later, in interpreter-mentoring relationships. In a nutshell, it provides “scaffolding” for discerning

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absent but implicit personal aspirations that are contained in interpreters' vicarious trauma testimonies" (White, 2000). This is a mouthful and warrants clarification.

6. Scaffolding Questions: A Tool for Interpreter Mentoring

Scaffolding is a temporary structure used to support people and material in the construction or repair of buildings. In a narrative approach, metaphorical *scaffolding* refers to a temporary conversational structure, or mode of inquiry, that supports the emergence of personal stories that "fit" with what people want and intend for their lives, what matters to them, their life aspirations. For an interpreter who experiences vicarious trauma, thoughtfully scaffolded questions can support one to step from the "known and familiar" of one's distress into what may be one's "less known and less familiar" life aspirations that until then had been relatively dormant: *absent* from one's trauma narrative but *implicit* in their influence.

Stated differently, people typically do not simply give a passive retelling of their vicarious trauma response. If the retelling of the story is quiescent, without protest, or reflects a passive acceptance of the status quo, by definition, it would not constitute trauma (White, 2007). Rather, the narrative evinces protest, resistance, anger, and fear. Although these reactions typically do not rise to the level of warranting a clinical diagnosis, nonetheless, they significantly "get under one's skin." Laurie was vicariously traumatized. Her protest was how "incredibly offensive it was that the Deaf person was blatantly overlooked and discredited," and this protest precipitated a painful array of emotions. One key reason *why* that situation was so distressing to her was *because* it violated her absent but implicit "sense of fairness," a life goal that she had cherished. Her sense of fairness was the out-of-focus background, relatively absent but implicit in her narrative with me, and it "set the stage" for her expressed experience of distress.

Note that "absent but implicit" doesn't necessarily imply unawareness; it implies a paucity of elaboration, fewer words. While Laurie readily attributed her distress to a violation of fairness, she initially she used fewer words in her explanation. Her absent but implicit narrative remained in the background. In contrast, she used more words, including those that had a higher affective intensity, to describe the distressing foreground, for example, "It broke my heart," "blew me out of the water," "I almost fell out of the chair with tears welling up in my eyes," "I felt shock, disgust, helplessness, confusion, disillusionment, and devastation."

However, in my experience, these absent but implicit background factors are not always readily accessible without a specific mode of inquiry; in fact, they often come as a surprise to those who are giving testimony. As one interpreter put it, "This survey generated more thought than I anticipated." Another interpreter expressed that she became overwrought with anguish because a Deaf consumer was left out of a conversation, despite interpreter services. That interpreter initially denied any absent but implicit issues but then reconsidered: "I didn't think that the situation brought up any personal memories, but thinking about it now, I often felt unheard and unseen in my childhood, [like that Deaf person]. I know that not being heard or seen, in the sense of being acknowledged, understood, recognized, validated, is a big issue for me. But I didn't have that 'up' at the time of this [interpreting] experience."

6.a. Sample Scaffolding Questions

The following scaffolding questions facilitate having important issues "up" at the time of an interpreting experience, the uncovering of what is absent but implicit. They also can support interpreters in the uncovering and naming of actions reflective of personal agency, the relevant skills needed to do so, and the social/relational history of these skills. These scaffolding questions can be used as a "springboard" for individual personal reflection and to help interpreter mentors to structure conversations how to benefit from vicarious trauma experiences.

I can imagine a reader saying, "I would never engage another interpreter in such a conversation as it feels incongruous, 'too therapeutic.'" Again to emphasize, although this mode of inquiry is from narrative therapy, its applicability is *not* limited to psychotherapists; although these exchanges are therapeutic, they do not constitute

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psychotherapy. Indeed, this narrative therapy approach can be used as a template for engaging in probing conversations in a *mentoring relationship*. Mentorship can be a bridge from interpreter education to the world of work or a vehicle for professional advancement toward specialization and personal growth for practicing interpreters (National Consortium of Interpreter Education Centers, <http://www.interpretereducation.org>).

Key scaffolding questions to uncover what is absent but implicit

- Why do you resist passively accepting the situation and instead find it distressing?
- What might your distress say about what is important to you?
- What of your values, beliefs, hopes, or dreams have been violated, devalued, or dislodged?
- What might your distress indicate about what you hold precious and what you intend for your life, how you want to live life?
- What is the history of these values? Have you always held them as important?
- Who else in your life would know about these values? How might you have indicated these values to them?

Key scaffolding questions to uncover and name actions reflective of personal agency

Vicarious trauma inquiries also offer an opportunity to illuminate one's *personal agency*, that is, an individual's sense of being able to direct or have influence on his life in accordance with his values (White, 2007). Indeed, the very act of giving expression to what was distressing about the interpreting situation and how it violated implicit values is an example of taking action, of responding in some way. As one survey respondent reported, "These types of situations only serve to reinforce that that expressing and teaching my beliefs must always be my first 'career.'"

- What are you doing in response to being bothered by how the Deaf consumer was treating during the interpreting situation?
- Behaviorally, what exactly are you doing to hold onto what is precious to you?
- How are you reclaiming that which you value?
- How are you affirming beliefs about your life?
- What are/were you hoping for in taking this action?
- What does your distress reflect about what you are planning for your life?

Key scaffolding questions to uncover and name individual skills

Once the expression of distress has been named as an action, it is possible to develop a description of the skills or know-how involved in taking such action.

- How is it possible for you to take this action?
- What does this action you are taking reflect about what you know about life?
- What life skills are you using here?
- Do you remember when you realized that you possessed this skill?

Key scaffolding questions to uncover the social and relational history of what is "absent but implicit"

Once we have established what it is that is being given value to, and the related pragmatics of how one is doing this, we can support this underpinning of identity by bringing forward the history of what is being valued.

- Where have these purposes shown up in your life before?
- Can you tell a story about how you learned these skills or values?
- Have you done anything like this before?

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- Do you remember what was important to you back then?

7. “What Can I Do for You?” Turning Vicarious Trauma into Personal Enrichment

These scaffolding questions and responses are illustrated in a 2015 interview with Laurie Robbins Shaffer following up on her response to my previous interview with her 21 years earlier (see above). In that interview she discussed her experience interpreting a videotape on the Americans with Disabilities Act in which a Deaf man was “blatantly overlooked and discredited,” which she found vicariously traumatic, and it became clear that the absent but implicit value that was violated was her sense of fairness.

MH: You’ve read the transcript of our conversation that took place almost 21 years ago. The first question is what thoughts or reactions do you have now about what you said?

LRS: I think that first thing that struck me was how much I sound the same today! I’m an action person, so watching people either participate in or perpetuate oppression and/or be on the other side of oppressive actions is still very hard for me to witness and I often want to do something and that’s often not possible in the moment.

MH: Did you remember that situation that you spoke of?

LRS: If I saw the Deaf gentleman today, I wouldn’t remember who he was, but I do remember the whole scenario of the video training and him sitting there and me going, “Oh my god, I can’t believe this is happening.” Would that encounter bother me today as much as it did then? Probably. I don’t know what I would do differently. I wish I remembered more about did I go there often, did I have any connection to the assignment other than coming in as a freelancer and leaving? I think that would have influenced whether I thought I could speak to someone or not. Like asking, “Do you realize that this video training is coming across this way?” I’ve spent half my career freelancing and half my career in staff positions, often as coordinator of services. Part of what drives me to take that position is an ability to do more than just come in and come out and have so little to say to make a difference.

MH: You’d be more empowered to make some real change.

LRS: Yeah, and also have a relationship with Deaf people on a more consistent basis. So I could ask, “Do you want to say something about this?” It’s different from when you’re just flying in and flying out. I also remember that the Deaf gentleman was an employee who was in a mandated training, and he wasn’t going to raise a fervor about the video. It didn’t strike him as a catastrophe so why should I add a scar? You know, if it’s not upsetting him, why should I make him upset? I guess that was my thinking and I guess it might still be. But when people do react with “This is not fair, this is not right,” I think when you’re a member of an institution, you can work with them to make that change whereas it’s harder as a freelancer.

MH: So you envision that if you were part of an institution and the Deaf person said, “This isn’t fair,” you’d build a relationship and you’d effect change that way?

LRS: Yeah, like sitting down and asking the Deaf person, “What do you want me to do?” “Do you want me to be your interpreter while you negotiate the situation?” “Do you want me there as your ally and maybe bring in someone else to just interpret?” Or “Do you want to go with a different interpreter?” There’s an array of options that when you’re not part of the institution you don’t always have that.

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- MH: Being part of an institution is one piece but being *you* is the other. So let me ask you what is it about *you*, what is it about the skills that you have, the knowledge that you have, that you draw on in order to help empower the Deaf consumer?
- LRS: Well, I'm not very good at just being a passive observer. And people know they can come to me and I will speak out. And I know the system. As a white, well-educated, hearing woman, I've been exposed to these systems all my life. I can say, "Maybe you wanna talk to so and so. Maybe you wanna go to this person."
- MH: So you have the knowledge base of how these systems operate?
- LRS: Yeah, and I try the best I can to be the listener. I made the mistake earlier in my career of sort of telling Deaf people they *should* be upset about whatever, but let's hold the horse here. That's exhausting. And Deaf people face oppression every day of their lives and need to decide which battle to pick or not. Before, that would have been about me, but it's not about me. If this Deaf person wants to fight, that's great, but if not, that's his or her choice. And I have to respect the choice either way, I get it.
- MH: So respecting the Deaf person, listening, seeking to understand, asking, "How do you want me to help?" Would you give me the history of how you learned those skills? All this may have nothing to do with interpreting.
- LRS: I'm trying to think. Remember those Peanuts cartoons with Lucy with the booth and the five cents for psychiatric consultations? That's who my mother always thought I was. It has always sort of been in me. I always look for the one who's at a disadvantage. In elementary school, there was a series of foreign exchange students trying to find their way. I would latch on to that kid. I would always name which kid that was all through elementary school.
- MH: And that has been a very cherished quality that you're proud of?
- LRS: Yeah, yeah.
- MH: And any thoughts about how that developed? Where did you learn to do that?
- LRS: Not to get too psychoanalytic, but I was always the unheard kid. You'll never believe this but all my report cards said I never spoke up in class and was kind of shy. And if people really wanted to know me, they kind of had to work at it. I didn't do this on purpose, but because I was shy and reticent, not a lot of people knew me really well. So I was drawn to kids who were kind of in the same place. I'm glad I have that quality, but I'm not sure I always play it out well. I do make my mistakes. But I'm glad I can do it!
- MH: And how do you see that playing itself out in your future? Where is this gonna go?
- LRS: Well you know, I'm in doctoral studies right now and my dissertation is about the interplay between deaf people, interpreters, and institutions and how the whole power dynamic plays out. Who gets heard and who doesn't.
- MH: I get that. Would you name the quality you have that enables you to act according to your values, whether in an interpreting situation or with your dissertation?
- LRS: I think it goes back to privilege and wanting to use it to its best advantage. In other words, can I share privilege with you to your advantage?

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- MH: I'll do my share of getting psychoanalytic. Isn't that from elementary school? You mentioned earlier that you would latch on to foreign exchange students who were trying to find their way. Do you remember their names?
- LRS: Yep! Grateziella was Italian and she was my bud in second grade. I befriended Ingrid who was Australian and she and I were inseparable in third grade. There was also a Turkish girl named Nur who had been at my school for two weeks in the first grade and spoke no English. "What can I do for you?"

In this interview, in contrast to the one conducted approximately 21 years ago, Laurie was much less consumed by her visceral shock and devastation when, as she put it, she "witnessed unfairness close-up." Whereas in that first interview, she was treading the vicarious trauma "waters" in order not to affectively drown, here she is confidently swimming and navigating those waters—even enjoying the process!—in the service of benefiting both herself and others. I believe that this shift is attributable to more than the passage of time.

The mode of enquiry in this second interview provided the scaffolding for Laurie to uncover important narratives that would facilitate her professional and personal growth. Her tenacious *absent but implicit value* of fairness continued to occupy center stage: "Oppression is still very hard for me to witness." She then articulated what *actions are reflective of her personal agency* by proudly proclaiming that she is an "action person," that her doctoral dissertation will examine external power dynamics that affect Deaf consumers, and that her life action goal is to "share privilege to another's advantage" by asking "What do you want me to do?" We were able to uncover what *skills* she utilized to actualize her values, for example, her knowledge of how systems operate. Finally, in terms of the *social and relational history of her values*, she recalled that, in elementary school, she sought out disadvantaged peers like Grateziella, Ingrid, and Nur. Moreover, she noted that she was always the unheard kid and that she was drawn to kids "who were kind of in the same place."

Laurie's increased insight and clarification of her life values, self-identity, and skills were among the significant professional and personal benefits she reaped from experiencing vicarious trauma. She was able to transform the negative effects in service of her growth. Reaping the benefits of vicarious trauma provided Laurie with the essential fuel to sustain her passion for the work she does and the life she lives.

8. Concluding Thoughts

Given the extremely high likelihood, if not the inevitability, of interpreters experiencing vicarious trauma (Bontempo & Malcolm, 2012), it is essential for educators of interpreters to provide adequate preparation. This would include formal training about the causes and dynamics of vicarious trauma, self-care strategies for minimizing and coping with its negative effects, and, as this article described, a framework for reaping its myriad benefits.

This could occur in several contexts. Bontempo and Malcolm (2012) provide several recommendations for such training, such as a lecture series, workshops, study modules, mentoring relationships, role playing and presenting realistic vignettes and case studies of traumatic interpreting situations. Hetherington (2012) reported that interpreting should be recognized as a practice profession requiring the support framework of supervision. These reflective practices can also be profitably utilized by both novice and experienced interpreters for debriefing after a traumatic assignment.

Engaging in reflective practice would foster collegial support, trust, and a spontaneous evolution of ideas. As Hetherington (2012) observed, topics for discussion among interpreters in supervision are not always formulated in advance; an issue raised by one member may trigger something for another, which then becomes their issue for the session. And dyadic or group discussions would, in narrative therapy parlance, provide scaffolding for personal reflection.

The psychological pain of vicarious trauma is not something to avoid, even if it were possible. Provided one has adequate coping mechanics, there are significant inherent rewards. Sigmund Freud once explained that the place where crystal breaks is the place that most clearly reveals its structure (Muller, 1992). In the same way, our

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vicarious trauma can be a vehicle for revealing our life aspirations and the deepest textures of our heart and soul, if only we will allow ourselves to be taught.

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Formalizing Community Interpreting Standards: A Cross-National Comparison of Testing Systems, Certification Conventions and Recent ISO Guidelines

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Abstract

Community interpreting has become a global phenomenon, and the need for standard assurances of practice is being met by credentialing systems that certify a community interpreter through testing and/or training. This paper examines credentialing systems in Australia, Canada, Norway and the UK and poses the questions of whether the spread and development of testing systems has led to a widening of the skills now required for community interpreting, and whether testing alone is a means for the demonstration of all of these skills. Some attributes of credential candidates are pretest admission prerequisites. Testing alone is the common pathway for community interpreters in Australia and Canada to gain certification, while in Norway training is a corequisite for “higher-level” certification, and in the UK, it is strongly recommended. Training allows a degree of specialization in the areas of health, law and public services that are a feature also of Norwegian and UK certification. At a supranational level, the recently released ISO Guidelines for Community Interpreting also list as required attributes the ability to simultaneously interpret, negotiate cross-cultural pragmatic and discourse features, manage interactions, and formal training. These further skills are likely to be best ascertained through training that is corequisite or supplementary.

Keywords: community interpreting, standards, certification, ISO guidelines

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1. Introduction

Community interpreting, which in this paper is applied to examples of mostly spoken language interpreting, has been generally understood to refer to all forms of interpreting apart from conference, diplomatic, business and media interpreting. The term ‘community interpreting’ first became popular in the predominantly Anglophone countries of the New World that have witnessed continuing immigration from Europe, Africa, Asia and Latin America over the last century. This paper examines the credentialing of standards and skills levels required for individuals to perform community interpreting by presenting current certification systems in four countries: Australia, Canada, Norway and the UK. The ISO [International Standards Organization] 13611 ‘Interpreting – Guidelines for community interpreting’ (hereafter referred to as: ‘ISO Guidelines’) published in December 2014 are also examined in light of their relationship to national standards. The ISO Guidelines are a recognition of the increasing professionalization of community interpreting and the emergence of the occupation ‘community interpreter’. These developments are discussed in terms of desirable and target attributes of community interpreter performance and in terms of the harmonization of cross-national systems in a globalized and highly mobile language services industry.

This paper presents certification conventions of community interpreting in four countries with extensive Translation and Interpreting (hereafter: T&I) infrastructure: Australia, Canada, Norway and the UK. This paper examines attributes of certification conventions and poses two research questions: 1) whether the development of testing systems has led to a widening of the skills now required for community interpreting; 2) whether testing alone is a means for the demonstration and ascertainment of all of these skills.

This paper commences with a brief outline of how the term ‘community interpreting’ (Section 2) has been employed and what it is commonly understood to refer to (Section 3). In Section 4, the conventions of certification are firstly outlined at the macro-level to show which admission requirements the certifying authorities set for potential applicants. Further, the testing component of the certification systems and their relationship to training opportunities is presented, as well as other features of credentialing such as the certification being a formal legal title, and limited in time or not. The next section, 4.1, presents the components of the certifying authorities’ tests and the skills and performance demonstration that they require from test candidates. This section contains a discussion of these skills and a ‘cross-national’ comparison with a view to show common and shared attributes of certification. These then inform the presentation of the ISO Guidelines for community interpreting in Section 5. The conclusion re-visits attributes common to both national systems and the recent international initiative, and contextualises these in line with the two research questions.

