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TO INTERPRETING IN THE SOCIAL, HEALTH
CARE AND LEGAL SECTORS**

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From the Editorial Committee

Amazing as it may seem, although nine months or three 'quarters' behind, we are still in business. In recognition that our original vision of a Quarterly publication was somewhat ambitious, we have decided to go with the less 'time' directed title – ***Critical Link – A Journal dedicated to interpreting in the social, health care and legal sectors.*** We always have the option of returning to the original vision!

Thank you to those of you who took the time to respond to the questionnaire included in the first issue which was distributed one year ago. While many respondents thought that an on-line version might be more cost efficient, many also felt that until the time comes when everyone has access to internet-based publications the hard copy version would be needed. So here we are.

The intended theme of this issue was to bring to the fore those issues and practices which are of concern and relate to the actual practice of community interpreting. As such, we felt it was important that practitioners in the field write the featured articles. We were also aware that the agreement to submit an article would also demand a substantial commitment of time to the task, and are extremely grateful to Joan Rinker (St. Catharines), Suzanne Villeneuve (Montreal) and Shannon Guilbride (Vancouver) who took up the challenge. We are also grateful to Andrew Clifford, who, on short notice, agreed to submit in English and French his article on construct validity in the certification of interpreters.

The location of the authors of the articles in this issue gives a sense of some of the issues, which come into play in the practice of community interpreters in Canada. We hope that the issues identified and discussed have relevance to community interpreters in other areas and welcome responses, questions, and articles, which represent the perspectives of practitioners in other areas of the world.

Finally, thank you to Dorene Weston (Toronto, ON, Canada) and Silvana Carr (Vancouver, BC, Canada) for their commitment and patience in working with the writers, assisting with the editing of their material and developing the 'ethical dilemma' corner.

Diana Abraham (Canada) Ann Corsellis (U.K.) Sandra Hale (Australia)

February 2004

Welcome to Critical Link 4!



The fourth International Conference on Interpreting in the Community is only a few months away! The organisers of Critical Link 4 are looking forward to what we believe will be a very stimulating event for many parties in the field – practicing interpreters, agencies, policy makers, and teachers of interpreting and interpreting researchers alike.

Scientific programme

The overall theme is “Professionalisation of interpreting in the community.” The scientific programme will include a variety of topics and approaches, all related to this theme in some way. Apart from the five keynotes – dealing with the development of Interpreting Studies as an academic field, linguistic and human rights, professional ethics, issues of sign language interpreting and community interpreting in legal and other settings – we anticipate around 80 paper presentations, 40 poster presentations, five panels and a workshop on a variety of topics.

There will be discussions on the organisation of National Registers, training materials on CD-ROM, interpreting for children, interpreting for victims of torture and telephone interpreting. A number of papers, panels and posters will talk about interpreter training and certification. For instance, one paper will present the organisation of interpreter training in the Scandinavian Far North. Community interpreting in Poland, Italy, Brazil and many other countries will be described. Interpreting will be discussed as social interaction, as reported speech and as individual interpreters’ cognitive processes. Some of the papers will urge us to think about assessment (and about who should do it)!

We are happy to note that most of the activities have relevance for both sign language and spoken language interpreting. Interpreters’ perspectives are represented as well as the perspectives of users.

Social programme

One of the highlights of the social programme will be the reception hosted by the City of Stockholm and taking place in the Town Hall – the location where the Nobel laureates have their dinner after the prize ceremony in December every year. Another one will be the Conference banquet in the museum of the remarkable 17th century warship Vasa, salvaged and restored after centuries at the bottom of the sea!

For more details concerning the programme and on how to register (can be done on-line), please have a look at <http://www.tolk.su.se/critical.html>

See you in Stockholm in May!

Birgitta Englund Dimitrova, Helge Niska, Cecilia Wadensjö

Call For Proposals To Host Critical Link 5 - 2007

THE FIFTH INTERNATIONAL
CONFERENCE ON INTERPRETING IN
LEGAL,
HEALTH AND SOCIAL SERVICE SETTINGS

Organisations, institutions or community
groups interested in hosting this fifth
International Conference are requested to
submit a full proposal by
April 15th, 2004.

For further information and copies of the
template for the submission of the proposal
contact

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A Day in the Life of a Court InterpreterShannon Guilbride

Shannon Guilbride is an accredited court interpreter (Spanish-English) and a certified translator through the Canadian Translators and Interpreters Council (CTIC). She is an instructor in the Vancouver Community College Court Interpreter Program.

8:00 a.m. As I get dressed for work and make breakfast, I think about the possible drug-related vocabulary that could come up in today's all-day drug-trafficking case, which promises to be challenging.

At present, in 2003, in my experience, the drug of choice in Vancouver is cocaine, or its smokable form, crack.

- Ø As crack, it is sold in solid chunks, called "rocks" or "rock cocaine."
- Ø As powder, it is usually sold in small, plastic-wrapped balls known as "spitballs" or "balls."
- Ø You have the "dealer," who sells the drugs to the customer or "buyer."

I've been interpreting for drug cases in court for a long time now and feel confident I can handle the drug-related vocabulary that comes up, even if the drug in question is not cocaine.

What I cannot be expected to anticipate is all the other vocabulary, not related to drugs specifically, that could come up in the case, such as physical descriptions of people and their clothing, the way they walk, their mannerisms, parts of the building or street where the drug deal took place, etc.

8:45 a.m. I leave for work. Today's case starts at 9:30 a.m. Tardiness is one of those often-overlooked faults that can damage an interpreter's career. If you arrive late consistently, it goes on your record and after a while, you simply will not be called anymore.