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The four countries whose credential systems are examined in this paper were selected on the basis of the existence of an identifiable credential system that has existed for some time in each of the countries, and because some of them are located in different regions of the world. The selection of these four countries does not suggest that I consider the credential systems in these countries to be superior (or inferior) to those found in other countries. Discussion focuses on the *attributes* of the testing systems of national credentialing authorities and the ISO guidelines. Discussion includes why such attributes may pertain to testing and performance, and why some attributes may be present in some more recent testing systems and not in others. To be sure, this paper does *not* provide an *evaluation* of these attributes as testing components. Instead, discussion is focused on concluding whether the development of a number of attributes is evidence of testing and credentialing systems that now require a demonstration of a widening of the number of skills and/or a demonstration of greater skill complexity.

2. Describing Interpreting and Standards

The T&I sector is characterized by increasing diversification according to new technological advances (e.g., video-link interpreting, machine interpreting via voice-recognition technology) as well as socio-demographic changes (e.g., increased mobility of linguistic groups, rapid changes in the linguistic landscape of urban areas). Increased mobility and globalization make a cross-national comparison of certification procedures timely as interpreters face changing marketplaces.

While the T&I sector is undergoing diversification and specialization, conversely, in many countries it is now being subjected to regulatory standards in a similar way to work practices in other fields of employment. In the first place, regulatory standards appear to offer protections primarily to service users, the consumers. However, regulatory standards also perform the function of formalizing standards of work practice within a profession, and in doing so, they raise the profile and standing of that profession through consumers' knowledge that that profession is regulated. Further, formalization of standards pertaining to the relationship of service-provider to service-user seeks to offer protections to the former in disputes with the latter, and also regulates internal work practices pertaining to the service-provider.

In many countries there are now authorities, either governmental or those belonging to professional associations, which perform the regulation of standards. Regulation is performed on the basis of any or all of the following: evidence of training and formal testing, collected evidence of work performed, and recommendations from fellow practitioners.

Another means of quality assurance is now also being introduced to the T&I sector in some countries: that of *standards*. In Canada, the *National Standard Guide for Community Interpreting Services* (National Registers of Communication Professionals, 2007) was released as a 45-page document that provides a multifaceted resource on community interpreting: a descriptive guide to interpreting to non-interpreters, a guide with recommended training pathways for community interpreters, a statistical survey of the number of users of interpreting services, and a guideline document on standards of practice and ethical principles. In the US, a national standard (albeit with the desire that such a standard would gain popularity beyond the US), "Language Interpretation Services" (ASTM F2089), was reapproved in 2007 (American Society for Testing and Materials International [ASTM], 2007). From the content of this standard, it is clear that it relates primarily to conference or court interpreting, given that most space in the document is devoted to these two areas of interpreting. Although the ASTM standard stakes a claim to relate to *all* types of interpreting, it appears to be a document with limited influence on training and certifying authorities, both in the US and outside it. The ASTM is an example, however, of an attempt to set a comprehensive and universally applicable description of interpreting. This same aim is clear in the scope of the ISO, examined in further detail in section 5.

In 2013, the ISO Draft Guidelines for community interpreting, ISO/FDIS 13611 were released for discussion, and on 1 December 2014, an endorsed standard, ISO 13611 'Interpreting – Guidelines for community interpreting' was officially released (ISO, 2014). The development of the ISO Guidelines for community interpreting reflects not only the expertise of community interpreters from different countries and situations, but also the perceived need for a global document that sets out the specifications and characteristics that are fit for the purpose of the provision of community interpreting services. The authors of the ISO Guidelines have sought to

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bring into the standard their own ‘inherited’ know-how and that of their source countries/societies. As is clear, national or regional (and sometimes, as in the case of Canada, even local) conventions on standards of community interpreting precede these global developments. The ISO Guidelines, therefore, chronologically follow and are unavoidably influenced by the legacy of national certification systems that have existed before them.

3. Definitions of Community Interpreting

As stated above, ‘community interpreting’ is defined here as encompassing the following areas: public service (i.e. interactions with government employed personnel and others in areas of public administration such as housing, welfare, counselling etc.); education; medical; legal (court and police) and faith-based organizations. ‘Community interpreting’ functions here as a hypernym that includes all forms of interpreting other than conference, business, media and diplomatic interpreting.

In the UK, the term ‘community interpreting’ is distinguished from the term ‘public service interpreting’, in part through the existence of two different qualifications: the Community Interpreting Certificate, which is a level 1–3 qualification, and the Diploma in Public Service Interpreting, which is a level 6 qualification.² The Diploma of Public Service Interpreting (DPSI)³ is a more popular, and more widely recognized qualification, and is also the favoured prerequisite for entry onto the National Register for Public Service Interpreters (NRPSI, 2011). (The Community Interpreting Certificate is not listed as a qualification that allows applicants to gain entry to the NRPSI.) In this paper, and according to the definition of community interpreting that has been adopted in this paper as outlined in the above paragraph, the DPSI is adopted as the benchmark certification for community interpreting, notwithstanding the nomenclature in the UK. In the DPSI, testing occurs according to the specialist pathway that a candidate must choose: law (English, Scottish or Northern Irish), health or local government.

The situation in the UK, in which their current notion of ‘community interpreting’ does not include court or police interpreting, and where these are encompassed by ‘public service interpreting’, appears to have had some influence on the definition of community interpreting used in the recently released ISO Guidelines. In some other countries, especially those that have a code law tradition, with the institution of a ‘court sworn interpreter’ (e.g., Austria, Croatia, Spain), court interpreting is an activity clearly delineated from interpreting that occurs in the fields of healthcare, education, social welfare, and so forth. Due to these different conceptualizations of the position (or status) of court interpreting, the ISO Guidelines list some countries for which community interpreting encompasses court interpreting and also other countries that do not do this. In its own description, the ISO Guidelines are ambivalent as to whether community interpreting encompasses this or not (ISO, 2014).

In regard to nomenclatures that distinguish ‘court interpreting’ as a separate field, a problem quickly becomes apparent with an enforcement of performance standards inside the courtroom but not outside it. While ‘court interpreting’, and the distinction of ‘court sworn interpreters’ is a relevant feature of some countries, an inconsistency becomes apparent if in legal interpreting for police interrogations or consultations with lawyers there is no requirement to employ a similarly credentialed ‘court sworn interpreter’. In practice, interpreting for the police and lawyers (and also ‘court interpreting’) is often performed by those employed in ‘community interpreting’ according to this paper’s definition of it. Thus, community interpreting occurs across the police, legal and judicial sectors and a conceptualization of community interpreting, I argue, needs to include all of these and not needlessly exclude any of them. A detailed examination of court interpreting and ‘non-courtroom, legal

² In the UK, an NQF Level 6 qualification is a ‘first-degree level qualification’ and is equivalent to a bachelor’s degree (at least in terms of the language skills required for those interpreting in the UK in a “public service context” (cf. Chartered Institute of Linguists [CIoL], 2013).

³ The Chartered Institute of Linguists (CIoL) administers the examinations for the DPSI. The forerunner of the DPSI was a qualification called the Certificate in Community Interpreting. (The DPSI was developed in 1983 from a project entitled “the Community Interpreter Project,” CIoL, 2013.) This indicates that the term ‘community interpreting’ did exist as a hypernym for a variety of types of interpreting in the UK, even though ‘public service interpreting’ is now the ‘benchmark’ term that specifies a more aspirational level of interpreter competency.

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interpreting', comparing US and Canadian conventions on this is provided by Bancroft, Bendana, Bruggeman, and Feuerle (2013).

In the New World, the emergence of community interpreting would have been unimaginable without national policies that not only recognize the ethnic and linguistic diversity of the population, but also policies that recognize the need for services to be provided so that speakers of other languages could participate in and contribute to society in a social, educational, occupational, economic and political sense.

Implicit in the setting up and provision of these services in some New World countries was that public authorities (national, state or local) through public amenities such as hospitals, the courts, the police, schools etc. would finance these services. Further, these services were to be provided not only to migrants with limited proficiency in English, but also to users of signed language and speakers of indigenous languages (at least in Canada, while in Australia, the addition of these latter two groups occurred subsequently). This paper, as stated in section 1, focuses mainly on spoken language interpreting, and the majority of tests examined in the sections to follow are tests for community interpreting for spoken languages only. (Features of signed and spoken community interpreting are outlined in the context of the ISO Guidelines – see Section 5.)

4. Attributes of Certification and of Candidates Seeking Certification

In some countries (e.g., China, Sweden), it is a governmental organization that administers and conducts certification. In others a governmental organization only administers certification and certification itself is conducted by another (usually professional) organization (e.g., Austria, Germany). In this section, a cross-national comparison of certification systems for community interpreting in four countries is presented: Australia, Canada, Norway⁴ and the UK.

In Australia, the National Accreditation Authority for Translators and Interpreters (hereafter: NAATI) has conducted testing for interpreters and conferred accreditation (the Australian term for 'certification') to successful test candidates since 1977. Canada is the home country of Critical Link, the International Council for the Development of Community Interpreting, an organization that has hosted conferences and greatly furthered research on community interpreting. At the request of Ontario's Ministry of Citizenship, Culture and Recreation, the Community Interpreter Language and Interpreting Skills Assessment Tool (CILISAT) was developed in 1994, which is now widely used not only in this Canadian province but also in seven other provinces, and has become the national quasi-standard for community interpreter certification in Canada⁵.

Norway, although a country that has never officially affirmed a national policy of multiculturalism, has given some consideration to the development of immigration and integration policies, which included provision for the establishment of interpreting services (Skaaden, 1999). In 1990, the Norwegian Interpreter Certification Examination was established and administered by the Linguistics Department of the University of Oslo (Mortensen, 2001; Skaaden, 2003) to cater for a pressing need for the credentialing of community interpreters. Since 2005, the Norwegian Directorate of Integration and Diversity has co-ordinated the registration of interpreters. Some of the macro-level features of certification in Norway are under the auspices of the Norwegian National Register of Interpreters, but most are contained within the Norwegian Interpreter Certification Examination (hereafter: NICE). The term 'NICE' will be the one used to 'represent' Norway (cf. Giambruno, 2014).

⁴ I am greatly indebted to Mr Leonardo Doria de Souza, Senior Advisor at the IMDi - Directorate of Integration and Diversity - in Norway, who generously supplied me with general and detailed information on the workings of the certification system in Norway (admission to the Norwegian National Register of Interpreters), details about the Norwegian Interpreter Certification Examination (NICE) and the role of Oslo and Akershus University College in providing interpreter training. Any errors in this paper are mine and mine alone.

⁵ The CILISAT test, administered by CISOC (Cultural Interpretation Services for Our Communities), is not the only community interpreting credential available in Canada. Industry Canada (2007, p.44) lists nine other community interpreting credentials available across Canada.

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In the UK, the DPSI was developed in 1983 (CioL, 2013). The DPSI is intended for interpreters working in languages for communities that have been established in the UK on the basis of post-WWII migration and, more recently, from intra-European migration.

Table 1 below outlines macro-level features of the testing of the certification systems. The selection of these macro-level features is made on the basis of features identified by researchers who have examined attributes of interpreting examinations as ‘stand-alone’ tests (Mortensen, 2001) and certifying interpreters at university training centres (Kalina, 2002; Lee, 2009; Mikkelsen, 2013), community-based training courses (Mikkelsen, 2007; Vermeiren et al, Van Gucht, & De Bontridder, 2009) and cross-national surveys (Hlavac, 2013; Stejskal, 2005, Turner & Ozolins, 2007).

Table 1. Features of testing procedures reported from sample organizations

	Australia NAATI Accreditation (Professional)	Canada CILISAT Certification	Norwegian Interpreter Certification Examination	UK Diploma of Public Service Interpreting
Certification conducted by a governmental organization	Yes	No	Yes ^a	No
Language proficiency test	No	No	Yes ^b	No
Formal examination of skill in inter-lingual transfer.	Yes	Yes	Yes	Yes
Evidence of previous experience required	No	No	No	No
Minimum age	Yes	No	Yes	Yes (19)
Membership of accrediting association obligatory	No	No	No	No
Minimum education level	Yes	No	No	No
Lack of criminal record	N/Avail.	N/Avail.	No	Yes ^c
Signed-language interpreting	Yes	No	No	No
Availability of practice/sample tests	Yes	Yes	Yes	Yes
Statistics on pass rate	Yes	Yes	Yes (10%)	No
Details of the content of the interpreting test made public	Yes	Yes	Yes	Yes
Specialist components	No	No	Yes. Law, Medicine, Employment and Social Life	Yes. Law, Health, Local Government
Video or audio recording of exam	Yes	Yes	Yes	Yes
Training as a pre-requisite or strongly advised attribute	No	No	Yes	Yes
Test / exam accompanied by training	No	No	No	Yes
Availability of any training	Yes	Yes	Yes	Yes
Conferral of legal title	No	No	Yes	Yes
Re-registration/re-validation of certification required	Yes	No	No	Yes

^a A publicly-funded tertiary institution, the Oslo and Akershus University College of Applied Sciences (HiOA), administers national certification while a government agency, the Directorate of Integration and Diversity (IMDi), grants the certification.

^b This is both a test of language proficiency and skill in inter-lingual transfer.

^c While the DPSI examination does not specify a lack of criminal record, a lack of criminal record is a requirement for registration onto the NRPSI.

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Table 1 above and the asterisked notes show that certification is conducted either by governmental organizations, or by nonprivate providers such as NGOs (CISOC in Canada) or an educational trust (of the CioL in the UK). Language proficiency testing is not usually a prerequisite, while a formal examination of skill in interlingual transfer is part of all certification systems. According to the attributes listed above, no previous experience is required in any system, but applicants must usually be of a minimum age. Evidence of a ‘clean’ criminal record is not required for any tests, and is, in fact, usually not mentioned at all. Reflecting the fact that signed language interpreting is often conceived of or classified in a separate way, only one of the testing systems includes both spoken and signed interpreting (NAATI); the remaining do not, and testing for signed language interpreters occurs through other channels⁶. In some cases, practice or sample test materials are made available, and details of the format and skills tested are also publicly accessible. Statistics on pass rates are sometimes published. It appears that their function is not only to inform interested parties of the rate of successful test-takers, but to alert potential candidates of the relative difficulty of the test.

A distinction between the Australian and Canadian certification systems on the one hand, and the Norwegian and UK ones on the other, is the requirement for specialization that applies in the latter two countries – in the areas of law, health and public services in general. This is a consequence of training being a strongly advised attribute for the DPSI test and the NICE. Exams are also video- or audio-recorded⁷. This indicates also that ‘live testing’, that is, the presence of one or two other speakers for whom the candidate interprets, may not always be possible, and that test candidates can be provided with recorded speeches/dialogues, which they then interpret, and their interpretations are recorded and sent to examiners. Two of the systems require a renewal or revalidation of certification, on the basis of demonstrated further professional development, rather than retesting. The DPSI and admission to the Norwegian National Register of Interpreters are credentials that carry the weight of a legal title.

The components of the four testing systems above compare favourably when matched against the components of the certification systems that were presented in Stejskal’s (2005) overview of 63 T&I professional associations across 40 countries, and Turner and Ozolins’ (2007) data on a smaller number of T&I testing and certifying bodies⁸. A favourable comparison refers here to the fact that it is possible to more transparently ascertain attributes of the four testing systems above. There is public availability of test components, of sample tests and availability of training opportunities that pertain to these four systems.

In the studies of Stejskal (2005), Turner and Ozolins (2007) and Hlavac (2013), the following general findings from a cross-national perspective could be reported about testing and certifying authorities globally: many do not include tests on language proficiency as a ‘stand-alone’ feature; a minimum education level (normally completion of secondary school) is a usual requirement; video or audio taping of interpreting exams is often not specified; the details of the interpreting tests are not publicly available; training is usually not required or even offered as a corequisite.

4.1 Components of Testing Systems

Attention now switches to the components of the tests themselves. Tables 2 and 3 below present performance or skill criteria that must be demonstrated for a test candidate to pass the test and gain the desired certification. Three of the testing systems are in predominantly Anglophone countries, while one is in Norway. The language

⁶ In Canada this occurs firstly through possessing a community college diploma and having one of the following: five years’ experience as a signed-language interpreter; membership in the Association of Visual Language Interpreters of Canada, and secondly after passing a written and then a practical exam in English or French and ASL or LSQ (PWGSC, 2014). In Norway, certification to become a sign language interpreter occurs in 3-year courses at postsecondary institutions located in Bergen, Oslo and Trondheim (Leeson, Wurm, & Vermeerbergen, 2011). In the UK, it occurs through registration with the National Registers of Communication Professionals Working with Deaf and Deafblind People (n. d.), which requires evidence of completion of an interpreting qualification.

⁷ The Auslan (Australian Sign Language) interpreting test, conducted by the Australian authority, NAATI, is always video-recorded. This is necessary for non-present examiners to examine signed-language interpretation.

⁸ Both these studies examine T&I testing and certifying systems in general and were not restricted only to the field of community interpreting.

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designations used here are ‘Eng.’ (English), ‘LOTE’ (language other than English), ‘Nor.’ (Norwegian) and ‘LOTN’ (language other than Norwegian). Some testing systems contain two stages, and completion of the first stage is highly recommended before undertaking the next stage, usually the (main) test itself. These are listed as ‘hurdle’ components. The presentation of performance skills that are demonstrated at the hurdle stage relate to those that are discernible items in the testing and certification system. In testing systems that require training as a pre- or corequisite to the ‘main test’, particular performance skills that may be part of the training are otherwise not listed as a ‘hurdle’ unless there are specific performance skills listed in the accompanying training. The Norwegian Interpreter Certification Exam, co-ordinated by the IMDi, also consists of two parts, the first written part being a prerequisite for the second, oral component, which is undertaken 3 to 4 months later. For the DPSI, there is no actual ‘hurdle’ that test candidates need to pass—anyone can attempt the DPSI final exam and attain the qualification. However, training courses for the DPSI are strongly recommended and those skills that are ascertainable from the pretest modules are listed in Table 1.

Where there is evidence that a performance criterion is tested this is represented with a ‘Yes’. Where information is available that this is not elicited, a ‘No’ response is given. Where sought information is not applicable or congruent to the testing system ‘N/A’ (‘not applicable’) is used to refer to a feature that does not apply to the test, while the response ‘N/Avail’ (‘not available’) indicates that information on that feature is not available.

Table 2: First-stage components of the testing system for admission to the ‘main test’ (Norway); Typical components of preliminary training recommended to test candidates for the DPSI (UK).

	Australia	Canada	Norway	UK
Test Attributes	NAATI	CILISAT	NICE	DPSI ^a
Test of proficiency in Eng./Nor. or LOTE/LOTN	No hurdle test required	No hurdle test required	No	N/Avail.
Written translation test Eng./Nor. < > LOTE/LOTN			Yes	N/Avail.
Specialist exercises – terminology (legal/health) in Eng. & LOTE / Nor. & LOTN			Yes	Yes
Ethics / Standards of practice / Roles of interpreter			Yes	Yes
Knowledge of legal responsibilities & liability			Yes	N/Avail.
Cultural awareness			Yes	Yes
Written / Oral			Written	Both
Online delivery available			No	Yes
Pass mark			80%	Certificate of completion (min. 85% attendance)

^a Training courses for the DPSI are optional, as previously stated. The information provided here is taken from an online education provider that offers training for the DPSI exam, and is taken from its description of training provided (DPSI Online, 2015).

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Table 2 above shows that the community interpreting testing systems in Australia and in Canada do not contain hurdle requirements for admission to the ‘main test’. In the first-stage testing in Norway, and in pretest training in the UK, demonstration of language proficiency in Norwegian or English and LOTN/LOTE is not elicited. Translation is a feature of the NICE test that requires candidates to complete bi-directional translation of terms and the translation of a text of 250–350 words into Norwegian. Knowledge of specialist terms through monolingual elicitation is conducted in DPSI pretest training. Knowledge of role, role-relationships, ethical considerations and/or knowledge of a relevant code of ethics/conduct is usually elicited at this first stage (and usually retested at the second stage). Cultural awareness or knowledge of cross-cultural pragmatics is less commonly elicited. The first-stage test (Norway), or pretest training (UK), are offered in written or written/oral form. Although ‘uncharacteristic’ for interpreting, a written performance from test-takers is logistically simpler to administer and to distribute, and literacy skills, including computer literacy skills, are now an attribute required of contemporary community interpreters. Attention now turns to the components of the ‘second-stage’ or ‘main test’ in all countries’ testing systems.

Table 3. Second-stage components or the ‘main test’ for certification.

	Australia	Canada	Norway	UK
Test Attributes	NAATI	CILISAT	NICE	DPSI
Max. time limit between hurdle/pre-requisite and sitting test	N/A	N/A	N/A	5 years
Minimum formal standard of general education required	Yes	No	No	No
Formal T&I training as a pre- or co-requisite for admission to main test	No	No	No	No
Consecutive Dialogue Interpreting Eng. <> LOTE / Nor. <> LOTN.	Yes	Yes	Yes	Yes
Consecutive Speech Interpreting Eng <> LOTE / Nor. <> LOTN.	Yes	Yes	Yes	No
Sight translation Eng <> LOTE / Nor. <> LOTN.	Yes	Yes	Yes	Yes
Simultaneous interpreting (general) Eng <> LOTE / Nor. <> LOTN.	No	No	No	Yes
Simultaneous interpreting (chuchotage) Eng <> LOTE / Nor. <> LOTN.	No	No	No	Yes
Simultaneous interpreting (specialist area) Eng <> LOTE / Nor. <> LOTN.	No	No	No	Yes
Written translation Eng <> LOTE / Nor. <> LOTN.	No	No	No	Yes
Language proficiency in Eng & LOTE / Nor. & LOTN. marked as a feature <i>internal</i> to recorded performance	Yes	Yes	Yes	Yes
Knowledge of medical / legal terminology as <i>separate</i> area	No	No	No	No
Cultural competence	Yes	Yes	No	Yes
Knowledge of ethics	Yes	Yes	Yes	N/Avail.
Offered online	No	Yes	No	No
Pass mark	70%	75%	90%	50%

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Table 3 above shows that there is some variation in the time that may elapse between when a candidate completes a first-stage test or training and then undertakes the second-stage test. For the NICE, this period is usually 3 to 4 months, while for the DPSI with requirements for specialization in law, health, or local government, the test must be taken within 5 years of registration to sit the test (usually when pretest training is undertaken). For the Australian NAATI interpreter test at professional level, a postsecondary qualification of at least 1 year is required *or* the preceding level of certification (i.e., *paraprofessional* interpreter accreditation, NAATI, 2014, p.8).

Dialogue consecutive interpreting and sight translation are attributes of all tests, while consecutive interpreting of longer stretches of speech, usually delivered in the form of a monologue, i.e. consecutive ‘speech interpreting’, is an attribute of all tests, except for the DPSI. Simultaneous interpreting is restricted to the DPSI. The DPSI is also the only test that explicitly requires whispered simultaneous interpreting (general, as well as chuchotage). The DPSI test is also the only one to include a written translation component. (The NICE test included translation of both short texts and words/expressions in the first or hurdle test. cf. Table 2.)

Most of the tests also elicit familiarity in ‘cultural competence’, that is, questions on cultural–pragmatic traits of groups of speakers and the ways that these are displayed in communicative interactions, particularly where these traits are possibly not recognized in the same way by groups of speakers whose cultural–pragmatic traits are different.

Other attributes are not explicitly tested. These include: inter-personal skills of explanation and delineation of the interpreter’s role, bi-cultural proficiency in pragmatics and proxemics, adaptation to different speakers’ idiomatic and discourse features, and interaction management skills. In fairness, these are ‘less straightforward’ attributes of interpreting performance, and more readily assessed in a cumulative or holistic sense, where examiners assess a candidate’s apparent ‘overall’ ability to display knowledge of the pragmatics of both language groups, ‘managing’ an interaction and so forth.

For some testing systems, these attributes are not explicitly assessed. For example, the CILISAT test is frank in an admission that it “does not measure... interpersonal communication skills” (CISOC, n.d., p.6). But for the DPSI test, examiners are supplied with descriptors of general performance in a grid of rubrics and are asked to locate attributes such as “reflects tone, emotion and non-verbal signs appropriate to situation”, “handles intercultural references correctly”, “displays good management strategies intervening appropriately and only when necessary to clarify or ask for repetition or prevent breakdown of communication” in the performance of test candidates and to allocate a score along a scale of four mark ranges (IoL Education Trust, 2010, p.11). Turner (2008) had proposed that such a marking system, with descriptors for such features, be considered for the marking of NAATI tests in Australia.

Knowledge of ethics (i.e. familiarity with relevant codes of ethics or conduct and the ability to cite a principle that guides behaviour in hypothetical situations) is tested in the NAATI and CILISAT tests, but it is not generally re-tested in the main test of the other systems. A feature of agencies that employ and supply community interpreters (CISOC, 2011), or national directories (NRPSI, 2015) that list them, is that they provide assurances that supplied or listed interpreters adhere to relevant ethical standards (i.e. nationally or locally declared ones). Abiding by the local (national) codes of ethics/conduct is now also a component of the ISO Guidelines for community interpreters with multiple entries (ISO, 2014, pp.12, 15, 20). The mark required for successful completion of the test is not usually 50%, which is the usual threshold for minimum acceptable standards in Anglophone countries, but well above it – usually 70%. (The DPSI test is an exception to this).

4.2 Attributes of Certification and Training

Training is recommended for the NAATI, CILISAT, NICE and DPSI tests, but not compulsory. The relationship between training and certification, although not axiomatic, deserves some attention, and training opportunities are briefly outlined in relation to each of the testing systems.

In Australia, the majority of interpreting accreditations (54%) are conferred through a candidate having completed a NAATI-approved course, not through the candidate passing a NAATI standalone test (J. Beever, personal communication, 20 October 2014). Training, although not yet a prerequisite to NAATI accreditation, is now the more popular pathway to certification in Australia. Some level of mandatory training is also suggested in the ‘Improvements into NAATI Testing’ project (NAATI, 2012).

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The CILISAT test requires the purchase of a textbook for preparation (which contains the equivalent of 70 hours of unsupervised, self-directed exercises⁹) and a pre-test interview, but there is no information to show that training is *required*¹⁰. The increasing importance awarded to training, from it being a desirable pathway to testing to a co- or even pre-requisite to testing, is demonstrated in the system of registering interpreters in Norway. The Norwegian National Register of Interpreters distinguishes five categories of registered interpreters: Level 1: interpreters with national certification and university-level interpreter training; Level 2: interpreters with national certification only; Level 3: interpreters with university-level interpreter training (\approx 30 European Credit Transfer and Accumulation System [ECTS] points); Level 4: certified translators who have completed a 3-day intensive course on interpreting techniques; Level 5: potential interpreters who have a mark of 80% or above from the NICE's bilingual test, and who have completed a short course on interpreting ethics and techniques. Users of interpreter services in Norway are informed of the registered level of the interpreter as well. In Australia, demonstrated performance level also distinguishes *paraprofessional* from professional interpreters and there is a slightly higher pay-rate that almost all agencies/providers pay to professional interpreters compared to paraprofessional ones.

The transition from 'stand-alone' tests (as the sole pathway to certification or registration) to training has been taking place in Norway for some years. The Oslo and Akershus University College of Applied Sciences (HiOA) administers and conducts university level training, which is now the desired end-point of registration for interpreters in Norway. The HiOA conducts not only a course entitled 'Interpreting in the Public Sector' (30 ECTS), but in recent years has also developed and introduced university-level courses, each with a value of 15 ECTS. The HiOA aims to have a program of units available by 2018 that will constitute a Bachelor (in interpreting) of 180 ECTS. The professionalization of the 'conference interpreter', which to a considerable degree has occurred due to the emergence of university-level under-graduate and post-graduate courses to train students to become conference interpreters, is now occurring for the 'community interpreter' through the emergence of equivalent university-level courses, for at least a certain number of languages. (Languages of less diffusion are not commonly included in university-level programs, but potential interpreters in such languages may be serviced by an emerging type of course, 'language-neutral' courses. cf. Hlavac, Orlando, & Tobias, 2012).

The UK DPSI is a benchmark examination where those who pass it can seek not only registration with the NRPSI, but also gain a diploma. The DPSI is a qualification that seeks to train and test potential interpreters in the three largest fields of community interpreting: health, law and local government. It is a credential that entitles the holder not only to apply to the NRPSI, but also for membership of the national professional association, the Chartered Institute of Linguists (CIoL) and to advance directly to post-graduate Master-level courses in T&I.

5. ISO Guidelines for Community Interpreting

As stated above in section 3, the ISO Guidelines that were released in 2014 do not clearly state whether community interpreting includes court interpreting or examples of 'legal' interpreting. As shown above in the case of the four certification systems that are the focus of this paper, all four include court and other forms of legal interpreting. The lack of clarity of the ISO Guidelines perhaps undermines a recommendation made in them: "Community interpreting occurs in a wide variety of dissimilar settings and should not be confused with other types of interpreting." (ISO, 2014, p.v.). Notwithstanding this, the ISO Guidelines attempt to offer a broad picture of community interpreting and contain the following seven sections:

⁹ These exercises include, amongst others, memory extensions drills, note-taking, sight translation practice, information on cross-cultural communication and hypothetical scenarios and anecdotes on effective management of multi-party interactions.

¹⁰ CISOC (n.d., p.4) informs test candidates that CISOC will itself employ (or "retain the services") of those test candidates who gain not only 75% in the CILISAT test but those who subsequently complete a mandatory 70-hour training program.

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1. Scope;
2. Terms and definitions (including concepts for both interpreters and the interlocutors/organizations with whom they work);
3. Basic principles of community interpreting;
4. The community interpreter's competences and qualifications;
5. Recommendations for clients and end users;
6. Responsibilities of interpreting service providers (ISPs);
7. Role and responsibilities of community interpreters.

As can be seen, the first three sections of the ISO Guidelines introduce interpreting and community interpreting to a nonspecialist readership. This is a general characteristic of ISO standards that provide definitions and descriptions in lay terms in their initial sections. Section 4 is the first section to specify the skills that a community interpreter *should* possess. This modal verb is the one most widely used and indicates that the ISO Guidelines are not only descriptive but also *prescriptive*: “Community interpreters should have the ability to convey a message from the source to the target language (be it spoken or signed) in the applicable mode” (ISO, 2014, p.7). This quote also shows that the ISO Guidelines relate to both signed and spoken interpreting. The ISO Guidelines in sections 5 and 6 include suggested procedures for those working with community interpreters. The verb *should* is used also in these sections: for example, “During the interpreted communicative event, the client or end user should . . . avoid interrupting the community interpreter; allow the community interpreter to finish his/her statement” (Section 5) and “The ISP [Interpreter Service Provider] should . . . brief the client on how to work effectively with community interpreters” (Section 6; ISO, 2014, pp.9, 10). It is admirable that protocols are suggested also for those who work with community interpreters. In this way, the ISO Guidelines (like all ISO standards) are different from a professional code of ethics in that they address all parties to the interaction or occupational setting. Section 7 of the ISO Guidelines contains general recommendations on role-relationships, including ones specific to interaction and discourse management, for example, “Community interpreters should . . . intervene (verbally or non-verbally) when speakers do not allow community interpreters to perform their job or when speakers speak too fast” (ISO, 2014, p. 11).

Discussion of the ISO Guidelines focuses here on those sections which specify skills level requirements and levels of demonstrated performance. I focus here only on sections 4.2.1 ‘Competences relating to interpreting’, 4.4 ‘Interpersonal skills’ and 4.5 ‘Evidence of qualifications’, which are relevant to the previous discussion on certification of community interpreters in the four countries presented above in Section 4.

5.1 *The ISO Guidelines for General Skills Required for Community Interpreting*

The ISO Guidelines contain requirements of linguistic proficiency: “linguistic ability in their working languages based on accepted standards of language proficiency. This means the community interpreter should be able to understand and produce technical and non-technical language...” (ISO, 2014, p. 8). Other attributes of the ISO Guidelines that are hurdle or admission components of the four certification systems from above are presented below (cf. Table 2).

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Table 4: Skill level attributes of the ISO Guidelines for Community Interpreting

Linguistic and discourse/pragmatic attributes	ISO Guidelines
Test of proficiency in A-language, B-language	Yes
Written translation test	N/App
Proficiency in specialist terminology (e.g. legal/health) in both languages	Yes
Ethics / Standards of practice / Roles of interpreter	Yes
Knowledge of legal responsibilities & liability	Yes
Cultural awareness	Yes
Written / Oral	Oral only
Online delivery available	N/App
Pass mark	N/App

The ISO Guidelines require a level of linguistic proficiency that is to be demonstrated through “documented evidence of successful completion of a language proficiency test, or other evidence of language proficiency...” (ISO, 2014, p. 8). Further, active production skills in specialist terminology in both languages are prescribed. In addition, the ISO Guidelines require that community interpreters follow ethically defensible courses of actions and abide by local (i.e. usually national) codes of ethics or conduct. In six places in the 22 page-document, community interpreters are instructed to follow such codes and/or otherwise act ethically.

In the ISO Guidelines, much attention is afforded the ‘role of the community interpreter’. Protocols that inform all parties of the specific functions and role of the community interpreter are recommended, for example, “. . . if allowed, properly introduce himself or herself to all parties and explain the role of the community interpreter” (ISO, 2014, p. 12). Cultural awareness is an area that also receives substantial attention. Community interpreters are required to “display cross-cultural competency”, “understand and convey cultural nuances”, “if requested or possible, interrupt to point out the existence of a cultural barrier (cultural custom, health belief or practice) . . . when such a barrier can result in miscommunication or misunderstanding” (ISO, 2014, pp. 8, 11, 12).

Attention now focuses on the particular interpreting skills that the ISO Guidelines specify. Table 5 below lists those interpreting skills that are matched against the components of the certification systems in the four countries discussed above in sections 4.1 and 4.2. Table 5 below lists the same attributes that were listed in Table 2, and notes whether these are specified as attributes that an interpreter should display to conform to the specification of ISO 13611.