9:15 a.m. I arrive, get my interpreter's contract from the interpreter clerk, and make my way to my courtroom. The list of cases is posted outside it. As I'm making my way to the courtroom, I turn off my cell phone and turn my pager to the "Silent" mode. I can check them for messages during the morning in case I'm needed for a quick case in another courtroom.

9:28 a.m. I go inside the courtroom and hand my contract to the court clerk. Then I go and sit in the body of the court, with the rest of the public, to wait for my case to be called. Eventually someone taps me on the shoulder. It is the accused party for whom I will be interpreting. He introduces himself and immediately starts telling me about his case. I tell him that he needs to discuss his case with his lawyer and to hold his questions until then and I will interpret for him. He ignores this and asks me what he should do. Fortunately, the judge comes in just then, so I'm able to signal to the accused party that we can't speak anymore.

As we wait quietly, I listen to the other matters with half an ear, occasionally thinking about a word that comes up in court. How would I say that in Spanish?

10:00 a.m. The lawyer on my case comes in and asks the judge for a few minutes in order to speak to the accused party: "I need to take instructions from my client." I'm needed to interpret, so all three of us go out and find a vacant interview room. I, as the interpreter, am considered one of the parties that must adhere to the "solicitor-client privilege" rule and cannot reveal any part of this "privileged information."

The client decides to "plead guilty." The judge sentences the convicted dealer and the sheriffs take him into custody. My part in this case is now over.

10:45 a.m. I am now free to go. I return to the interpreter clerk in Registry to be officially "signed out," thinking about the pros and cons of the remuneration system for court interpreters in B.C.:

On the one hand, I was guaranteed a four-hour (full-day) minimum for today's case, and only ended up working for a small part of that.

On the other hand, if the case had gone ahead, I could have expected five to six hours' work, and in this business, every hour counts. Originally, this case had been scheduled for two full days, not one, and the second day was scheduled for the day after tomorrow. I'm affected by the late-cancellation policy. If the court cancels your services on a case within 24 hours, you get paid the minimum guaranteed for that case. I would have been paid two hours for tomorrow morning, though not the two-hour minimum for the afternoon, because 10:45 a.m. is more than 24 hours earlier than 2:00 p.m. of the next day. However, since the day after tomorrow is more than 24 hours away, I will not be paid a red cent for the cancellation, even though I turned away other work to honour this commitment. By now, that work will have been taken by another interpreter and there is no guarantee that I will find work at this short notice to make up for the lost income.

10:50 a.m. Today, I discover I'm in luck. The interpreter clerk asks me to stay on and take over the cases in three other courtrooms, because another interpreter has called in sick. Courtroom 101 has called upstairs for a Spanish interpreter three times now, so I go there first. The first case is a bail hearing. What this means is that the person has been arrested and formally charged with a crime, but would like to be released from custody to go about her normal life until the day of her trial. If the judge decides to release her on bail, she will have to obey certain conditions, such as promising to appear for her next court appearance. I interpret all of this into Spanish simultaneously and at top speed, because Crown Counsel and Defense Counsel tend to forget that there is an interpreter present who has to listen to the message, understand it, convert it into the other language, and then speak it, while keeping up with the next part of the message.

What they can't be expected to know are the other factors I have to contend with, like sheriffs talking into their walkie-talkies right behind me, lawyers quietly conversing a few feet away from me while they wait for their case to be called, and the distance between me and Crown Counsel, which, in Courtroom 101, can be 10 to 20 feet. On top of that, I also have to hear above the sound of my own voice, speaking over the glass partition to the accused party in the prisoner's box. The Accused often butts in, too, with a question or comment. In short, my ability to hear everything is severely compromised. Since I have to interpret everything, and I can't interpret what I don't hear, I may have to intervene. The correct way to do this is to address the Judge.

In this case, I make it half-way through Crown's argument about why the Accused should not be allowed out pending the trial, when Defense Counsel starts to cough. I miss a phrase. Immediately I turn and address the Judge and say, "Your Honour, the Interpreter requests repetition of the last phrase." Very rapidly, I turn and say to the Accused in Spanish, "Your Honour, the Interpreter requests repetition of the last phrase." Today I had an experienced Crown who waited long enough for me to interpret that to the Accused, but sometimes I have to really race through it while listening to the Crown's repetition.

When Defense (the lawyer defending the Accused) starts talking, he speaks so fast that I have to speed up to keep up with him. Soon I realize I'm going to miss a part of what Defense says, so again I intervene and address the Judge. I say, "Your Honour, the Interpreter requests that Defense Counsel speak more slowly" and I interpret that rapidly to the Accused. Today I intervened before I could miss anything, but sometimes I miss something before intervening. When I miss something, I say so. "Your Honour, the Interpreter has not interpreted the last two phrases by Defense Counsel. The Interpreter requests repetition." And again, I interpret what I have requested to the Accused.

11:15 a.m. The Judge has decided that this Accused is to be released on bail, which means that I will have to wait around until the court clerks have typed up the documents, because I have to interpret them to the Accused before she signs them. This could take hours. In the meantime, I need to check the other courtrooms assigned to me to see if they need an interpreter. I'm needed immediately in 100 to deal with an out-of-custody matter and, as I leave 100, I hear Courtroom 102 paging the Spanish interpreter. There, I deal with another two bail hearings and a guilty plea in quick succession.

12:00 noon. Outside in the hall again, a lawyer tells me he needs to go down to the cells with me to talk to his client, but just as I'm about to accompany him down to Cells, Courtroom 101 pages me. Court has priority over cell interviews, so I hurry into Courtroom 101, with a hasty apology and explanation to the lawyer. Crown sees me come in and tells me to wait, as there's a case needing my services as soon as the present matter is dealt with. The lawyer has followed me into the courtroom and wants to do the cell interview right now

because he's in a hurry. I ask him to talk to Crown about it. I don't hear what they say, but the lawyer takes a seat, looking grumpy and checking his watch.