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Table 5: Interpreting skills from national community interpreting certification systems and their representation in the ISO Guidelines for Community Interpreting

Interpreting skills and interpreter attributes	ISO Guidelines
Minimum formal standard of general education required	Yes
Formal T&I training as a pre- or co-requisite for admission to main test	Yes
Consecutive Dialogue Interpreting	Yes
Consecutive Speech Interpreting	Yes
Sight translation	Yes
Simultaneous interpreting (general)	Yes
Simultaneous interpreting (chuchotage)	Yes
Simultaneous interpreting (specialist area)	N/A
Written translation	N/A
Language proficiency conceptualized as a feature <i>internal</i> to performance	Yes
Knowledge of medical / legal terminology as <i>separate</i> (or definable) area	No

Table 5 above shows that the ISO Guidelines contain most interpreting skill requirements that nearly all of the four national certification systems require: short consecutive (dialogue), long consecutive (speech), and it includes simultaneous interpreting (including chuchotage) that is not required in three of the four national testing systems, although it is much less clear whether the ISO Guidelines prescribe simultaneous interpreting in specialist fields. The inclusion of simultaneous interpreting is to be expected for guidelines that encompass both signed and spoken interpreting as simultaneous interpreting is a more common form, (although not necessarily the ‘default’ form of interpreting) for signed interpreting.¹¹ A lack of distinction between the two modes and a comprehensive listing of many types of interpreting creates the impression that all types of interpreting listed are applicable in the same way to both signed and spoken language interpreting. In general, simultaneous interpreting is less frequent in spoken community interpreting compared to signed interpreting.¹²

The ISO Guidelines also specify minimum formal standards of education. In the first instance, a university degree or “recognized educational certificate in community interpreting” (ISO, 2014, p. 8) is set as a criterion of expertise. In the absence of a degree or specialist certificate, the following five alternative criteria are provided, in order of preference:

“A degree in any academic field”, and two years’ experience as a community interpreter or a relevant educational certificate in community interpreting;

“An attestation of competence in interpreting awarded by an appropriate government body... or recognized professional organization” with proof of experience in community interpreting;

“Membership in an existing nationwide register of interpreters”;

¹¹ I do not suggest here that simultaneous interpreting is the default mode for signed language interpreting. Further, as research and pedagogy on signed language interpreting indicate, consecutive signing has been shown to often be more accurate than simultaneous signing (cf. Russell, 2005).

¹² The testing system of one of the national certifying authorities, NAATI, reflects this through the inclusion of simultaneous interpreting in the signed language professional interpreter test, while only consecutive interpreting is tested in the spoken language professional interpreter test.

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“Five years of continuous experience in community interpreting” where no post-secondary educational qualifications are possessed;

“Certificate of attendance to further vocational training modules (ISO, 2014, p. 8)

Thus, the ISO Guidelines advocate training in T&I as an attribute that a community interpreter should possess, and where this is not possessed, other postsecondary training and/or 5 years’ experience as a community interpreter are required. It is also noteworthy that the ISO Guidelines do not only defer to local (i.e. national) requirements of training for community interpreting, but, in addition, send a clear message that training and formal study of interpreting are highly desired attributes that practitioners should hold.

6. Conclusion

What is clear from the above comparative analysis and discussion of testing systems and the ISO Guidelines is the trend for more recently developed systems to include a wider range of the following: inter-lingual skill capabilities, for example, simultaneous interpreting (general and chuchotage); theme-specific knowledge, for example, interpreting in specialist areas such as law, healthcare; inter-cultural expertise, for example, cultural competence. Further, knowledge of relevant codes of ethics or conduct is either a component of tests, or a condition of acceptance into a national register. Knowledge of liability that interpreters may bear in the course of their work appears in the pre-test training of one certification system only. This last attribute, detailed knowledge of each language group’s socio-cultural features, was listed in a broad survey conducted by Chesher et al. (2003) as the second most important skill that interpreters believe they should possess. Further, knowledge of relevant codes of ethics or conduct is either a component of tests, or a condition of acceptance into a national register. Thus, examination of the most recently developed certification systems and of the ISO Guidelines shows us that contemporary testing now includes the demonstration of not only a wider number of skills, but also a greater level of skill complexity.

Interactional management skills that can only be demonstrated in test settings with other live protagonists are listed as desirable, but less prominently tested. This is a consequence of the often recorded nature of tests, which is also a consequence of increasing numbers of test-takers and/or the need to deliver the same test across a wide geographical area. Further, knowledge of the discourse-pragmatic norms available to (although not always practised by) speakers of the two participating languages and the ability to render these in the other language with the same intended effect is not identified as a specific testable attribute. Instead, this is likely to be an attribute subsumed under a candidate’s general ability to interpret, although the transfer of not only the referential content, but the manner of its transfer, is an important part of interpreting. Holistic qualities such as the ability to manage stress and fatigue or to practise self-care are not listed anywhere. A requirement for professional development subsequent to testing is not part of a testing system as such, but it has become a requirement now for re-certification in a system that applies a time limit for initial certification.

An important trend that is ascertainable is the role of training in tandem with testing. ‘Stand-alone’ testing without training remains a possible, but now a discernibly dispreferred, course of action. Interpreter training is offered in the four countries, and training courses that are associated in some way to the testing exist in three of the four countries. This indicates a reciprocal relationship between the two: a contemporary testing system that gradually includes a larger number of demonstrated skill attributes that compels the testing authority or other related educational institutions (or possibly professional associations) to offer pre-test training. Of course, pre-test training, or even training concurrent with testing, offers the opportunity for test candidates to acquire (and demonstrate) skills that are traditionally elicited in interpreting tests, such as dialogue interpreting and sight translation, but also ones that are less often and less easily elicited in tests, such as role-relationships with others, management of interactions and knowledge of ethical requirements. None of the testing systems have so far made training a *pre-requisite* of testing, but the preferred pathway that now includes training is clearly discernible. The preferential pathway of training is clear also from the ISO Guidelines that prioritize university-level interpreting education as the prime attribute, with other attributes that include less training scaled at a lower level.

Recent proposals such as the 2014 NOU Official Report in Norway on the use of interpreters in the public sector include recommendations for the mandatory employment of “qualified interpreters”, who possess level 5

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certification that includes as a minimum, short course training and a test (Norwegian Ministry of Children, Equality and Social Inclusion, 2014). A further recent proposal in Australia is that for minimum levels of training as a pre-requisite for testing: “all candidates complete compulsory education and training in order to be eligible to sit for the accreditation examinations” (NAATI 2012: p. 7).

From this it is clear that testing alone provides a basic, ‘one-off’ demonstration of some skills, but testing and credentialing systems are now increasingly employing training as an accompanying feature of skill acquisition and development. There is now a widening array of skills included in certifying systems, including skills that are less easily displayed or ascertained on a ‘one-off’ basis. As a consequence, skill-demonstration is likely to increasingly occur not only through means of more elaborate and detailed testing, but also through training that may function as a co-requisite to certification.

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Recommendations for Interpreter Training for Asylum Interview Settings: The South Korean Case

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Abstract

The growing number of asylum applications submitted in South Korea and the recent passage of the Refugee Act (2013) call for a system for the provision of professional interpreting service and the training of interpreters for the asylum process. Although a few ad hoc training initiatives have been implemented in recent years, there is currently no training course that fulfills the requirements of the Act. This article thus aims to propose an appropriate training program for the certification of interpreters to be engaged in asylum interviews. To ensure the effectiveness of the training, the proposed training framework begins with prescreening of training candidates based on an examination of their bilingual and basic interpreting skills. In order to accommodate the specific conditions of South Korea, under which it is difficult to find candidates proficient in Korean among rare-language speakers, a separate track of intensive Korean-language training for speakers of in-demand rare languages was appended as a preparatory course to precede the main body of the training, so that those who lack Korean proficiency have training opportunities to improve their language skills prior to interpreter training. The main training program is focused on the development of interpreting skills through autonomous learning.

Keywords: interpreter training program, curriculum, interpreting skills, asylum interview, South Korea

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Recommendations for Interpreter Training for Asylum Interview Settings: The South Korean Case

1. Introduction

The interpreter plays a critical role in asylum interview settings in which asylum seekers must provide their accounts through interpreters.² Mistranslation can seriously hinder the ability of asylum officers to elicit accurate information and can thus impede a just determination of refugee status. Therefore, when submitting their cases to concerned authorities, asylum seekers should be provided with interpreting service from competent interpreters (United Nations High Commissioner for Refugees [UNHCR], 2011). Given that it is the asylum seekers who actually bear the burden of proof to show that they have a well-founded fear of prosecution, and that interpreters for refugee status determination play an important role in bridging linguistic and cultural gaps between applicants and asylum officers, there is a need to establish a system that secures the provision of interpreting by competent interpreters. As such, the UNHCR (2010) recommends that professionally trained and qualified interpreters be engaged in asylum interviews, and where this is not possible, that the authorities ensure that interpreters demonstrate at least adequate interpreting skills, such as a competent command of the relevant languages; the ability to accurately and faithfully interpret what is said by both the interviewer and the applicant without omission, addition, comment, summarizing, or embellishing; note-taking skills; and gender, age, and cultural sensitivity in interpreting. In summary, in addition to interpreting skills, interpreting during the asylum process requires an understanding of both asylum procedures and the roles of participants, sensitivity to cultural differences, and keen awareness of professional ethics (Barnett, 2006; Kolb & Pöchhacker, 2008; Monnier, 1995).

Interpreters working in asylum settings are required to faithfully interpret every utterance issued during the interview—a central tenet of the professional ethics of interpreters. They must not offer advice, provide personal opinions, or voice individual views on a matter being interpreted (Refugee Advice Center, 2010). However, interpreters working in the asylum process have often been found to prompt applicants to respond, remind them to stay on the topic, summarize testimony, or edit out seemingly irrelevant information. Some of them may even coach applicants in what to say in asylum settings (Keselman, Cederborg, Lamb, & Dahlström, 2008; Keselman, Cederborg, & Linell, 2010; Kolb & Pöchhacker, 2008; Jieun Lee, 2012a, 2014; Merlini, 2009; Pöllabauer, 2004). Researchers have attributed such deviations partly to a lack of properly trained interpreters and public officials for the asylum process, which points to the importance of training for asylum settings.

Since South Korea became a signatory to the 1951 United Nations Convention Relating to the Status of Refugees in 1992, the number of asylum seekers in South Korea grew slowly until the mid-2000s (Koh, 2008), but it has increased sharply over the past decade. In 2014 alone, 2,896 asylum applications were recorded, which is almost double the figure for the previous year (Refugee pNAN, 2015). With this dramatic increase in asylum applications, the provision of quality interpreting has emerged as an urgent matter. Practices for the recruitment and training of interpreters vary by country. In the case of South Korea, where a lack of community interpreter training and certification systems has been identified (Jieun Lee, 2013; Lee, Chang, Choi, & Huh, 2014a, 2014b),

² In this article, the terms *asylum seekers* and *refugees* are used interchangeably.

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untrained and unskilled interpreters have been allowed to perform interpreting services mainly due to insufficient budgets and practical difficulties with finding interpreters competent in languages in demand in the asylum process. Asylum applicants, refugee advocacy groups, and their legal representatives have therefore raised issues regarding the language barriers faced by asylum seekers during the interview process, including a lack of provision of interpreting and poor interpreting quality (Kim et al., 2008; Koh, 2008). Despite some progress in terms of the provision of interpreting, trust in the quality of interpreting remains lacking throughout the asylum process, from asylum interviews to asylum appeal hearings (Kim, Lee, Choi, & Ruy, 2010; S. Kim, 2013; Jaekang Lee, 2014; Jieun Lee, 2014).

Because applicants' testimony is often a central evidentiary item for the legal determination of their refugee status, the quality of the interpreting during the Ministry of Justice (MOJ) interview is critical,³ and because immigration officials play the most important role in the determination of refugee status, inadequate interpreting at the initial interview stage can pose a profoundly serious problem to the case (Cha, 2011; Jieun Lee, 2014). When the stated facts at an appeal hearing are inconsistent with earlier testimony from the initial asylum application and interview records, the court may perceive such a discrepancy as an indication of a lack of credibility in the witness/applicant. For this reason, quality interpreting, from the initial interviews by MOJ all the way to appeal hearings, is vital (Jieun Lee, 2014). Recent asylum appeal cases overturning immigration authorities' initial decisions have acknowledged potential problems during interpreter-mediated interviews and questioned the accuracy of interpreted interview records (Seoul Administrative Court 2011. 11. 10. Judgement *kuhap*6493; Seoul High Court 2012.7.26. Judgement 2011*nu*41818; Seoul High Court 2015.1.28. Judgement 2014*nu*52093).

Against this backdrop, the Refugee Act was legislated in an attempt to raise the procedural standards for the refugee status determination process in South Korea (Kim & Kim, 2012).⁴ Since taking effect in July 2013, the Refugee Act has improved the mechanisms for verifying information collected from the testimony of asylum seekers during the interview by guaranteeing seekers' right to be provided interpretation and translation services and to check and confirm their interview records (Kim, 2012). The Act also permits them to request that the entire interview be audio or video recorded. The legal provisions also call for further improvement to interpreting quality. Article 14 of the Refugee Act stipulates that an interpreter who meets the related qualifications should provide interpreting during the course of an interview. The interpreter qualifications are prescribed in Article 8 of the Enforcement Decree of the Refugee Act. According to this decree, a person with a high level of proficiency in a foreign language who has completed a training course certified by MOJ is deemed eligible for interpreting during asylum interviews and is referred to as a "professional refugee interpreter."⁵ This is a brief expression describing professional interpreters engaged in asylum settings, not necessarily interpreters from refugee backgrounds themselves. With a provision that alternative measures for interpreting can be allowed if a professional refugee interpreter is not present or if the situation is urgent, Article 8 (3) of the Enforcement Decree indicates that the status of "professional refugee interpreter" differs from that of other interpreters who have yet to complete professional refugee interpreter training. The Refugee Act recognizes the need for professional interpreters during the refugee status determination process, as well as for specific training for such interpreters by distinguishing between the MOJ-designated training for professional refugee interpreters and a separate basic induction session for bilinguals (Lee, Choi, & Bae, 2014).

The new law calls for further improvement of interpreting quality by training interpreters and engaging trained interpreters in the asylum process. MOJ is legally obliged to provide professional quality interpreting, including translation and sight translation. Article 15 of the Refugee Act guarantees asylum seekers' right to check and confirm their interview records, which requires the participation of interpreters or translators able to accurately translate the written interview record into a language the applicant understands. In order to implement this facet of the law, it is necessary to screen interpreter candidates and train those who intend to work in asylum settings, but little progress has been made to date in this regard. It remains uncertain how interpreters are to be selected and

³ The MOJ is the authority in charge of the asylum process in South Korea.

⁴ The enactment of the Refugee Act, which was hailed by the South Korean government, has been met with skepticism on the part of some international law specialists, lawyers, and activists due to its lack of procedural rights protection and insufficient budget (Im, 2012; Jaekang Lee, 2014; Oh, 2012).

⁵ The term is based on an unofficial translation by Refworld; see <http://www.refworld.org/cgi-bin/texis/vtx/rwmain?page=search&docid=5507fa5c4&skip=0&query=refugee>

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trained as professional refugee interpreters under a training scheme recognized by the Minister of Justice. To this end, this article outlines such a potential training program, including criteria for selecting candidates and recognizing professional refugee interpreters. These recommendations are based on results from an MOJ-funded research project that was conducted from July to October 2014.

2. Training for Interpreting in Asylum Settings

In most countries that offer community interpreter training programs, training is included as part of community interpreting training, more specifically for migration-related interpreting. In the U.K. and Australia, for example, interpreter training is provided by universities. Immigration authorities are not required to offer intensive training for interpreters, but they do provide guidelines for the conduct of professional interpreters engaged in an asylum interview. Sweden provides a rare example in that it maintains a training component specific to the asylum process within its community interpreter training scheme, called “migration interpreting” (*Migrationstolkning*, formerly *Asyltolkning*), a 35-hour course module among the six that comprise the adult education interpreting training course. The module aims to foster basic knowledge and skills related to the asylum process and police interpreting under the Swedish Aliens Act, and to build intercultural competencies such as knowledge about gender, ethnicity, religion, and LGBT issues. The main contents of the module include the Swedish migration and asylum process, permit and citizenship matters, reception and integration, interpreting for children in the asylum process, interpreting technology and ethics, LGBT issues related to asylum and migration, terminology, and role playing exercises (S. Glans, personal communication, May 2014). The language of instruction is Swedish, and it is non-language-specific training (due to the limited number of trainees in minority languages, such as those frequently used by asylum seekers, training opportunities are commonly provided in non-language-specific mode). A minimum of three trainees per language stream are necessary for training purposes.

Egypt’s Cairo Community Interpreter Project (CCIP) provides systematic interpreting training in unique contexts. The project, affiliated with the American University in Cairo, began as a collaborative effort designed to address the challenges of refugee and migration fieldwork in migration transit countries (American University of Cairo, n. d.). Since 2002, CCIP has offered over 15 cycles of its interpreter training program in Egypt and over 13 interpreter training editions with refugee and migration organizations in other countries (A. Johnson, personal communication, August 2014). The training focuses on the acquisition of basic interpreting skills and the ability to perform appropriate roles in diverse contexts based on the analysis of specific situations. During the training phase, interpreting students develop analytic ability, discourse management, stress management, professional interpreting ethics, and practical skill development through role-play exercises. According to Alice Johnson, who has played a pivotal role in operating the CCIP as the program coordinator and teacher, it is a 12-week course with 120 contact hours, with some fluctuations triggered by sociopolitical factors. The language of instruction is English, and teachers instruct on interpreting between English and Amharic, Fur, Oromo, Somali, Tigrinya, and other languages in particularly high demand in the region. The program also requires a minimum of two students to facilitate practice and skill assessment. The training programs in both Egypt and Sweden admit students only after a screening process.

UNHCR (2010) recommends specific training for interpreters engaged in asylum procedures as a precondition for interpreter recruitment. It advises that training should cover the professional code of conduct for interpreters and include the following:

- the framework for international protection and the purpose of the personal interview;
- the importance of faithfully interpreting what is said by the interviewer and applicant;
- impartiality, neutrality, objectivity, and confidentiality;
- the role and proper conduct of the interpreter in the personal interview; and
- gender, age and cultural sensitivity in interpretation.

The UNHCR’s recommendations clearly indicate that interpreting in asylum procedures should be in accordance with community interpreters’ professional codes of ethics. ISO 13611, an international standard for community interpreting established by the International Standards Organization (ISO), also includes provisions concerning the role of interpreters in the asylum process. The ISO (2014) specifies that if requested to do so or

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when possible, interpreters may interrupt in order to point out the existence of a cultural barrier, for example a cultural custom, health belief, or practice, when such a cultural barrier could result in miscommunication or misunderstanding. Care should be taken not to provide explanations, but to clearly identify the misunderstanding so that end users can explore and clarify it with one another. Due to linguistic and cultural differences, misunderstandings in communication between asylum seekers and immigration interviewers are likely (Good, 2007; Jacquement, 2011; Maryns, 2006; Maryns & Blommaert, 2001). In order to prevent potential or apparent cultural misunderstandings, interpreters should be sensitive to cultural differences that may hinder communication, but the extent of interpreters' mediation in asylum interviews is generally restricted (Australian Government Migration Review Tribunal and Refugee Review Tribunal, 2014; Refugee Advice Center, 2010). The ISO (2014) also makes it clear that the interpreter's role should be limited to interpreting, without offering opinions or advice (even when requested to do so) or acting as an advocate. Given the importance of the role of the interpreter in the asylum process, interpreter training programs must include components on building trainees' awareness about interpreters' professional role and ethics.

3. Training Programs in South Korea

In South Korea, there is no legally established interpreter certification system, and there are only limited opportunities for community interpreter training in general (Lee, 2013; Lee et al., 2014a, 2014b). In order to address problems with the quality of interpreting arising from interpreters' lack of skills and training (e.g., Kim et al., 2008; Lee, 2012a, 2012b, 2013, 2014), some initiatives have been undertaken to train interpreters specifically for asylum settings. As background for the research project described, this article briefly discusses short-term training programs in South Korea focused on interpreting in asylum settings, in which the first author has participated as an interpreter trainer.

Two one-off training programs were organized under the auspices of MOJ, one in 2012 and one in 2013. The 2012 program was funded jointly by MOJ and UNHCR, whereas the program offered in late 2013 was funded solely by MOJ. In mid 2013, there was an additional training program jointly organized by the UNHCR, Dongcheon (a Korean public interest law firm), and the Graduate School of Translation and Interpretation (GSTI) of Ewha Womans University.

3.1. MOJ Training Initiative

To qualify for the MOJ training, native Korean-speaking (NS) applicants had to be capable of interpreting and translating between Korean and one or more languages among the 30 languages for which interpreters were being sought. Nonnative speakers of Korean (NNS) were required to demonstrate native-level proficiency in one or more of these 30 languages, and also to be capable of interpreting and translating to and from Korean or English.⁶ MOJ screened the applicants and selected 64 out of 82 for the 2012 program.

People without interpreting experience often mistakenly believe that if an individual is capable of conducting a conversation in a foreign language, he or she would be similarly capable of interpreting. This misconception was reflected in the process of trainee selection by MOJ officials. Candidates were selected based on interviews conducted in Korean, without any testing of their potential interpreting skills. It was revealed only later, during the in-class interpreting exercises, that many candidates lacked the bilingual abilities required to deliver a message accurately in another language. Nevertheless, upon completion of the program, all of the enrolled trainees were endorsed by MOJ as professional refugee interpreters. (This raises questions regarding official recognition under the new Refugee Act, but the related legal implications will not be discussed here.)

⁶ MOJ official notice no. 2012-50 (accessible in Korean at http://immigration.go.kr/HP/COM/bbs_003/ListShowData.do?strNbodCd=noti3090&strWrtNo=186&strAnsNo=A&strFilePat h=imm/&strRtnURL=IMM_3090&strOrgGbnCd=104000)

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The first program, held in March 2012, was initiated by a legal firm, Dongcheon, and co-sponsored by UNHCR Korea and MOJ. MOJ officials, lawyers, and NGO workers from Dongcheon, a representative of UNHCR Korea, and the first author participated as interpreting trainers. The 9-hour program was divided into two sessions composed of lectures, interpreting exercises, discussion, and a knowledge test. In the first session, training was conducted mainly through lectures on the fundamentals of interpreting for asylum seekers, the definition of refugee status, the legal procedures for refugee status determination, terminology, and certain practical matters regarding the asylum interview setting. The second session was a mix of lectures and practical exercises on dialogue interpreting. It culminated in a short test on refugee terminology and with role-play exercises aimed at instilling a code of conduct in the interpreting trainees.

The trainees were either already working or planning to work as interpreters in the asylum process and/or related legal assistance services. They were divided into two classes according to their level of Korean proficiency, and lessons were conducted in both Korean and English in order to support the learning of those with weaker Korean skills. Due to the large class size (over 30 people per class), only a limited number of participants gained a chance to perform in-class interpreting and receive feedback from the instructor, which was a major shortcoming of the program.

With the demand for interpreting services in asylum interviews continuing to rise in 2013, there was a call for additional MOJ-endorsed interpreters. As a result, a second MOJ-led training program for interpreters was initiated with expanded coverage of service languages. Given the situation in Syria, there was an acute demand for Korean–Arabic interpreters at the time. Eighteen trainees took part in this training program in 2013.

The program was split into two consecutive sessions of 4 and 5 hours, respectively. The majority of the trainees were practicing interpreters working for MOJ, but they did not have formal training. Because the group included trainees from local immigration offices outside of Seoul, the first session was held locally at respective immigration offices under their own training agenda on refugee policy and legal terminology. The second session was conducted at the MOJ building in Seoul and included the participation of all trainees from across the country. It consisted of lectures on the legal procedures involved in the granting of refugee status, legal terminology, and the code of professional ethics, followed by an additional 2 hours of interpreting exercises. Although the class size was smaller than in the previous year, it was still considered as too short to cover interpreting theories and ethical issues within the limited time frame, not to mention the difficulty of providing sufficient practice opportunities to each trainee.

From the interpreter trainer's perspective, there was unfortunately a serious issue with the linguistic capacity of the participants. The majority of the NS participants were incapable of interpreting a message accurately into their target languages, whereas the NNS participants, despite some of them claiming to be bilinguals, often struggled with performing sight translation because their reading in the Korean language lagged behind their speaking skills. The training was also non-language-specific, with Korean as a pivot. Given the combination of these disparities in linguistic abilities with the large number of trainees, it was difficult to conduct skill training effectively. As was the case in the previous year's program, the trainees had not been previously tested on their interpreting skills; they were already working in regional immigration offices as interpreters but still required basic training as interpreters. This situation clearly demonstrated a lack of understanding that the development of interpreting skill is an essential part of interpreter training. It also pointed to an urgent need to incorporate assessment of interpreting skills as a critical step in the training program for ensuring service quality. This failure to recognize the importance of the aptitude and bilingual skills required for interpreting stemmed from the lack of consultation with interpreter trainers during the preparatory stages of the training program.

3.2. Dongcheon–UNHCR–Ewha GSTI Joint Training Program

In the second half of 2013, a joint training program was organized by Dongcheon, UNHCR, and Ewha GSTI. Recognizing that learning and acquiring interpreting skills requires more than simply a few hours' training, the curriculum for this joint program was designed to span 34 class hours over the course of 6 weeks. It differed from the MOJ initiatives preceding it in that more hours were allocated to interpreting practice, on top of lectures on terminology and legal procedures related to the refugee status determination process. The target group for the training was conceived as either those who had completed one of the two MOJ training initiatives and wished to pursue refresher training, or those interested in working as interpreters in asylum settings who could demonstrate a

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mid-to-high level of proficiency in their working languages. Unfortunately, however, many training candidates were once again admitted despite failing to meet such qualifications. In addition, because the majority of the trainees were NNSs with relatively weak Korean-language skills (with the exception of a few Korean–Arabic interpreters), there was a need to enhance their Korean proficiency as part of the interpreter training. A separate module for the Korean language was thus introduced to the curriculum. In a nutshell, unlike its predecessors, the joint training program featured a stronger focus on interpreting skills and Korean proficiency. As a result, a more balanced and effective curriculum was created in three modules: basic understanding of legal assistance for refugees, interpreting practice, and Korean language (Table 1).

Table 1. Curriculum of the Dongcheon-UNHCR-Ewha GSTI joint training program

Week	Modules		
	Basic understanding of legal assistance for refugees	Interpreting practice	Korean
1	UNHCR and refugee protection	Interpreting 101	Korean I
2	Refugee status determination in Korea	Dialogue interpreting	Korean II
3	Refugee terminology	Consecutive interpreting	Korean III
4	Code of conduct for refugee interpreters	Sight translation	Korean IV
5	Role playing	Interpreting Exercise I (Relay interpreting)	Korean V
6	-	Interpreting Exercise II, Assessment	-

As can be seen in Table 1, the most distinctive feature of the joint program was the introduction of interpreting-skills assessment at the end of the program. Due to the lack of any such assessment in the previous short-term training courses, service users had no means to be apprised of the level of competency of their interpreters. In this program, however, information regarding the interpreters' skills was made available, as the assessment results were kept and made available for service users. The trainees themselves were also provided with feedback on their test performance from their Korean-language and interpreting teachers in the form of instructor comments on the back of their graduation certificates.

Despite the above-mentioned enhancements to the curriculum, challenges remained in the recruitment and screening of training candidates. Many applicants did not possess the necessary qualifications; many demonstrated only a limited command of Korean. The NGO responsible for recruiting trainees was not appropriately stringent in terms of the Korean-language requirement for trainees, and the interpreter trainer was not sufficiently consulted during the trainee screening process. Due to the weak linguistic competency of some trainees, it became difficult to teach even the most basic interpreting skills, and doubts arose regarding the effectiveness of the program. It is therefore strongly advised that candidates be selected based upon a rigorous screening process and that precautionary steps be taken to prevent the admission of trainees who lack bilingual proficiency. However, some exceptions should be allowed for minority-language speakers among whom it may be extremely difficult to find fluent Korean speakers. Because there is a need to provide interpreting services in these minority languages during the refugee status determination process, it is unavoidable to offer speakers of such languages training despite their falling short of the required Korean proficiency. In sum, although a training program should seek highly proficient bilinguals as its candidates, it is also important to remain open to minority-language speakers with

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limited Korean proficiency. Without a doubt, training may be more effective if the trainees are grouped according to their linguistic abilities and provided with customized training.

This review of the interpreter training initiatives implemented to date in South Korea reveals certain issues and challenges. First of all, there is a lack of systematic training opportunities for prospective interpreters for asylum settings. The previous training initiatives were primarily one-off and short term. Their curricula focused on the unilateral transfer of specialized domain knowledge and can hardly be recognized as proper interpreter training curricula due to the lack of interpreting practice components. Screening prior to training and assessment upon the completion of the training are required in order to support the intended training outcomes.

4. A New Training Model for Professional Refugee Interpreters

As mentioned above, the newly enacted Refugee Act mandates formal training of would-be interpreters prior to their official nomination as professional refugee interpreters. Unfortunately, however, prior training arrangements have lacked the necessary rigor, and the trainees who completed the programs often fell short of the interpreting skills required to fulfill the legal requirements. Hence, MOJ commissioned a research project directed at the development of a new interpreter training program.

As a first step, a review of the related literature and interviews with foreign experts were conducted as a means to gather information on the current practices in training and certifying interpreters in the public sector in general, with a special focus on the training and accreditation of interpreters working in asylum settings in Australia, U.K., Sweden, and the Netherlands. To gain a clear local perspective as well, a review was conducted of several emerging training programs for community interpreters in Korea in the areas of legal interpreting, medical interpreting, and interpreting for marriage migrants (e.g., Kwak, 2010; Lee, 2013; Lee et al., 2014b). (See Sections 2 and 3 for discussion of these findings.)

The training model subsequently proposed was devised from a broader point of view, taking into account all the relevant elements required for nurturing a pool of qualified prospective interpreters for engagement in the asylum process. Unlike the preceding short-term training initiatives, the suggested training model consists of multiple stages, beginning with a prescreening of the applicants, progressing to testing and certification of graduates, and finally deployment in the field. In other words, the proposed model not only focuses on training per se, but also includes a framework for testing and certification. This represents a marked divergence from existing training arrangements which primarily provide brief, lecture-type lessons on domain knowledge without proper screening or testing of trainees' bilingual proficiency and interpreting technique, and thus lack measures for managing and assuring the quality of interpreting service.

In order to maximize the benefits of training within the constraints of limited time and budget, it was deemed critical to promote self-disciplined and autonomous learning. Trainees themselves are encouraged to build their knowledge base and acquire know-how, while instructors provide supervision and scaffolding for learning. In other words, the proposed training program demonstrates strong elements of social constructivism. For example, interactivity is clearly emphasized in all classes, with teachers refraining from delivering instruction unilaterally and instead promoting a learning environment conducive to student participation. Trainees are encouraged to share their knowledge and opinions in support of the learning experiences of their peers.

With a learner-centered, social constructivist approach as its key training philosophy, the new training program is designed to be delivered in a blended learning format. *Blended learning* refers to a training methodology in which traditional classroom-type teaching is complemented by online learning activities (Secară, Merten, & Ramirez, 2009). Because the bulk of the trainees for the new program are projected to be working adults, it is not feasible to deliver training over extended continuous blocks of time. A short-term arrangement is equally inappropriate, given that properly acquiring interpreting techniques requires more time than a few weeks (except in the cases of accomplished bilinguals). Interpreter training programs in other parts of the world faced with a similar challenge have also found a solution through blended learning (e.g., Middlesex University and London Metropolitan University in the UK). Benefits of this approach include self-paced learning, so students can adjust the pace of their learning or even repeat the activity as many times as they wish. Convenient and individualized

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access to training materials and additional interpreting practice opportunities compound its value. The overall structure and flow of the proposed training program is shown in Figure 1.

Figure 1. Overview of the proposed training model



4.1. Screening of Trainees

The recruitment and selection of qualified training candidates is a critical first step toward ensuring the effectiveness of an MOJ training program and managing the quality of the interpreting services provided by its graduates. The screening criteria proposed for the new training program are three-pronged: legal status requirements, aptitude, and basic interpreting skills.

Legal status requirements are the fundamental standard for determining the eligibility of a candidate. An individual applying to the training program must be a Korean national or a foreigner with legal residency status. Generally, permanent residency is required for service as a legal interpreter in many parts of the world. However, this type of legal requirement would be too strict for application to the special circumstances of refugee status determination, where there is frequent demand for interpreting in rare languages but it can be extremely difficult to find candidates with permanent residency status to serve as interpreters.

Training candidates must be prepared to render services professionally in accordance with a code of ethics, and their demeanor and attitude may be subject to scrutiny during the screening stage. Korean and foreign-language proficiency tests and oral interviews assess aptitude for the program.

The most important consideration in the prescreening process is a candidate's basic interpreting skills. Candidates who are Korean native speakers must establish intermediate-to-advanced-level proficiency in their foreign working language. Any Korean national or foreign citizen whose native language is not Korean must provide evidence of Korean proficiency equal to or above Grade 5 on the Test of Proficiency in Korean (TOPIK), a standardized Korean proficiency test recognized by the Korean government. Candidates in rare minority languages with relatively weak Korean proficiency should be accepted to the program, however, as long as their level of Korean is equivalent to TOPIK Grade 4 or above. Rare-language speakers who do not meet this Korean proficiency standard may be referred to a preparatory course focused on advancing their proficiency prior to being allowed to join the training program. Those who meet these criteria may sit an entrance examination that assesses both bilingual and basic interpreting skills, based on the candidates' reading, writing, listening, and speaking skills in their working languages.

The number of trainees accepted into the program depends on the available training budget and the language combinations in demand. There should be no more than 15 participants per class, because in a larger group it is difficult to allow individual students sufficient opportunities to engage in practice exercises. As for language pairs, it is necessary to keep track of the variance in the national makeup of the asylum seekers over time and make adjustments to the language combinations for which training is offered.

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4.2. Training

4.2.1. Preparatory course

Under the proposed model, training is offered in two sequential but separate tracks of preparatory and main courses. This dual structure was adopted to accommodate the limited number of bilinguals with an appropriate command of Korean. One of the key principles of the new training model is to admit as trainees only those demonstrating strong bilingual skills. However, as discussed above, the reality of the situation is such that it is often difficult to find a rare-language speaker who is fluent in Korean. In such cases, *relay interpreting*, in which interpreting takes place through the pivot language of English, can be the only available option. This will serve over the short term to meet interpreting service demand in rare languages, but the long-term goal remains establishing a reliable pool of bilinguals with strong Korean proficiency. The preparatory course is designed to encourage foreign nationals, especially rare-language speakers, to apply for the interpreter training program, by helping them obtain Korean proficiency sufficient for entrance to the main course. Accordingly, the objective of the preparatory course is to deliver intensive Korean language training.