12:20 p.m. The case before mine takes longer than expected and only now am I being called to deal with mine, a bail variation. It means that the Accused wants a condition of his bail release changed. It's a "K File," courthouse jargon for a domestic assault case, and the wife is in the courtroom to ask the Judge to let her husband live at home while he waits for his trial date for allegedly beating her. The Judge wants to be quite sure she does not feel afraid that he will beat her again and asks a lot of questions. Twenty minutes later, the Judge agrees to vary the conditions of bail. I will have to wait, this time inside the courtroom, for the court clerk to make the amendment to the bail condition, then go outside and read it to the Accused, get him to sign it, then return the document to the sheriff or court clerk.

12:50 p.m. Court is adjourned for the midday break, meaning lunch. I turn to look for the lawyer who wanted me to go down to Cells with him, but he is nowhere in sight. Crown tells me he had to leave and will be back at 3:00 p.m. and can I come back then. I explain that Registry will have to make that decision, but that I will let the interpreter clerk know, and either I or another Spanish interpreter will be available for 3:00 p.m. this afternoon.

12:55 p.m. The interpreter clerk does not have anyone assigned to Courtroom 101 in the afternoon, so I am asked to come back for the afternoon session, which starts at 2:00 p.m. In the meantime, the bail release documents from this morning are ready, so I have to go into the Justice of the Peace area to interpret the documents for the person being released.

1:10 p.m. Lunch time! I turn on my pager and prepare to relax.

1:15 p.m. My pager goes off. It's New Westminster Court, wanting to know if I'm available this afternoon. Regretfully, I turn the contract down, though I am relieved that I won't have to rush to New Westminster for 2:00 p.m. Five minutes later, my pager goes off again. This time it's Supreme Court, which is only fifteen minutes away: Am I available this afternoon? No. Wouldn't you know it, no work the day after tomorrow, but offer after offer today, when I can't accept them all. Talk about feast or famine!

1:18 p.m. There goes my pager again. It's New Westminster Court again, offering me a full day next week and canceling a fixed-date case I was booked to do three weeks from now. You win some, you lose some.

2:00 p.m. I turn off my cell phone and switch my pager to "Silent" and go downstairs and start checking the courtrooms assigned to me. No-one needs me.

2:45 p.m. The lawyer from this morning returns and we go down to cells to interview his client. I couldn't tell you what was said in there, even if I weren't

prohibited from doing so by the solicitor-client privilege, because I can't remember. After so many cases, the details become a blur.

3:00 p.m. This client has breached his bail conditions twice now and is in a "reverse onus" situation. This means that the onus (responsibility or burden) of proving his case now rests with the Accused and not the Crown. In today's case, the Defense Counsel argues long and hard, and the Crown argues right back. I interpret simultaneously, trying to keep my tongue from twisting over in my head. Finally, the Defense lawyer gets the Accused to address the Judge personally in an attempt to sway him, and at this point I move into the consecutive mode of interpreting, because any exchange with a witness or accused party in the witness stand or prisoner's box is always interpreted consecutively. The Judge refuses to give him another chance and speaks to him directly, citing his reasons for revoking bail, so I keep on interpreting in the consecutive mode.

3:55 p.m. The outcome is that the Accused will be staying in custody until his trial. What this means to me is that I don't have to wait around to read him a bail document.

4:00 p.m. I'm signed out and done for the day. I turn on my pager and cell phone and head for the door and freedom, looking forward to my evening out.

4:10 p.m. There goes my pager! It's an immigration lawyer, wanting to know if I can come in right away "for a couple of hours" because his regular interpreter has cancelled at the last minute. I accept the case.

4:15 p.m. Knowing that "a couple of hours" can range from anywhere between fifteen minutes and five hours, I call my friends and tell them not to wait for me for dinner and a movie. I then switch off my cell phone and pager and hurry to the lawyer's office, which is only minutes away in the downtown area.

8:25 p.m. I've just got out of the interview at the immigration lawyer's office. I get to the movie theatre just as my friends are about to enter without me. We get our tickets and settle into our seats. It's dark and comfy at the back here, and the movie has this soft, romantic background music. I sit back and even before the hero can kiss the girl, I'm fast asleep....

Joan Rinker, M.A., C.Trans., registered court interpreter and certified Ministry of Citizenship and Immigration community interpreter in Ontario. The author has sixteen years' experience in interpreting (and managing urban camping).

"A Beginner's Toolbox"

Have you recently passed certification exams to become a community interpreter? Congratulations! You doubtless have many outstanding abilities: a wonderful memory, (to remember all that vocabulary); nerves of steel (to maintain your composure through the test); and a heart of gold (to enter such an unrecognized helping profession). But there are some other things you'll need to succeed in your new career, and you'd be wise to attend to them immediately.

A lot of your equipment as an interpreter relates to being on the road with no place to touch down during the day. If you have three appointments totaling six hours of work or so, you are actually going on an urban camping trip. You will have to plan on how to sustain yourself in comfortable (and presentable) condition without any outside means of support. Here is a list of basic necessities for the journey:

A good map of your region

Your appointment may be in the "rabbit barrens" or the "armpits of Ontario." You might not want to get out of the car to ask for directions. It is a good idea to check a map before leaving home, and to keep a map in the car, for on-the-spot reference.