The proposed preparatory course is aimed at providing 40 hours of class over a period of 10 weeks and is offered to trainee candidates whose Korean proficiency is TOPIK Grade 4 or lower. The Korean-language subjects delivered in the preparatory course cover the four fundamental linguistic skills: listening, speaking, reading, and writing. In pursuit of maximum efficiency, the subjects are offered in a modular manner to allow enrolling students to choose the subjects they will study. This eclectic scheme was proposed based on the observation that on top of the variability of their Korean proficiency, candidates for training often lack balance across their various linguistic skills. Such a module-based arrangement is expected to allow students to concentrate on their areas of need.

Toward the end, successful students who demonstrate marked progress in their Korean proficiency during the course may be offered additional training in basic interpreting techniques. This will allow the preparatory course to be better aligned with the main course while providing the trainees a strong incentive toward learning. Given that the minimum Korean proficiency required for entry to the main course is TOPIK Grade 5, all students must prove upon graduation that they have achieved the required level. Students with high scores may be granted an exemption from sitting the entrance exam for the main course, which serves as a means to attract a greater number of potential candidates to the preparatory course and to motivate the students once enrolled.

In selecting and formulating training materials for the preparatory course, it is important to use linguistic materials that have a direct bearing on the domain of specialized interpreting for asylum seekers. For example, texts, audio/visual materials, and scenarios used in role plays must be derived from authentic, refugee-related situations. Also of great importance is collaboration with the Korean-language teachers. Because the preparatory course targets individuals learning Korean as a second language, instructors specializing in teaching Korean as a second language should be included among the faculty or be consulted regularly throughout the course.

4.2.2. Main course

The main course is proposed to run over 9 weeks with a total of 68 hours of both face-to-face and online classes. A detailed breakdown of the main course is shown in Table 2.

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Table 2. Proposed training model for professional refugee interpreters

Mode	Subject	Training hours	Note
Offline	Interpreting	24	Interpreting-degree holders are exempted.
	Thematic lecture	13	-
	Supervised practicum	4	-
Online	Korean	18	Korean natives or native-level speakers are exempted.
	Interpreting practice & glossary-building assignments	9	Interpreting-degree holders are exempted.
Total		Max. 68	-

Off-line training includes 24 hours of interpreting, 13 hours of thematic lectures, and 4 hours of a supervised practicum. Interpreting and thematic lectures are scheduled for 5 hours per day on weekends, out of which 3 hours are allocated to interpreting followed by a 2-hour thematic lecture. An online mode is proposed for Korean language training and interpreting-related assignments. Eighteen hours of Korean lessons and 9 hours of autonomous interpreting practice and glossary-building assignments are to be delivered online. Korean NS trainees are allowed to opt out of Korean lessons and therefore may receive a total of 50 hours of training. Likewise, trainees who already hold an interpreting degree may be excused from all interpreting lessons and simply enroll in the remainder of the course. As is illustrated in the breakdown of the training hours, the face-to-face off-line training is the main pillar of the proposed training model, and the online lessons are a supplementary component. In addition to online and off-line classes and activities, students make field visits to observe professional refugee interpreters at work during a 4-hour supervised practicum.

In interpreting training, the core of the curriculum, practice hours mainly consist of student participation rather than lectures delivered by an instructor. An ideal learning environment for an interpreting class is one in which trainees perform interpreting of a source text into a target text under the supervision of an instructor who is also a professional interpreter, along with an ensuing interactive feedback session featuring open discussion with the instructor and among students regarding interpreting errors and suggestions for improved expressions. For the sake of effective transfer of the procedural knowledge involved in the job, the instructor may occasionally perform interpreting as a form of demonstration. Among the various modes of interpreting, the proposed training model focuses on short consecutive interpreting, dialogue interpreting, and sight translation—the most frequently requested forms of service in the refugee status determination process. To maximize the training benefits within the limited time allowed, online activities through which more detailed feedback can be supplied by both the instructor and student peers can supplement face-to-face classes.

The program includes thematic lectures that deliver domain-specific knowledge, helping trainees to acquire bilingual glossaries of terms and expressions. As with interpreting lessons, interactivity during the thematic lectures allows active discussions to take place among class participants as they share information and opinions. Topics covered in thematic lectures include the refugee status determination process and refugee law, legal assistance for and protection of refugees, and interpreter stress management and emotional well-being—which is particularly important in this training context (see Splevins, Cohen, Joseph, Murray, & Bowley, 2010). Because asylum-interview interpreters deal with refugee narratives that often include accounts of traumatic experiences,

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the job can be emotionally taxing, particularly so for those who have refugee backgrounds themselves. It is therefore necessary to instruct them in how to manage work-related stress and nurture their emotional well-being.

Aside from in-class role plays in which trainees can simulate real interview settings, the supervised practicum offers trainees the opportunity to experience work as a professional interpreter. Trainees may visit immigration offices where asylum interviews are conducted and observe interpreted asylum interviews. Field visits may be followed by debriefing sessions allowing trainees to discuss what they have seen in terms of issues and challenges arising in the actual interpreting environment. With the supervised practicum, trainees can learn how to better cope with some of the difficulties related to interpreting in asylum interview settings and become better prepared for their future employment.

As mentioned earlier, two subjects are projected to be delivered online: Korean language instruction and interpreting-related assignments. Over the course of the 9-week program, 2-hour weekly Korean lessons are offered online. Trainees are asked to read or listen to a text and perform a task based on the linguistic input. They are then provided with an instructor's feedback as scaffolding for their learning of comprehension skills and expressions in Korean. Online Korean lessons take a variety of formats, including pronunciation clinics, listening tests, and online discussion.

Interpreting-related assignments constitute the other leg of the online training component. Specifically, in interpreting practice assignments, trainees are asked to collect texts and materials for interpreting exercises and submit recordings of their interpreting performances. This is expected to inspire autonomous and reflective learning while providing the trainees with more individualized attention through detailed feedback on their interpreting performance. Following each thematic lecture, trainees complete glossary-building assignments for which they compile a bilingual glossary and collect parallel texts on the topic in question and share them with the other students, to encourage interactive learning within the group.

4.3. Assessment, certification, and program evaluation

To be recognized as having officially completed the program, in addition to a skill test, trainees must have met the specified graduation standards, including 90% required class attendance and the submission of all assignments. Summative assessment is recommended because it encourages self-study and enables quality control of the graduates, as well as providing input for program evaluation. Under the proposed training program, the skill test serves the twin purposes of evaluating trainee achievement upon program completion and granting official recognition as professional refugee interpreters on the basis of test scores. The composition of the skill test is summarized in Table 3.

Table 3. Overview of the skill test

Skill test variable	Korean	Interpreting
Mode	Written	Oral
Score weight	20%	80%
Test task	• Multiple-choice questions • Short essay writing	• Sight translation (100 words each) • Consecutive interpreting (1 minute each) • Dialog interpreting (6–8 minutes)

As illustrated in Table 3, the test consists of two parts: Korean (allocated 20% percent of the total score) and interpreting (80%). For the Korean test, test takers are first required to answer multiple-choice questions, written in Korean, about their knowledge of refugee status determination procedures. They then write a short essay in Korean on an open-ended ethics question related to interpreting in asylum interview settings. The interpreting test consists of sight translation, consecutive interpreting, and dialogue interpreting in both language directions. The

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formation of a jury for the assessment of interpreting performance during the test is advised, ideally consisting of an examiner capable of assessing the foreign language in question along with an interpreting teacher or a practicing interpreter with sufficient teaching experience.

It is proposed that those scoring 70% or higher on the graduation test be officially certified as “professional refugee interpreters” under the Refugee Act, whereas those in the range of 60%–70% be recognized as “refugee interpreter candidates” with an opportunity to sit a retest after a predetermined lapse of time, before they are officially inducted. Only those certified as professional refugee interpreters should be allowed the legal status under the Refugee Act to interpret in refugee status determination procedures. However, in the case of a shortage of interpreters for certain language combinations, refugee interpreter candidates may be allowed to be deployed. This dual-qualification system is recommended as a means to fully utilize the human resources who have received formal training while informing service users of the qualifications or level of competence of the interpreters with whom they are working.

5. Conclusions

The growing number of asylum applications being submitted in South Korea and the passage of the Refugee Act call for a system for the provision of professional interpreting service and the training of interpreters for the asylum process. The Act mandates the use of “professional refugee interpreters” who have completed a training course recognized by the MOJ and been certified as such under the Act. Although a few ad hoc training initiatives have been implemented in recent years, there is currently no training course that fulfills the requirements of the Act. One-off, short-term programs developed without sufficient consultation with interpreting professionals and interpreter trainers have failed to deliver effective training, and no means are available for service quality management in terms of the provision of interpreting service to asylum seekers.

It should be noted that training and certifying professional interpreters must be performed from the outset in close consultation with interpreting experts (Amato & Garwood, 2011). All of the previous ad hoc programs implemented in South Korea were headed by individuals without a particular understanding of professional interpreting. In training and certifying professional refugee interpreters, interpreting experts must be involved and consulted from the design phase all the way to training delivery and program evaluation.

The MOJ-commissioned study is critical both for the effective enforcement of the Refugee Act and for the provision of quality interpreting service to asylum seekers in South Korea. To ensure the effectiveness of the training, the proposed training framework begins with prescreening of training candidates based on an examination of their bilingual and basic interpreting skills. In order to accommodate the specific conditions of South Korea, under which it is difficult to find candidates proficient in Korean among rare-language speakers, a separate track of intensive Korean language training for speakers of in-demand rare languages who lack Korean proficiency was appended as a preparatory course to precede the main body of the training. The main course is focused on the development of interpreting skills through autonomous learning. Most importantly, in order to meet the goals of the newly enacted Refugee Act, the proposed training program includes assessment and certification of trainees via a rigorous skills test.

Although the study discussed here was initiated upon MOJ’s request, it remains unclear whether the proposed program will be fully actualized, due to a lack of government funding. Still, there is a need to raise awareness, not only within MOJ but also among service users, of the need for and importance of nurturing qualified and competent interpreters in order to ensure fairness throughout the refugee status determination process. Therefore, a critical next step is to secure funding to initiate the program from the government budget and through financial contributions from related stakeholders. It is hoped that although this article deals with the South Korean case, the training model described here may be of use in other contexts.

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Storied Classrooms: Narrative Pedagogy in American Sign Language–English Interpreter Education

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Abstract

Narrative pedagogy is an educational method that draws on the power of stories to cultivate learning. Narrative has been described as the fundamental way that individuals “make sense” of events by connecting new information to their own lived experiences. In this article, we argue that narratives are underutilized in American Sign Language–English interpreter education, perhaps due to concerns about confidentiality. This article describes an educational project that incorporated narratives from experienced medical interpreters into an interpreting course. The primary learning objective for students was to become familiar with specific competencies necessary for successful practice in medical settings. Drawing on the document “ASL–English Medical Interpreter Domains and Competencies,” students individually interviewed 17 experienced medical interpreters to gain perspectives on competencies needed to interpret in medical settings. The interviews and resulting narrative data were used in the classroom to develop content knowledge about the competencies and to cultivate critical thinking regarding issues that arise in medical interpreting. We provide two samples of narratives collected by students and discuss our instructional methods with the students. We suggest that narrative pedagogy can serve as an effective instructional method in ASL–English interpreter education.

Keywords: narrative pedagogy, reflective practice, ASL–English, medical, domains, competencies

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Storied Classrooms: Narrative Pedagogy in American Sign Language-English Interpreter Education

To be human is to tell stories.

W. R. Fisher (1984)

In the early years of American Sign Language (ASL)–English interpreter training, highly skilled community interpreters (who often had Deaf parents or other strong community ties) were recast as teachers and assigned to classrooms, frequently without training or textbooks to guide their work. But what these newly minted teachers did possess – in abundance – were their stories. After years of working in the community, these interpreter-teachers had become rich repositories of narratives about their professional experiences. Stories were a valuable commodity in the budding years of interpreter education in the U.S. Few teaching materials were available. Research on interpreter pedagogy had not yet begun. Further, distinct courses on topics such as ethics, decision making, and professional practice were rarely offered, so teachers sandwiched stories about these topics in between rounds of interpreting practice. Although the storytelling was well intended, it often occurred without consideration of how the stories would enhance student learning. The degree of storytelling in the classroom may also have been shaped by a growing concern about “breaking the RID Code of Ethics” or “stepping out of role.” Thus, the opportunity for developing a rich narrative tradition within interpreter education withered on the vine.

What is the nature of stories in our lives? According to White (1980), humans are fueled by a deep-seated “impulse to narrate” (p. 5). As a result, we live in a world that is saturated by narratives (Clark, 2010). It has been said that narratives provide the needed plots to “help us interpret our own and other people’s experiences” (Sarbin, 1993, p. 59). Given that stories help us to “make sense” of the world (Doyle & Carter, 2003), we propose that authentic narratives be incorporated into ASL–English interpreter education. We argue that narratives can be employed to convey the complexity and nuances of interpretation work to students and teachers alike. To be clear, we are not proposing a return to the days of interpreter training when stories may have been one-sided accounts without preplanned educational goals. Rather, we recommend the use of stories based on principles of an educational approach known as *narrative pedagogy*. Originally developed by Diekelmann (2001) as a pedagogical method for nursing education, narrative pedagogy is an intentional approach designed to place “teachers and students into converging conversations wherein new possibilities for practice and education can be envisioned” (Ironsides, 2006, p. 479). Fundamental to narrative pedagogy is the belief that stories are an innate and powerful device to guide students in questioning their assumptions and considering situations from multiple perspectives (Dahlberg, Ekebergh, & Ironsides, 2003; Ironsides, 2006; Napier, 2010).

We provide a brief overview of narrative and narrative pedagogy as an approach to teaching. We then describe how authentic narratives from medical interpreters were collected and framed within a graduate interpreting course. Finally, we close with a few thoughts about narrative in interpreter education. By sharing this information, we aim to reenvision the old method of using stories in interpreter training and renew it as a viable educational

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approach to prepare interpreting students for contemporary practice. We make no claim to be experts in narrative pedagogy; in fact, we are novices in this approach ourselves. Perhaps appropriate for this topic, we merely wish to share *our* story with you.

Narrative and Narrative Pedagogy

To understand narrative pedagogy, we must first provide a definition of *narrative* or *story* – a task more complicated than it might first appear. Beginning in the 1970s and 1980s, definitions of narrative were developed by psychologists, feminists, authors, and linguists, such as Bell (1988), Bruner (1986), Dillard (1982), Labov (1972), and Linde (1993). Generally, narratives are understood as stories that include a temporal ordering of events and an effort to make sense of those events. People strive to make sense of their everyday experiences by narrating them; as a result, storytelling is an important way to bring cohesion to the seeming chaos of life's events. Humm (1989) reflected that "Narratives tidy things up – things that in real life may (or even ought to) be left lying awkwardly around" (p. 52). To make sense, stories must render, or signify, the experiences of people in a personal and culturally coherent manner (Sandelowski, 1991). Thus, not only do stories frame the social context in which we are embedded, they also help individuals to construct an understanding of themselves within the larger world (Clark, 2010).

Narrative pedagogy is an educational philosophy that assumes that individuals learn from hearing stories, from telling stories, and from positioning themselves in the narrative (Clark, 2010). The process of narrating one's evolving understanding of events to others is how people make learning clear to themselves. In narrative pedagogy, students and teachers engage in communal thinking and dialogue about their experiences with the aim of discovering new insights (Dahlberg et al., 2003). When students and teachers focus on hearing, telling, and positioning themselves in stories, they pool their wisdom, challenge their preconceptions, and envision new possibilities for providing services (Ironsides, 2006). In this way, narrative learning is reflective, from multiple perspectives, contextual, and experienced as a community.

Narratives have been collected and analyzed as data within a variety of research methodologies (e.g., phenomenology, grounded theory, ethnography), in a variety of ways (e.g., interviews, focus groups), and across a variety of contexts (e.g., medicine, education). According to Ironsides (2014), narratives hold a particularly critical role in medical settings. For example, in the diagnostic encounter, narrative provides a structure for patients to discuss their health, as well as to foster empathy and shared meanings between the medical provider and the patient. In treatment, narratives guide various therapeutic options between the provider and the patient. Anecdotes, or "illness scripts," may serve as the underlying form in which individuals accumulate knowledge about their own healthcare (Greenhalgh & Hurwitz, 1999).

Studies of narrative in medical settings have examined patients' and providers' stories; but how do the narratives of healthcare interpreters fit into this schema? Interpreters working in medical settings have experiences that often affect them deeply, but their perspectives are typically suppressed due to the need for confidentiality. We consider here how interpreter educators can draw on the power of narratives to add authenticity to student learning, while still preserving the confidentiality of the individuals involved.

Narrative Pedagogy and Reflective Practice in a Medical Interpreting Course

Signed language interpreters who regularly work in medical settings will inevitably witness highly intimate moments of life – times in which individuals and families experience great joy and relief and, at other times, are at their most vulnerable. In such settings, interpreters face critical decisions about how to effectively perform their professional role while maintaining their presence and voice (Nicodemus, Swabey, & Witter-Merithew, 2011). To develop insights about the intricacies of interpreting, students are exposed to a variety of learning methods, such as conferring with Deaf people, reading and discussing relevant articles and documents, reflecting on insights from observations, analyzing case studies, and engaging in supervision and mentorship. Each of these methods

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reflects the collective wisdom of other interpreters and guides the students' conceptualization of the competencies and decision making necessary for future work, especially in high-stakes situations such as medical interpreting.