Alcohol wipes

You'll be contacting all kinds of people in all kinds of places, and there will be nowhere to clean up. Alcohol or other antibacterial wipes can alleviate that queasy feeling that comes over you when you discover that your client has just been diagnosed with, say, Hepatitis A or tuberculosis.

Fragrance

You might not feel really fresh and pleasant after a morning at the jail or similar institution. A nice whiff of something good can remove the acrid, invasive smell of humankind from your nostrils and perk up your spirits.

A coat that folds up "small"

After you have been interpreting for a while, you will become aware that if you look like part of the building personnel you will get better treatment. If you look like a patient or client, you may be ignored, avoided or at worst, despised. Building staff generally do not wear coats. Try to leave your coat in the car, or if that is not practical, just remove it and tuck it under your arm when you arrive at your appointment.

List of local libraries

Keep in mind that you will be lacking the most basic of "basic facilities" during your day working as a community interpreter. If you use the facilities of a snack shop, the coffee you buy will likely send you to another stop prematurely – an annoying cycle. Try patronizing the local public library. Libraries are warm, dry,

and ... they have washrooms. (Some also have email access and soft chairs!) Mentally review the locations of libraries around your appointments and their hours of service for respite and relief on the road.

Portable food

Your appointment schedule will often not permit you to take a proper lunch hour. If you have an appointment in one city at 11 a.m. and another, kilometres away, at 1 p.m., you may find yourself driving down the highway at 12:30 with a growling stomach and a map in hand. Better to have a humble snack in the car than a frazzled search for a food outlet. Some really bad days may find you languishing in a waiting area while an appointment stretches right through the lunch hour. If you have a nice bag of fruits or vegetables and a pre-cut sandwich, you can surreptitiously partake without abandoning your dignity or your diet. (Don't forget those alcohol wipes...)

Mental notes on free parking areas

Sorting through your wallet for change and fumbling with parking meters can be frustrating and time consuming. Meters have other drawbacks, such as needing attention in the middle of unexpectedly long appointments, and producing nasty tickets. Just think, you can probably walk two blocks in the times it takes to select coins and deposit them, and the fresh air will help to clear your brain. Try to identify parking areas in grocery stores, schools, and side streets where your car will be safe for longer periods.

Errands-in-waiting

Your bookings will be variable in length and may be unexpectedly cancelled. Rather than gnashing your teeth over wasted time, take along with you a collection of things to do: items to be mailed, rented videos to return, unread mail, etc. Then, if you find yourself with a gap in your bookings, you can put it to good use. If you keep notes about upcoming special events or gifts, you may also be able to do a little shopping when the opportunity presents itself.

When you get home, there may be a message relay waiting to be performed or a telephone interpretation to be completed. So be sure you have a **portable phone and closet space**. (How else are you going to maintain confidentiality when performing telephone interpretation?) If you are fortunate enough to be blessed with a home office, provide yourself with a "**Do not disturb**" sign to warn family members away from the door. If small children are around, you might have to get a couple of "**treat**" videos to provide babysitting support on short notice.

As a novice interpreter, you are embarking on an interesting adventure in time and resource management. You may be tempted to neglect self-care while rushing to attend to the needs of others. Remember, uneven working conditions are an occupational hazard for community interpreters and will likely remain so in the foreseeable future. (Outstanding and successful interpreters are not rewarded with more elegant offices.) So, plan to look out for yourself in the kindest way possible – you'll do a better job ... and last longer in the end!

The Forces at Work in a Psychotherapeutic Relationship that Involves Interpretation

Suzanne Villeneuve

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Summary

A psychotherapeutic relationship is a relationship between two individuals: a clinician and a patient, both of whom usually speak the same language. However, this duo changes into a trio when the patient is deaf and communicates through sign language and when the therapist does not understand this idiom. In this article, we look at different intervention settings and the characteristics of various psychotherapeutic approaches. We discuss the specificity of clinical work with a deaf person who communicates through an interpreter and the forces that are at work between the individuals participating in this situation. We present an overview of the elements that could potentially damage the therapeutic alliance. Lastly, we address the key points that contribute to its success and that take the reality of the need for a third person into account.

This article will be published in two parts. Part II will examine the characteristics of the three individuals, i.e., the patient, the psychotherapist, and the interpreter.

Part 1

1. Introduction

Even before showing up for a work assignment, an interpreter must be aware of the challenges and forces at work in a given situation. Those who work in the legal field place great emphasis on words and facts and those who work in an educational setting base themselves on the value of academic and social success. Therapists tend to work with emotions and relationships. This article will examine interpretation between French and Quebec Sign Language (QSL) at a session between a client who is deaf and a mental health professional. Which factors need to be taken into account in a psychotherapeutic relationship? I will answer this question with an overview of the different settings in which such a relationship can develop and will provide a brief description of mental health professionals and their approaches. We will discuss the importance of the therapeutic relationship, transference, and emotional loads. We will examine which strengths an interpreter needs to provide the best interpretation possible, as well as the reasons why maintaining neutrality is difficult. We will look at the impact of the presence of a third person and conclude by describing the factors that help to preserve the therapeutic

relationship with the mental health care professional and avoid diverting it towards the interpreter.

2. The different settings

Regardless of the setting, interpretation between two individuals can transform itself into therapeutic interpretation when the deaf person expresses a psychological problem. In fact, the front line of our health care system, i.e., the *Centre local de services communautaires (CLSC)*¹ and hospital emergency rooms, is conducive to an initial acknowledgement of the need for psychological help. Even a routine appointment between a deaf person and his family physician for a simple physical problem can develop into a description of symptoms of psychological distress, resulting in a change in the tone of their conversation. Similarly, an individual meeting with a regular teacher or a remedial teacher in a school can lead to a helping relationship that resembles psychotherapy. A discussion with a lawyer about a case may lead to a very emotionally-charged exchange.

3. Therapists and therapeutic approaches

This section will describe the different mental health care providers in Quebec, the process for referring patients requiring psychological help, and a brief summary of the different approaches.

Psychotherapists

Professionals who provide psychotherapy in Quebec are divided into distinct categories. Earlier, we saw that general practitioners are often the first individuals to help. They usually refer the client to a CLSC or even to a hospital if their case is urgent. The CLSCs employ social workers to provide the first level of care. They meet clients for a period of 10 to 15 sessions.² If they feel that the client needs more, they refer the client to a private psychologist if he has the means. If the case is too serious, or if the CLSC mental health care team feels that more intense intervention is required, physicians from the team will meet with the client and refer him to a hospital or a psychiatrist. Psychiatrists can diagnose patients and prescribe medications. Psychologists, on the other hand, cannot prescribe medications; however, they do administer tests. It is important to remember that these tests were created for the general population and are not always appropriate for people of another language and culture, especially for people who are deaf. The title of 'psychotherapist' is not protected; any counsellor may use it.

Therapeutic approaches

¹ Local community service centre: a centre that provides front-line health and social services to the Quebec population.

² The average is between 12 and 13 visits. Some CLSCs feel that a deaf person accompanied by an interpreter needs more sessions, given the need to translate the exchanges. Conversely, some CLSCs limit the number of sessions to 8, given the costs associated with interpretation services.

Just as educational interpreters do not need to have the same teaching skills as teachers to work in the classroom, mental health interpreters do not need to have the same level of knowledge as mental health professionals. However, an overview of the different approaches used in mental health will help interpreters working in this field to understand that a therapist's actions are not random and are based on analytical models and schools. Different models are presented in the overview of psychotherapeutic approaches, each with its own special features (Papalia & Wendkosolds, 1988). Table 1 provides an overview of the main approaches in psychotherapy.

Table 1: Psychotherapeutic approaches – the main orientations

Approach	Psychodynamic/ Analytical	Behaviourist/ Cognitive	Existential/ Humanist	Systemic/ Interactional
Connection between the problem and the treatment	Connection between current problems and suppressed or unresolved conflicts (analysis of the unconscious resulting from drives).	Connection between problems and inadequate thoughts or behaviours. Behaviourist: limited to what is observable and measurable. Cognitive: functioning and structures.	Connection between the origin of the problem and identity (this approach is essential at the beginning of therapy to develop the therapeutic relationship).	Connection between the problem and interactions with others (family, friends, co-workers, etc.)
Analytical method	Psychoanalytical method of self-discovery and self-knowledge. Aims for profound change and restructuring of the personality. Foundations developed by Freud.	Analyses these thoughts and behaviours and tries to replace them. Based on laboratory research and on the notion that normal behaviour is learned. ³	Based on the human ability to direct one's existence and fully realize one's potential. Centred on the person. Holistic approach.	Analyses the problem and changes relationships with others. It is understood that the surface problem isn't the fundamental problem.
Length of therapy	Long, costly, does not provide	Solves one problem at a	Seeks the overall	Shorter treatment

³ This is Burgess' approach in his book *A Clockwork Orange*.

	short-term results.	time; shorter approach.	growth of an individual; shorter approach.	(e.g., family therapy)
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We can add the *eclectic* approach and the *psychobiological* approach to this table. In the eclectic approach, psychotherapists borrow from different schools, depending on the client's situation and stage of therapy. The psychobiological approach is an essentially medical approach, founded by Karl Lashley and others, who associate various processes to specific areas of the brain. According to psychobiological analysis, the study of hormones and neurotransmitters holds the answer to deviations in human behaviour (Rathus, 2000). This approach essentially explores the biological basis of psychological problems.

The approach taken by the mental health professional, whom we will henceforth refer to as the *therapist*, influences his style. For example, an interpreter will have the impression that some therapists are 'interventionists', whereas others are 'listeners'.

4. The therapeutic alliance

Pollard (1998) says that one of the first goals of a therapist is to establish a therapeutic alliance with the patient. This alliance or relationship allows the patient to feel safe and comfortable enough to discuss his emotions. An interpreter working in a therapeutic setting must be aware that his presence may interfere with this crucial step of the deaf person's healing process. The interpreter must make every effort to preserve the relationship between the other two individuals in the communication situation. If the interpreter is too close to the deaf person emotionally, the therapeutic relationship that should develop between the deaf person and the therapist will instead develop between the interpreter and the deaf person. This can be detrimental because the deaf person might hesitate to confide in the therapist. A long wait with the deaf person in the waiting room before the session might have the same effect: the deaf person has the time to share his experiences with the interpreter and then no longer feels the need to repeat them for the therapist during the session. Some interpreters even agree to meet with a deaf client outside of the office (going for a coffee for example) to discuss his problems and allow the client to externalize his emotional experience. In these situations, the interpreter unintentionally diverts the therapist-patient relationship.

For their part, therapists must be made aware that the therapeutic relationship runs the risk of being compromised if they misunderstand the interpreter's work. Many people hold misconceptions about interpretation, thinking that it is possible to translate everything exactly and precisely, without losing any information. Some mental health professionals take it for granted that professionals in other fields (i.e., interpreters) understand what they are doing and the goals they are pursuing when they act in a certain way. This is why

interpreters must not hesitate to ask the clinician questions about the goals of the session, what he wants to get from his patient, and the key issues that he wants to cover. We will see the significance of this aspect in Section 7.