Another means to develop effective skills in professional practice is to engage in guided reflection of narratives (Levett-Jones, 2007). In narrative reflection exercises, students are asked to give a brief account of or response to an actual episode that occurred during their work that resulted in new learning or understandings (Levett-Jones, 2007). When engaging in reflection, students have the opportunity to consider behaviors that may have otherwise gone unnoticed, as well as to develop an appreciation for the skills required in professional practice. Narrative reflection also provides a means for linking knowledge and practice through meaningful dialogue and interpretive analysis, all within a classroom in which the individuals whose narrative is being discussed can be assured of confidentiality.

In our project, 17 graduate students (16 hearing, one Deaf) were enrolled in a course on interpreting medical discourse. One of the target outcomes of the course was for students to become familiar with the "ASL–English Medical Interpreter Domains and Competencies" (CATIE Center & NCIEC 2008). In describing the competencies necessary in medical interpreting (Swabey & Craft Faber, 2012), the document identifies 13 general domains needed in medical interpreting, including:

- 1) Healthcare systems
- 2) Multiculturalism and diversity
- 3) Self-care
- 4) Boundaries
- 5) Preparation
- 6) Ethical and professional decision making
- 7) Language and interpreting
- 8) Technology
- 9) Research
- 10) Legislation
- 11) Leadership
- 12) Communication advocacy
- 13) Professional development

Under these 13 domains a total of 80 specific competencies are given as being critical to interpreting in medical settings.

The teachers in the course on interpreting medical discourse (Nicodemus and Cole) established several goals regarding student learning of the domains and competencies. The document contained important content for student learning, but the challenge was to engage students with it in a meaningful way. How could we make the document come alive for students? Our primary goal was for the students to demonstrate knowledge about the domains and competencies involved in medical interpreting, but we had several subgoals as well, including having students interact with experienced ASL–English interpreters who specialize in medical interpreting and to engage in a variety of research practices (e.g., gaining institutional review board (IRB) approval, using interview techniques, doing transcription).

To enact these teaching and learning goals, we created a small research project for the students that involved collecting and analyzing narrative data. We drew on Clark's (2010) proposal that narrative learning occurs in three ways: (a) hearing stories, (b) telling stories, and (c) positioning oneself within narratives. In addition, we built in activities for personal reflection, as proposed by Levett-Jones (2007). After obtaining IRB approval for the research project, each of the 17 students was paired with an ASL–English interpreter who was experienced working in medical settings. The interpreters were recruited through contacts provided by the CATIE Center as well as the teachers' personal networks. Students were instructed to interview their assigned interpreter about two preselected domains. Specifically, the assignment was to elicit stories from the medical interpreters about how the domains were present in their everyday work.

The interviews were conducted in either ASL or English, depending on the participants' preference. Each interview was conducted via telephone or videophone. All of the interviews were audio or video recorded. Upon completion of the interview, the students transcribed or summarized the interpreters' narratives into written English. Both the students and the teachers edited the narratives, and all identifying information was removed.

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The students then sent their drafts of the interview narratives to the healthcare interpreters for final review and revision. At the conclusion of the process, a total of 90 separate narratives had been collected from the students' interviews. Two examples are provided below.

Narrative example 1:

I was interpreting for a deaf patient's OB/GYN appointment in a large, urban hospital. I was somewhat familiar with the patient, who is a refugee from Somalia, and knew that her language was underdeveloped. A Deaf community health worker (DCHW) was also in the room with the patient to help educate and advocate. The appointment was for a physical exam and a pap smear. During the appointment, it was explained that the patient had never had an intervaginal exam before, had not had vaginal sex, and was very nervous, especially about undressing. As the appointment progressed to the physical part of the exam, the female doctor tried to insert a speculum into the patient but was unable to insert it. Next, the doctor tried to insert two fingers but was also unsuccessful. The doctor then stated, "I wasn't informed of this, but the patient has had female circumcision." Even the doctor's tone indicated she was a bit taken aback. For me, the word in my head was *horror*. Then she said, "Because of the circumcision, I cannot do the exam today. Perhaps with anesthesia or if you were able to relax more, I would be able to complete the exam." She said, "It might be difficult for you to have intercourse," since the reason for the appointment was that the patient was getting married and wanting to have children. Then the doctor backtracked and said, "Well, I shouldn't say that. When you are with your husband and you are comfortable, things may be different." Before that, I didn't realize that female circumcision could impede you from having children. I had heard the stories of how awful female circumcision can be and the mutilation to the female genitalia that accompanies it. I have also heard stories from survivors of female circumcision, who have revealed the pain and suffering they had experienced. This appointment really hit me hard. The patient was Deaf; she was in another country without any language when she was subjected to this procedure; and now she is discovering that she may be unable to have children because of it. I was really jolted. I had to take some time to myself after that. I was also able to debrief with the DCHW about it because she was shocked as well, since we both come from Western, White culture where this does not happen.

Narrative example 2:

One of the most challenging and emotional situations an interpreter may find herself in is a medical situation in which a Deaf client is on their deathbed. There will be Deaf family gathered around saying their goodbyes and waiting for death, and the plug is about to be pulled. I was forewarned of this type of interpreting situation but, oh my goodness! You have the griefstricken family gathered in the room that are wailing, along with Deaf community members, plus doctors coming in and out of the room. The doctors and nurses were explaining what the dying process looks like and how to mentally prepare for that but it was an emotional bundle to handle! Questions I continually asked myself included, How do I keep my head on straight? How do I keep my role as the interpreter without getting too emotionally involved? How do I not become a distraction for all of them? How do I look appropriately professional and sad but not too sad? How do I keep the affect that is needed? Any person who would walk into this room would instantly want to burst into tears along with everyone else in the room.

After they collected the transcribed stories, the teachers implemented the next phase of narrative learning. They selected approximately 15–20 narratives that they felt would be provocative for class discussion and learning, and presented them to the students in either of two ways (a) on a PowerPoint slide (to be read

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collectively), or (b) on paper (to be read and discussed in pairs). Following Clark's (2010) hypothesis that people learn from telling narratives, we asked students who had conducted the interviews to retell the story in ASL to the class, adding any contextual knowledge they gained during the interview. The other students were instructed to carefully listen to the narratives. Through reading, retelling, and listening, students had the opportunity to mentally position themselves within the narrative. After reflection, the teachers asked, "Which domains and competencies for medical interpreters are being reflected in this story?" Typically, students cited several domains and competencies that fit the scenario, which resulted in discussion about the overlapping skills of interpreters. The students also reviewed the "ASL-English Medical Interpreter Domains and Competencies" document, which served to reinforce their content knowledge.

After discussing the narrative in this way, we asked follow-up questions about the stories, for example, "What decisions would *you* have made in this situation?" The students and teachers both shared ideas and, as a group, considered factors that would shape their actions and decisions. This interpretative analysis was done together, with everyone in the class engaged in the discussion. Through this process of shared reflection, students were exposed to a variety of possible responses to the problems illustrated in the narratives.

Certainly many other options are available for including narratives in class, based on the goals of the course, the style of the teacher, and the types of narratives. We describe our own experience to demonstrate one way of incorporating authentic narratives framed with specific instructional goals. In doing so, we wish to emphasize the rich interaction between the teachers and the students that resulted from reflecting upon the narratives together.

Conclusion

As interpreter education matures as a profession, teachers are calling attention to the constraints of conventional pedagogies in the preparation of interpreters. Narrative pedagogy provides a viable approach for interpreter educators to think anew about the classroom experience that they cocreate with students. When they enact narrative pedagogy, teachers work with students to interpret shared experiences and discuss the art of interpreting. Stories can reveal authentic challenges in interpretation and lead to possible solutions for problems that may have otherwise been left for individual interpreters to resolve on the job. The power of narratives is that they point to the ambiguous nature of truth and suggest that truth that can be analyzed in the historical and sociocultural constraints in which interpreters practice. Further, a narrative approach contextualizes knowledge and values and builds upon the other teaching methods. Narratives also afford opportunities for students to practice reflection, as well as to describe and critically analyze episodes of their own emerging practice. Just as important, the use of narrative pedagogy enriches our own teaching and interpreting practice as we experience stories with our students.

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Open Forum

The open forum section of this volume features an opinion piece and an interview, both from contributors in Belgium. Belgium has a long tradition of providing interpreter and translator education, not least because of its division into three different language communities, which has led to an increased awareness of the issues involved in achieving appropriate crosslinguistic communication.

Europe is currently experiencing an unprecedented influx of migrants and refugees from the Middle East and Africa. In the opinion piece, two educators and researchers argue that now is the time for policy makers to implement the findings of interpreter education studies to meet newly arrived migrants' and refugees' urgent need for language access. The two projects they describe are examples of research findings that should inform policy making in response to the refugee crisis currently unfolding.

Belgium also has a very active Deaf community, and tertiary education providers (such as the University of Leuven) provide sign language interpreter education, often in consultation with members of the Deaf community. In our interview with Filip Verstraete, who has long been an advocate for the Deaf in the Flemish-speaking part of Belgium, he talks about his work for the Deaf community and his experience as a consumer of interpreting services.

We welcome further submissions for the Open Forum section for *IJIE* for our 2016 volumes. In addition to interviews with scholars, practitioners, and consumers, we welcome transcripts of debates or presentations of case studies that will extend our understanding of current and future trends in interpreter education.

Implementing Findings from Interpreter Education Research: The Asylum Crisis in Europe and the Case of Belgium

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“Europe is failing: 19 refugees have found a home, leaving only 159,981 to go” (Vidal, 2015). Thus ran the headline of a recent report in a Belgian newspaper, denouncing the way in which Europe is dealing with the refugee crisis. In other words: Europe cannot cope with the current emergency situation. In particular, there is a desperate demand for interpreters trained to work with refugees. We conducted research in Belgium to examine the effects of the lack of interpreters, and concluded that research-driven interpreter education, by trained interpreter educators, must drive any efforts to ameliorate the situation. In this article, we describe our research, offer recommendations, and discuss two projects pertinent to the current need for interpreters who are trained and ready to work with refugees.

The refugee crisis in Europe was all over the newspapers from the end of August right up to our submission of this article. This short opinion piece will not go into any details about what motivates refugees to leave their homes, nor will it address any of the speculations circulated by the media. Rather, we focus on what we see as Belgium’s lack of a structured and organized approach to the refugee crisis.

When refugees first arrived in Belgium in August 2015, they had no place to sleep other than a park in Brussels, where a tent camp of sorts had been set up. Later on, one vacant building was used for shelter. The Belgian Red Cross and other organizations provided food, water, beds, blankets, and basic hygienic facilities. However, aside from a social media presence (through tweets and messages), the authorities did not appear to take full control of the situation.

Reactions from the public were mixed and on the one hand reflected a rather antimigrant stance from certain groups in Belgium. Fortunately, there were also many volunteers that represented Belgian society in a more positive and encouraging manner, helping where they could, for purely humanitarian reasons. These volunteers,

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representing all layers of society and all different ethnic groups, started to help in a somewhat unstructured way by bringing in clothing, toys, and food and by offering their services. Some played music to provide entertainment for asylum seekers. Belgians are hosting refugees in their homes or are acting as foster parents to unaccompanied minors. And although this article discusses the situation in Belgium, it is important to know that volunteers responded similarly everywhere in Europe, from Greece to Hungary and from Italy to Denmark. Even so, reactions to the new arrivals were mixed around Europe, ranging from very positive to very negative.

It is here that our expertise as researchers comes in, as well as our concern that linguistic issues do not appear to be prioritized. After all, as the National Council on Interpreting in Health Care (NCIHC) says: “Language rights are human rights”. We wonder why no one appears to have considered the rights of asylum seekers to communication. In Belgium, the press seem to focus mostly on the physical aspects of receiving refugees: the “bed-bath-and-bread” metaphor that often appears in the Dutch-speaking media. Little is said about the physical and mental health of people who have often travelled in terrible circumstances, fleeing conditions that were even worse, risking their lives and those of relatives and friends, looking not for fortune but for a life without war and misery. Even less has been said about the children in this crisis. Unaccompanied minors have been mentioned in the press occasionally, but mainly with regard to asking the general public to act as foster parents, and without mention of language issues.

As researchers and interpreters, we could easily say: “There we go again”. Language never seems to be considered an issue, and language professionals are seldom consulted at times of humanitarian crises. Or, let us cautiously state that the expertise of professional translators and interpreters, in particular, is often ignored. The notion that everybody who knows two languages can interpret or translate is still prevalent—however, most people know that not everyone who can strike a ball can become a top professional football player! Society must come to appreciate the special aptitude required to successfully master interpreting and translation techniques.

Refugees, especially minors, need first and foremost a warm place to sleep, food and good hygienic conditions, but this is immediately followed by the fundamental human need to engage in communication with others. But in what language does this communication take place? A common language can sometimes be used for small talk, but if a child or young person wants to talk about his or her (physical or mental) pain, things get more complicated. Who is there to listen? And how can you really listen if you only understand one third of what is said? Of course, you can ask friends, family or companions to interpret for you, but ad hoc interpreters may be unable to create the necessary (psychological) distance (Russell, 2012). Untrained interpreters may find it difficult to be impartial, and may be inclined to censor information. Let us take the example of a 16-year-old girl who is put under pressure to act as an interpreter for her 6-year-old brother. How will she deal with parents telling her in an aside what to say and what to leave out? How will she deal with unfamiliar terminology? Unfortunately, this situation is not at all uncommon.

If a doctor, a nurse, or a social worker wants to speak with a traumatized minor, they can do that in a professional way through a professional interpreter. Child support workers must be made aware of the fact that such professional interpreters exist. They can work together as professionals in the same team where everybody knows their own role, and where agreements have been made on how to inform the others when these boundaries are at risk of being exceeded, or when they have to be breached for the sake of clear communication—for example, a pre-encounter briefing between an interpreter, psychologist and interviewer where the former is asked to flag any issue relating to understanding, mental age, or any cultural issue that appear to hamper communication. As Eva Kerpel (2015, p. 150) states: “On a minimum level, cooperation among the professionals (including the interpreter!) should involve having . . . an initial meeting before meeting the child; working out and maintaining a joint strategy; sharing all information”.

As we conducted the Co-MINOR-IN/QUEST project, which focused on interpreter-mediated interviewing and examination of minors in the legal sphere (criminal proceedings), we found that interpreters and the professionals they worked with were often not aware of each other’s roles. However, we also discovered that for others, teamwork was not just theory, but had become everyday practice. The Co-MINOR-IN/QUEST findings regarding interpreters’ professional ability to work in a team in the best interests of these minors are relevant to minors in the current refugee crisis. The main goal of professionals working with minor refugees should be reducing or preferably avoiding further or secondary traumatization, by working with trained interpreters in a setting where everyone is aware of the other’s role. To this aim, in the Co-MINOR-IN/QUEST project, we prepared a leaflet on how to work with interpreters before, during and after interviews with minors. Although the leaflet has references

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to the legal context, professionals in other fields can nonetheless use this as a guideline to work with minors who do not speak the language of the recipient society (Balogh & Salaets, 2015). As we wrote in an earlier publication: “Dissemination of research results, best practices and awareness raising have to reach everybody who is involved in criminal proceedings, not least the authorities, because all actors involved are equally responsible for (un)equal access to Justice if people can(not) be heard because of communication problems” (Salaets, 2014, p. 158).

The second of our projects relevant to the current refugee crisis is called “Training in Languages of Lesser Diffusion” (TraiLLD; (see KU Leuven, 2015b for more information). This project involves language and interpreting experts reflecting on how speakers of languages of lesser diffusion (LLD) can be provided with interpreter training in a manner that is robust yet efficient. It is impossible to describe the project in only a few lines, however, one of the key concepts first relates to the definition of an LLD as “a language that has relatively few speakers in one specific location or geographical area in relation to the population as a whole” (Giambruno, 2014, p. 94). The demand for interpreters in any specific LLD is continuously changing, depending on the movement of people fleeing or migrating at any particular point in time. For example, in the most recent refugee crisis, interpreters of languages of the Arabic world (with several regional languages) are needed. Other characteristics of LLD include the fact that such languages often do not have an official status, are sometimes not standardized or have minimal written resources. Just try finding a Dari, Pashtu or a Lingala interpreter within a few hours or even within a day!

Also key to training interpreters in LLD: Even when such training is organized, training materials are often lacking, there are no bilingual trainers and/or there are no trainers with the appropriate interpreting skills, and there are no facilities for online training. With the TraiLLD project, we try to give solutions for these problems, explaining how LLD interpreting training can be organized².

In the case of Belgium, Department of Internal Affairs would ideally be in direct communication with interpreting training institutes, so they could announce fluctuations in the origins of migrants entering the country. This would allow the interpreter education providers to anticipate which languages might be needed for interpreting at all levels and in all societal contexts. In the Netherlands, the Ministry of Internal Affairs is aware of upcoming migration flows and contacts the SIGV (*Stichting Instituut van Gerechtstolken en –Vertalers* Foundation of Legal Interpreters and Translators) so as to obtain information on the availability of professional interpreters, or to ask the SIGV to get training of interpreters in those languages underway. If the authorities were more prepared and organized, situations such as those in Hungary could be avoided: In that country, more than 1,500 refugees waited at the border, with just one single interpreter at their disposal. Does the government work on the assumption that all 1500 refugees speak and understand the same language and that the interpreter can do his job with a megaphone? It is unrealistic to expect interpreters to work without support, for 24, much less 48 or even 72 hours at the border, without facilities.