When a therapist and a patient truly understand the interpreter's role and limitations, they can more easily forget that he is there and focus their attention on the most important elements of the therapeutic session (Pollard, 1998). It is possible for a therapist to ask the interpreter his opinion of the deaf person, although fortunately this doesn't happen very often. It is important that the interpreter respond that this question is outside of his field of expertise, which is limited to communication, i.e., everything involving language and culture.

5. Transference and emotional charges

Transference is a necessary component of the healing process and an element of the therapeutic alliance. Interpreters are not trained to have the patient's transference directed at them or to manage emotional charges. But interpreters need to know what these processes consist of in order to try to protect themselves from them.

Transference

Transference is another essential component of analysis; it involves the transference of an emotional state from one object to another by association. In a therapeutic relationship, patients discuss old emotions and difficult relationships. They also establish a new relationship as well as new emotions with the therapist. In time, patients blend old and new emotions; when this mix occurs, the patients' thoughts are not based on reality, but on past emotions. The clinician may then intervene, helping the patient to see the extent to which the old model is affecting current relationships.

Three situations may occur:

- Ø The therapist may encourage transference by saying little about himself, by refusing to answer some of the patient's questions, and by remaining calm. For an interpreter, this may be confusing, since it is not a normal way for two people to interact.
- Ø The patient may express strong emotions towards the therapist (anger, jealousy, fear, even love).
- Ø Transference may be directed towards the interpreter, since the interpreter (like the therapist) talks little about himself and remains calm. Pollard (1998) gives the example of a patient who got angry at an interpreter about what he was wearing. She had transferred her irritation to him based on a feeling of powerlessness she was experiencing.

6. Emergency situations

What happens when a deaf patient comes to a hospital with symptoms of psychological distress? A clinician, who must decide if this person constitutes a

danger to herself or others, will question her. Then, a psychiatrist will see the patient to make a diagnosis and might ask the same questions again. Clinicians may appear uninterested in the problems the patient is expressing, but mental health professionals are there to make an initial diagnosis and determine what level of care is required. An interpreter working in this situation can avoid frustration by being forewarned about the types of questions that will be asked during this series of examinations, which we will address next.

Mental tests

Clinicians administer mental tests to determine whether the person is depressed, abusing substances (alcohol or drugs) that affect their behaviour or suffering from anxiety, obsession, post-traumatic shock, phobia or psychosis.⁴ The following table provides an overview of what psychological tests include. Some illnesses affect the mental faculties, so a deaf person might answer strangely. This could present a considerable challenge for the interpreter because, according to interpretive theory, it is the meaning (the *vouloir-dire*⁵), not words, that must be interpreted. The interpreter is faced with a paradox when he has to re-create the meaning of meaningless statements. How would one interpret in this situation? The interpreter must speak directly to the health care provider and say that he will change from interpreting meaning to interpreting word for word. Once a patient's discourse becomes incoherent, the interpreter must stop and explain the interpretation process.

Table 2: Overview of questions on a mental health test

Questions concerning	Types of questions and objectives	Challenge for French – QSL interpretation
Memory	- give the day and date	
	- patient's name	
	- name of the general physician whom the client had previously seen or the name of his family physician	- people who are deaf find it easier to describe someone physically than to remember their name
	- spell words	- a deaf person may be illiterate
	- spell words backwards	- same comment

⁴ This word is used to describe situations in which a person is in such a state of disarray that he no longer understands reality.

⁵ See Séleskovitch, D. (1981)

Thinking faculties	- ask for an explanation of a poem ⁶ or idiomatic expression	- French expressions will be understood by QSL “speakers” in the literal sense
	- check patient’s abstract reasoning skills	- ability to think in abstractions often depends on the degree of fluency in the language and level of cultural knowledge
Safety	- check the risk of suicide or danger to the safety of a child or the life of another person	

When professionals start asking questions that present challenges for interpretation, it is important for the interpreter to interrupt to explain either his role or a special feature of the language or ways of doing things in the deaf community (deaf culture). For example, poems and idiomatic expressions are strongly linked to a language’s culture. The following are real-life examples of expressions that therapists have asked patients to explain:

1. “*donner l’heure juste*” [give the exact time]
2. “*il pleut des cordes*” [it’s raining cats and dogs]
3. “*un hirondelle ne fait pas le printemps*” [literally, seeing one swallow does not mean that spring has arrived, i.e., one instance is not enough to prove anything]

The interpreter is probably the only person who understands that these expressions pose a challenge. He must say so immediately and suggest an alternative. Of course, the people involved must be aware that his interpretation will be full and impartial. However, they must also understand that the process must be enriched with elements from the culture that are essential to understanding the content of the message. Deaf people sometimes think that neutrality means that the interpreter will never add anything; they have a mechanical model of the interpreter’s work. The interpreter must correct this misconception and explain that his work is more bilingual and bicultural than mechanical and that, sometimes, he has to intervene in order to provide a clear cultural context for the statements he is translating. The challenge for the interpreter is to find the right balance (Bélanger, 1996).

⁶ A higher level of abstraction is required to understand a poem than to understand how a tool works.

Testing the Test: A Look at Construct Validity in Interpreter Certification

.....Andrew Clifford

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Interpreters are powerful people. Because they mediate between individuals and groups who would otherwise be unable to make themselves understood, interpreters hold power over communication. In a legislative assembly, interpreters ensure that all people in a political jurisdiction have access to information about government programs and services; in the courtroom, interpreters give all parties the chance to participate in the legal process; and in a medical encounter, interpreters convey information between doctor and patient that may literally save a life. Yet, in situations like these, if the skills of the interpreter are not up to the task at hand, the health and well-being of the people involved may suffer.

This is why certification tests have such an important place in professional interpreting. An interpreter who takes and passes a certification test can give the public some assurance that he or she has the minimum level of skill needed to practice in the profession. That is, provided there is nothing wrong with the certification test itself.

For if we test the interpreters, then surely we should also test the test. If we do not, we have no guarantee that we are not failing interpreters who are actually competent (that is, producing a false negative), or passing interpreters who are actually not (producing a false positive). In the case of the false negative, the interpreter will be suddenly faced with a career roadblock that may partially or totally impede his or her ability to earn a livelihood. In the case of a false positive, clients and employers will be led to believe that they are dealing with someone who is capable, but they will end up receiving inferior services. Both cases will have an adverse impact on the interpreting profession as a whole.

So how do we avoid these types of situations? By making sure that a certification test is technically sound. One specific way to do this is to investigate a test property called *validity*, which is a measure of how appropriate it is to make decisions based on a test's scores. If the decisions made from an interpreting test are valid, it means that there is good evidence to show that high scores are associated with high levels of the ability needed to interpret, while low scores are associated with low levels of the abilities needed to interpret.

One source of validity evidence we can consider comes from the psychological constructs – that is, from the set of ideas about a particular human ability –

measured by a test. All tests measure constructs of some sort: reading comprehension, creativity in writing, ability in arithmetic are all examples of test constructs. The question we must ask ourselves is whether the test we are looking at measures the right constructs to tell us what we want to know. As a researcher, I was eager to try and find an answer to this question with regard to interpreter certification. I quickly discovered that there was very little published information about constructs – or any other source of validity evidence – in interpreter testing. I therefore set out to learn what I could on the subject through my own research.

The Challenge

I began by looking at a number of tests that had been constructed to certify professional interpreters. I had a look at the constructs they purported to measure, and at the actual scores obtained from the tests. Early in my investigation, it seemed that there might be an issue with construct validity related to these tests.

As a result, it seemed to me that the best thing to do with my research would be to see if I could overcome the issues that the other tests had faced. In other words, my challenge would be to devise my own test, administer it to a group of interpreters, and evaluate the validity of the test constructs.

The Model

But what is the best way to build a certification test? And how do you build one specifically for interpreters?

To answer the first question, I looked at many tests that are used to certify or license practitioners in other professions. Doctors, pharmacists, therapists, and teachers all have to pass certification or licensure exams, and the science of test construction and evaluation in these areas is quite advanced. I made careful note of the ways in which these tests are put together, and of the (statistical) methods that are used to evaluate them. I decided to use what I had seen in these other professions to model my own work.

To answer the second question, I had to think carefully about the constructs I would use in the test. Just what abilities do interpreters need in their work? There was no existing work on interpreting test constructs, so I had to look at something more basic. I began by investigating a number of theoretical descriptions of the interpreting process that had been put together over the years by a variety of practitioner-investigators. I looked at the work of people like Danica Seleskovitch and Marianne Lederer, Daniel Gile, and Barbara Moser-Mercer. I eventually settled on a model put together by Robin Setton, a conference interpreter and professor who now teaches at the *Université de Genève*.

Setton's model suggested to me that there were three different abilities at work in comprehension during simultaneous interpreting. They are as follows:

1. Linguistic Parsing

This is the ability to analyze language at a variety of levels – phonological, morphological, lexical, syntactic, etc – and extract related meaning. For example, if I hear the statement “The horses ran away,” linguistic parsing allows me to understand what a horse is, to know that reference is made to more than one, to realize that the horses flee, and to recognize this action occurred in the past. However, linguistic parsing does not allow me to figure out which horses, where they were, when they ran, or why their running is relevant to the rest of the conversation. It only involves the processing of information from language itself, and not from other sources such as context or prior knowledge.

2. Assignment of Reference

This is the ability to gather clues from the immediate environment and from the preceding discussion and to use them in understanding “who” does “what” to “whom”. For example, if I am speaking to my neighbour about property taxes, and she tells me that “City Hall is going to stick it to us again,” I will likely understand that “City Hall” means the mayor and/or city council, that “us” means taxpayers, and that “sticking it” means a tax increase. This information comes not from linguistic content, but from my understanding of context and what has been said previously.

3. Interpretation of Inference

This is the ability to use existing knowledge – and in particular the implicit knowledge of the pragmatic rules people follow when they speak – to understand a speaker's intent. For example, if I am seated next to an open window in wintertime, and someone interrupts a conversation to tell me that “It's really cold in here,” I will likely shut the window. Although there is nothing in the speaker's linguistic content that communicates a request, I implicitly know that most people do not change the subject for no apparent reason, and I am able to interpret the intent behind the statement.

The Test

I used these three constructs to build a test for comprehension during simultaneous interpreting. The test was made up of two components.

The first was a 10-minute excerpt from a speech given by Preston Manning, the former leader of the Canadian Alliance Party. It was broadcast on a public affairs program, it was relevant to a Canadian context, and it resembled the type of material conference interpreters in this country might regularly encounter.

The second component was a set of multiple-choice test items, based on the content of Manning's speech. The 45 items in the series measured the three test constructs: 15 of them measured linguistic parsing, 15 measured the assignment of reference, and 15 measured the interpretation of inference. The items were designed to be scored in a weighted manner. This means that the multiple choices were not "right" or "wrong." Instead, all the choices were correct, but they varied in the level of their correctness. In each item, one choice was worth one point, another was worth two points, another was worth three, etc. The items were designed to be scored in this way so that I had the kind of data that could be analyzed using the statistical methods I had seen in the evaluation of certification and licensure tests in other professions.

I administered the test to a small group of interpreters. First, I asked them to simultaneously interpret Manning's English speech into French. Second, I had them answer the 45 multiple-choice items, based on their understanding of the speech they had interpreted.