Fundamentally, we would like to see policy makers presenting a structural approach to interpreting in refugee asylum cases that relies on the expertise of expert organizations, researchers and universities. Authorities should have contingency plans in case of emergencies, and lists of professionals of different expertise to contact in such cases. In a country such as Belgium, with three official languages (Dutch, French and German), it is particularly critical that the linguistic and cultural needs of migrants who do not speak the dominant languages be addressed. All countries receiving refugees in the current crisis must prepare for interpreter education in refugees’ languages, some of which may be classed as LLDs.

To achieve these ends, authorities, governments, managers and administrators must become current in the research that demonstrates best practices. Academics should disseminate their research findings widely, and not remain siloed in ivory towers. Moreover, findings should be shared in the local languages instead of exclusively in the scientific *lingua franca*, namely, English. Interpreter educators have a voice that needs to be heard and listened to, so the findings of interpreter research can be implemented to the benefit of refugees in crisis situations such as the one currently unfolding in Europe.

² Available from: https://www.arts.kuleuven.be/english/rg_interpreting_studies/research-projects/trailld/flyer-trailld

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Interview: Interpreter Consumer and Deaf Advocate Filip Verstraete

Ineke Crezee¹

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Filip Verstraete

Federation of Flemish Associations for the Deaf (FEVLADO)

Abstract

Filip Verstraete has been involved in advocacy work for Deaf people in Flanders, Belgium, since he was a young adult. Belgium has three official spoken languages (Dutch, French, and German), and is divided into three communities. Moreover, the signed languages used in the Dutch speaking community (Flemish Sign Language or VGT) and the one in the French speaking part (la Langue des Signes Francophone-Belge or LSFB) are also recognised by the regional parliaments. The Flemish Community exercises authority in the Flemish-speaking region, whereas the French community exercise authority in the French and German speaking regions. The Flemish and French communities both have authority in the bilingual Brussels–Capital area.

Filip's work has included giving lectures and presentations, lobbying at the highest level, and generally raising awareness of the rights of Deaf people in Flanders. Filip was recently appointed Director of FEVLADO: the Federation of Flemish Associations of the Deaf. In this interview, Filip shares his experiences in working with interpreters in healthcare settings, his views on remote interpreting services in Flanders, and recommendations for interpreter educators, students and practising sign language interpreters. The interview follows a presentation by Filip at a medical interpreting congress organised by the University of Leuven in December 2014.

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Interview: Interpreter Consumer and Deaf Advocate Filip Verstraete

Filip Verstraete was recently appointed to the position of Director of the Federation of Flemish Associations for the Deaf. He is Deaf, as are his wife and three children. Filip has been involved in advocating, lobbying and raising awareness of the needs of Deaf people at the highest level since he was a young adult. He set up an organisation for parents of Deaf children when his own three children were born. Filip likes travel, spending time with his family and running half marathons.

Ineke Crezee is Senior Lecturer in interpreting and translation and has been involved in developing health interpreter education in New Zealand since 1991. Her textbook *Introduction to Healthcare for Interpreters and Translators* (2013) is currently being adapted for Arabic-, Korean-, Japanese-, and Chinese-speaking interpreters. Ineke loves reading, walking her dogs and running with friends.

Ineke: You are a well-known advocate for the rights of Deaf people at the highest level in Belgium and surrounding countries and you often travel abroad to this aim. Can you tell us something about your background and how you gradually evolved in this role?

Filip: I grew up in a Deaf family myself and attended schools for the Deaf. In my school days, Deaf people were not given the opportunity to participate in mainstream education through an interpreter. Deaf education was not of a very high level, and this made it impossible to access higher education afterwards. I received a Certificate in Sales and Administration and entered the labor market with that. By the time I turned 18, I was already involved in managing a Deaf club for young people on a voluntary basis, and later was involved in starting the national federation for young Deaf people. I am the founder of what is now known as Jong-Fevlado, the Flemish Federation for Young Deaf People.

I married a Deaf woman and we have three Deaf children, so I decided to start an association for parents of Deaf children called ODOK (short for [Vereniging voor] Ouders van Dove Kinderen). By 22 years of age, I had joined the Board of the Federation of Flemish Associations for the Deaf (Federatie van Vlaamse Dovenorganisaties, FEVLADO), which has over 100 Deaf organizations affiliated with it, including all the Deaf clubs and their divisions. Later on, FEVLADO asked me to start working for them. This allowed me to build on my experience over time: I got increasingly involved in lobbying, giving presentations and lectures and getting involved in awareness-raising programs. I was recently appointed as the director of FEVLADO, and in this position I am responsible for 18 staff.

Interview with Filip Verstraete

Ineke: What does FEVLADO do, and does a similar organization exist in the French-speaking community of Belgium (the Walloon region)?

Filip: FEVLADO has two important objectives: first, advocating for those who are Deaf or hard-of-hearing, and second, supporting member organizations. A special division called *Fevlado Diversus* is responsible for training, information and awareness raising, for both Deaf and hearing people. Wallonia has its own organization called the French-speaking Federation of Deaf people in Belgium (Fédération Francophone des Sourds de Belgique or FFSB). The FFSB is also involved in awareness raising, providing training and information, supporting member organizations and achieving equal opportunities and equal access for Deaf people in Wallonia. FEVLADO and the FFSB collaborate whenever matters involve federal authority in Belgium.

Ineke: Can you explain to us what role FEVLADO plays in interpreter education in Flanders or in the provision of interpreter services?

Filip: FEVLADO is not directly involved with interpreter education or interpreter services, but is involved in regular meetings with both in order to achieve the best outcomes for consumers of interpreting services. We are also regularly involved in meetings with the designated authorities and other stakeholders, in order to ensure the powers that be are aware of our wishes and/or grievances.

Ineke: You and your family have a lot of experience utilizing the services of healthcare interpreters. Could you tell us something about that?

Filip: Yes, we have a lot of experience in this area. My family is Deaf, so we communicate in sign language and do not use hearing aids. So we mainly communicate with health professionals through interpreters. We have a primary care physician who has looked after our family for years, and who therefore knows us really well. This means we are able to have brief interactions with him very effectively, without the need for an interpreter. If we need to have longer, more in-depth interactions, we prefer to do this through an interpreter.

Again this is something we have learned through experience. I am increasingly aware of the fact that Deaf people are entitled to complete, easily accessible information and communication, and you do not achieve that when you are communicating with your doctor by writing short condensed notes.

Whenever we have an appointment with a hospital specialist, we prefer to book an on-site interpreter. We are able to do so because specialist appointments need to be booked well in advance. I say this because in Belgium, it regularly happens that Deaf people are not able to find an interpreter because there is a shortage of interpreters. As Deaf patients, we have to always remember to book interpreters for plenty of time, for example, for 2 hours, even when the consultation is only set to last 30 minutes. This is because consultations often go over time, and it is very stressful for the patient if this happens and the interpreter is not able to stay on because he or she has to leave for the next assignment.

Things are quite different when it comes to unforeseen (emergency) consultations. Hospitals do not have any processes in place for requesting an interpreter in emergency situations. Some hospitals have employees who happen to know Flemish Sign Language or have obtained their interpreter's degree. They are sometimes excused from their actual job in the hospital to interpret for Deaf patients if needed. However, in many cases, the person who comes to assist has only very basic knowledge of Flemish Sign Language or had completed the interpreting training many years ago. Obviously, we are not happy with this situation. Communications concerning the health of a Deaf patient who needs to be admitted urgently should be clear and complete. Obviously, this will not be possible when the language aide only has basic knowledge of Flemish Sign Language and does not know anything about interpreting or the interpreting process.

When Deaf patients are admitted to hospital, the normal thing is for the medical specialist to come around every day, postsurgery, to discuss the patient's health status. It is very difficult for medical staff to indicate the exact time they will visit the patient. Obviously, this is very frustrating for Deaf patients, because it means they are not able to book an interpreter. In these cases, the services of a remote interpreter could easily be booked.

Interview with Filip Verstraete

Unfortunately, Flanders does not have one dedicated service for the provision of remote interpreting. Hospitals have their own staff and their own software and hardware for remote interpreting. There is a remote interpreting service that can be utilized for both private and work-related matters; however, in Belgium, these systems [the hospitals' provision and the established remote interpreting service] are not compatible with one another.

There also appears to be a lot of confusion in Flanders as to who should bear the cost of interpreting services in hospitals. Deaf people are entitled to a limited number of interpreting hours per year (36 hours maximum) for use relating to private matters. However, the United Nations Convention on the Rights of Persons with Disabilities states that institutions are responsible for ensuring equal access [to people with disabilities]. To me this implies that hospitals should bear the cost of interpreting services.

Ineke: What do you expect from interpreters working in healthcare?

Filip: I expect interpreters working in healthcare to provide high quality interpreting services. Interpreters have to be able to interpret the professional jargon used by physicians into Flemish Sign Language. This means that they should have acquired knowledge of medical jargon and should possess knowledge of the associated vocabulary in sign. The interpreter's attitude is very important as well (just as it is in other interpreting assignments). The interpreter should act as a "translator" rather than a coach. He or she should convey whatever the physician says completely and impartially. Under no circumstances is the interpreter to act as a [separate] party to the conversation.

Ineke: Can you tell us about your personal experiences with the video remote interpreting (VRI) systems used in healthcare? You gave a presentation (at the University of Leuven medical interpreting congress in 2014) in which you compared two possible VRI systems, and each had their pros and cons.

Filip: I personally still prefer having an on-site interpreter for any interactions related to health care, because this contributes to a more relaxed atmosphere, but of course this will not always be possible, for a variety of reasons. At the moment, we have two different VRI services in Flanders. As I said before, hospitals tend to work with their own staff and their own programs for VRI, but there is a VRI service that can be used for both private and work-related matters. The two systems are not compatible and only available for a limited number of hours on weekdays. The advantage of the hospital system is that hospital interpreters are familiar with medical terminology. If both services were to collaborate, that would mean a win-win situation for both the VRI service and the end users. This would mean that one service could accept assignments when the other service is not available, and vice versa. More Deaf people would be allocated an interpreter when they need one. In terms of hardware I would prefer running software on a light, mobile system such as a tablet. Tablets have an ideal screen size and are lightweight, which means they can easily be taken from one location to another. Laptops weigh more than tablets, and working with PCs in fixed locations is not desirable at all, because that would mean installing the software on every single PC.

At the moment, hospitals do not sufficiently utilize remote interpreting services or only use these in a limited number of situations. As an example, interpreters are only used in interactions with medical staff, but it may be very beneficial to involve remote interpreters with the aid of a tablet at the admissions desk, to ensure smooth communication at that point.

Ineke: What are your suggestions as to how hospitals and physicians should work with sign language interpreters – be it by video or on-site?

Filip: Deaf people generally prefer on-site interpreters in the healthcare setting, but the significant shortage of interpreters in Flanders means that remote interpreting services have to be utilized as well.

When this happens, it is important to first test the system thoroughly, so as to avoid startup problems every time an attempt is made to connect a remote interpreter. The success of such attempts is often hampered by the

Interview with Filip Verstraete

hospital's WiFi connection. I have noticed that many physicians show little patience when such technical issues occur.

There is a need to educate physicians around the sociocultural perspective as it relates to Deaf people, so they can relinquish their narrow medical gaze. I have to say that the younger generation of doctors seem to be more aware than the older generation, however this is a very gradual development.

Doctors also need to be aware that Deaf patients are reliant on an interpreter in order to ensure a smooth communication process. Where an interpreter has been booked, Deaf patients should be seen at the designated time, so as to avoid a situation where available interpreter time is used up in the waiting room.

In general, medical and other hospital staff seem to be quite unfamiliar with the process of requesting an interpreter. There needs to be wider knowledge as to the different interpreting modes and how to request an interpreter.

Ineke: What is your main message to interpreter educators?

Filip: Interpreter educators need to ensure that interpreters are work ready upon graduation. This means that (student) interpreters have been able to build up work experience during internships and that they have completed training – preferably on specific healthcare settings – prior to completing such practical placements. This training should include the professional jargon and also how to interact with physicians, patients and other healthcare and allied staff.

Interpreters have to learn about their role and not exceed the boundaries of the interpreter role. This is something that should be addressed in education. Situations in which interpreters are utilized in healthcare are more likely to be emotionally 'loaded'. Interpreters need to be prepared for this during training.

Ineke: Finally, what is your main 'take home' message to practicing sign language interpreters?

Filip: Interpreters who graduated (a while ago) need to keep focusing on continuing professional development. The world of medicine is evolving rapidly and continuously and it is important that interpreters remain up-to-date with these developments.

It is of great importance that interpreters comply with the code of ethics at all times. Adhering to this code will protect interpreters in unexpected situations, and will help them guard their professional boundaries.

Ineke: Thank you for taking the time to answer these questions. I think your responses will be very beneficial to interpreter educators and (student) interpreters alike.

Dissertation Abstracts

In this section, we regularly feature abstracts of recently completed doctoral or masters theses, in order to inform our readers of current research relating to interpreter and translator education. If you have recently completed a master's or PhD thesis in this field and would like it to be included, please send an abstract of 200–300 words to citjournaleditor@gmail.com.

Becoming HEARING: A Qualitative Study of Expert Interpreter Deaf-World Cultural Competence

Leah Subak

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Degree: PhD dissertation, Kent State University, 2014

Deaf-World and American mainstream cultures coexist. Deaf-World citizens adhere to values and norms, communicate via American Sign Language (ASL), and at times utilize interpreter services. This inquiry focused on signed language interpreter development of Deaf-World cultural competence. Cultural competence includes learning and applying behaviors across multiple sociolinguistic contexts.

Through qualitative interviews, expert Deaf and hearing participants described interpreter Deaf-World connections. The inquiry explored participant meaning making regarding lived experience as participants described examples of becoming known as HEARING, ASL gloss for a representation of interpreters' auditory status.

Data, coded in aggregate, described examples of Deaf-World cultural competence including HEARING participants' avowed Deaf-World affiliation/alliance and ascribed Deaf-World efficacy; and Deaf participants avowed Deaf-World alliance and efficacy- as well as conditionally ascribed interpreter affiliation/alliance. Findings indicated becoming HEARING includes building coconstructed community and cultural connections leading to Deaf-World affiliation/alliance. Participants described a tacit seven-step process of Deaf-World connections, the interpreter affiliation/alliance narrative (IAAN).

“The Work is You”: Professional Identity Development of Second-Language-Learner American Sign Language–English Interpreters**Danielle I. J. Hunt***Gallaudet University, Washington, DC, USA: danielle.hunt@gallaudet.edu*

Degree: PhD dissertation, Gallaudet University, 2015

In this study, I examined the lived experiences of seven American Sign Language (ASL)–English interpreters who learned ASL as a second language. The methods employed for this study included autophotography and coresearcher driven photo-elicitation interviews, followed by semistructured phenomenological interviews for further data collection. For study grounded in a hermeneutic phenomenological methodology, I addressed the following research question: How does a group of ASL–English interpreters experience the development of a professional identity? Professional identity is only one part of many identities that develop and change over time. The review of the literature focused on translation and interpreting studies, language and culture as a part of identity, identity formation and development, second-language learners, and signed language interpreting.

From the data sources three superordinate themes emerged: the evolution of an interpreter self, the work as an extension of self, and being and becoming—the current professional identity. Several subthemes and threads also emerged and are discussed in depth. Implications for the field include issues related to defining terms in the field; second-language learning and integrating into deaf communities; interpreter education curriculum, pedagogy, and climate; understanding workplace experiences and interpreter role; and relationships with other interpreters.

The Translation of Event-Structure Metaphors Rendered by Deaf Translators from English to American Sign Language**Daniel Ray Roush***Eastern Kentucky University: Daniel.Roush@eku.edu*

Degree: PhD dissertation, Gallaudet University, 2015

This dissertation characterizes the handling of various Event-Structure Metaphors (ESMs) in English to American Sign Language (ASL) translation by analyzing linguistic and conceptual metaphors in translation from the perspectives of Descriptive Translation Studies and Conceptual Metaphor Theory. The data is based on a small translation corpus of American political speeches rendered by translators who are Deaf. The study affirms that the theoretical “Location” and “Object” branches of conceptual ESMs that have been formulated for spoken languages also exist in ASL. Often, the same ESM branch is maintained in translation from English to ASL, but not always. This study proposes that a “Container” branch be added as a third, major ESM based on metaphor shifts seen in the translation data. These shifts between English and ASL may indicate potential preferential metaphorical conceptualizations that influence translators’ decisions in re-construing metaphorical expressions.

Examining Oppression and Discrimination Among American Sign Language–English Interpreters

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Degree: MA thesis, Gallaudet University, 2014

Signed language interpreters have reported experiencing discrimination and oppression in the workplace, which may affect their motivation and performance on the job as well as their lived experiences as professionals. This exploratory study surveyed 1,385 American Sign Language–English interpreters regarding their experiences with discrimination and oppression in the workplace, with the aim of documenting and describing this perceived phenomenon. Results indicated several areas of concern from diverse groups of interpreters. Interpreters who are members of minority groups on the basis of race and hearing status reported feelings of not being valued by colleagues, facing barriers to attaining professional leadership positions, and experiencing discrimination from hiring entities. These findings provide a window into the experiences of professional interpreters regarding possible discrimination and oppression in the workplace. The results may influence how interpreter agencies conduct their practices and how interpreter education programs prepare students for sensitive issues in the workplace.

The findings are relevant to interpreting education because they 1) address issues of safe learning environments, especially for students from minority groups, and 2) point to the need for training on cultural sensitivity and respect toward colleagues.