The Evaluation

After the test takers' performances were scored, I evaluated the test. The evaluation had four components, and each one was designed to answer an important question:

1. Are the Constructs Related to Interpreting?

This component assessed whether the test constructs are appropriate for use in interpreter certification. Do they in fact represent abilities that are important in interpreting? To make this determination, I re-examined Setton, his work, the research that influenced him, and the authors that wrote that research. I looked for evidence that Setton and the other authors had first-hand knowledge of conference interpreting, and that they had recruited conference interpreters to participate in their research.

2. How Much Measurement Error Is in the Test Scores?

Ideally, there should be only two reasons why all the test scores are not the same: 1) there are different levels of ability from participant to participant; and 2) participants are stronger in one ability (e.g., linguistic parsing) than they are in another (e.g., interpretation of inference). If other things have caused the scores to vary (e.g., some items are more difficult than others), steps should be taken to limit this variation.

3. Do the Scores "Behave" the Way the Constructs Predict (Method I)?

Information on the constructs tells us that they are separate abilities. In other words, if a participant is strong in one, they need not necessarily be strong in the other two. Consequently, there should be statistical evidence that scores for the three constructs are different from one another. I used one particular statistical method to look at differences in the construct scores.

4. Do the Scores “Behave” the Way the Constructs Predict (Method II)?

If the construct scores really do measure separate abilities, we should be able to see this separation in more than one statistical test. I therefore used a second statistical method to look into this question.

The Results

I carried out my evaluation in each of the four components, and I found the following results:

1. Test Constructs are Related to Interpreting

Setton is an experienced conference interpreter who developed his model by observing the performance of a number of practicing interpreters in actual conferences and in realistic simulations. Similar things can be said of the authors who influenced his work: a number of them have experience as interpreters (e.g., Seleskovitch and Lederer, Gile, and Moser-Mercer), and they developed their own models based on observation of working interpreters, or on experiments that involved the participation of interpreters. This would seem to indicate that the test constructs derived from Setton’s model have a very strong link to the interpreting profession.

2. Measurement Error was Kept to a Minimum

I discovered that not all 45 items were as similar in difficulty as I might have liked. I therefore took a sample of the items (five linguistic parsing items, five assignment of reference items, and five interpretation of inference items) that was more uniform. (In technical terms, to decide whether the sample items were uniform, I calculated *difficulty indices* and *discrimination indices*, and I conducted a *distractor analysis* for each item.) Working with the sample allowed me to be reasonably certain that measurement error had been kept to a minimum.

3. Scores Do “Behave” According to Constructs’ Predictions (Method I)

Setton’s model suggests that the three constructs (linguistic parsing, assignment of reference, and interpretation of inference) are separate from one another, and this separation appeared to be present in the scores for the three constructs. The statistical tests I used (Pearson’s product-moment correlation, and Fisher’s Z test for correlated coefficients) suggested that there were no similarities between the three sets of scores. In other words, the linguistic parsing scores were not like the assignment of reference scores, which were not like the interpretation of reference scores, etc.

4. Scores Do “Behave” According to Constructs’ Predictions (Method II)

To have a second look at the results from the third component, I used another method of determining whether scores were as separate as Setton’s model

would lead us to believe. This second method (Cronbach's alpha) indicated that the scores within each item type were highly similar. In other words, all the linguistic parsing scores were very much alike, all the assignment of reference scores were very much alike, as were all the interpretation of inference scores. By looking at similarities within construct scores (Method II) and differences between them (Method I), I found evidence in the test scores to support what we believe about the three interpreting constructs.

Conclusion

The research results show that there is evidence strongly linking the three constructs to conference interpreting, and that there is evidence that the test is measuring the constructs the way it should. This means in turn that there is good evidence to support the validity of interpretations that are made from the test. In other words, we have good reason to believe that the test does actually measure linguistic parsing, assignment of reference, and interpretation of inference, and that these constructs are important for conference interpreting. The validity evidence for this test is much stronger than any evidence uncovered for the interpreter certification tests I looked at in the beginning stages of my research.

However, this does not mean that someone who wants to certify professional interpreters should make use of the test I developed. My test was only intended to measure one part of the interpreting process (comprehension, and not production), and it is a paper-and-pencil test. But the research does suggest that a test based on the three interpreting constructs I looked at will have fewer technical flaws than tests based on other constructs. By addressing the issue of interpreter certification, it helps to fill a serious gap in interpreting research.

A lot more work still remains to be done, but we have a very good idea of the direction in which we should point future research. A certification test based on the linguistic and discursive constructs I used should provide the kind of technical soundness interpreters and their clients have come to expect.

The Ethics Corner

In the first of this ongoing series, we invite you to send in comments and possible answers to an ethical dilemma related to interpreting. Your responses will be published in the next issue of A Critical Link.

The mental health clinic

This assignment takes place in the outpatient department of an outpatient mental health clinic.

The interpreter is familiar with the patient as a member of a common ethno-cultural community. The interpreter has conveyed this familiarity to both parties and they both agreed to carry on with the interpretation.

As the interview unfolds, the patient has indicated she is feeling down. The psychiatrist is trying to determine whether his client needs to go to hospital. The psychiatrist decides not to admit his client.

The interpreter, through her contacts in the community, is aware that the patient has been in an abusive relationship with her boyfriend and has made several attempts to commit suicide.

As the interpreter, do you reveal what you have heard about the patient? Do you keep it to yourself?

[Responses may be sent to Diana Abraham at diana.abraham@mci.gov.on.ca.](mailto:diana.abraham@mci.gov.on.ca)