
By bringing together a selection of papers from the First International Conference on Legal and Healthcare Interpreting, held in Hong Kong in 2017, and additional contributions, Eva Ng and Ineke Crezee provide a snapshot of current research in these prominent subdomains of community interpreting (CI), also known as public service interpreting. The papers present research from a variety of countries ranging from Australia, New Zealand, Hong Kong, and Macedonia, to Spain, with a relatively strong representation from the latter country (five out of thirteen contributions).

Since the 1990s, CI has emerged as a research domain within Interpreting Studies. Until that time, researchers had focused primarily on conference interpreting, particularly on the practice of simultaneous interpreting. Whereas early studies were experimental and conducted from a psychological perspective (e.g., Gerver, 1975), the foundations of empirical research on interpreting as a linguistic and cognitive communicative process were laid by Kade (1968), Chernov (1979/2002), Seleskovitch and Lederer (1989), and later consolidated by Gile (1995), Kurz (1996) and Moser-Mercer (1996), to name but a few researchers. As a result of the social turn (Pöchhacker, 2016) as well as of immigration flows in most western European countries, leading to a growing need for community interpreters, CI research gained importance. More recently, the groundbreaking works by Wadensjö (1998) and Mason (2001), both of whom understood interpreting as a time- and context-bound interactional process, determined the basis for current CI research.

Today, research on CI still continues to expand, with settings under investigation becoming increasingly diverse, as demonstrated by the emergence of studies on non-professional interpreting (Antonini et al., 2017) such as child language brokering (Antonini, 2015), as well as highly specialised contexts, for example, faith-related interpreting and interpreting in war and conflict zones (Tipton & Furmanek, 2016). In spite of this growing fragmentation of contexts (De Boe et al., 2021), there are just two main headings under which the varied settings can be classified, as exemplified by this edited volume: legal interpreting and healthcare interpreting. The distinction between the two domains under investigation is maintained throughout the book, which is divided into two parts, each dedicated to either domain. Although this makes the work well organised and transparent, at the same time, it seems a missed opportunity for looking into possible overlaps.
and similarities between research topics and outcomes across the two domains, which in reality are less clear-cut, as demonstrated in the individual chapters.

In their introductory chapter, Ng and Crezee state that legal and healthcare interpreting stand out from other contexts of CI «not only because interpreters need to manage highly specialised knowledge and terminology», but also «because the stakes of working in these contexts are so high that interpreting mistakes can become, literally, a matter of life and death, or result in a miscarriage of injustice» (p. 1). Their introduction is divided between the domains of justice and healthcare, starting with legal interpreting (Section 2, p. 2). This section summarises the main research topics in legal settings, including the role of the interpreter and the conflict between professional codes and day-to-day practice, accuracy, reported speech, remote interpreting, sign language interpreting, the specificities of asylum settings, stand-by interpreting, and training. The subsequent section (Section 3, p. 4) presents an overview of healthcare interpreting research. According to the editors, this domain is characterised mostly by its diversity in settings and topics that often require a specific approach by the interpreter. For example, in speech pathology, it may be important to provide metalinguistic information as to how something was said, whereas in end-of-life care, the emphasis will be on interpersonal skills. Research topics include the benefits of healthcare interpreting for patients, ethical dilemmas, accuracy, impartiality, the interpreter’s role, advocacy and brokering, and training issues.

Three of the chapters in the first part are dedicated to court room interpreting and indicate a clear gap between, on the one hand, training and policy, and, on the other, courtroom practice. Chapter 4 presents a survey by Wan Kei Wong of Australian courtroom interpreters. It shows that almost half of the participating interpreters indicated never to prepare for an assignment, in spite of the importance generally attached to preparation in interpreter training, as well as in the «Recommended National Standards for Working with Interpreters in Courts and Tribunals» (RNS, 2017)\(^1\). According to Wan Kei Wong, this is due to interpreters’ lack of access to relevant documents, as well as to the local court culture, which «inhibits initiatives by interpreters to proactively request materials» (p. 85) for fear of being excluded from future assignments. The author therefore pleads for a systematic transformation of this culture and a more thorough implementation of the RNS. Within the same settings, Chapters 1 and 2 are both concerned with the importance of knowledge of the specific courtroom discourse. Whereas Ng (Chapter 1) shows that waiving the right to an interpreter by non-native speakers of English in Hong Kong impedes the delivery of justice, Burn and Crezee

(Chapter 2) demonstrate how crucial discourse characteristics went unnoticed by students of legal interpreting in New Zealand. Discourse knowledge is also a central theme in Xu’s research (Chapter 5), focusing on turn-taking management. From this research on lawyer-client interviews, it appears that both lawyers and interpreters frequently intervene in the interaction to ensure the observation of turn-taking rules for the benefit of the interpreters, although lawyers do prioritise their own professional goals. The notion of intervention is further discussed by Todorova (Chapter 3), be it in an entirely different context, that is, refugee settings in emergency situations in Macedonia. Todorova compares the role of the interpreters in this context to the one of conflict mediators, to conclude that as much as there are no truly neutral mediators, there are no genuinely neutral interpreters in conflict zones. The author takes a stance against the traditional view of the interpreter as an impartial conduit and uses her own experience with this type of interpreting to complement the analysis of the interviews with interpreters. As such, she explicitly moves away from a purely empirical approach. All contributions signal the need for specific training and awareness-raising, for example, to make trainees better acquainted with illocutionary force and intent in lawyer-witness discourse (Burn & Crezee, Chapter 2) and to train interpreters in turn-management, which can help them meet their professional goals (Xu, Chapter 5).

Not surprisingly, therefore, a significant part of the volume is dedicated to training. Both in Spain, Blasco Mayor (Chapter 6) discusses the training of legal interpreters and translators, while Del-Pozo-Trivino’s research (Chapter 8) responds to the need for teamwork between police staff and interpreters. The contribution by Ortega-Herráez (Chapter 7) further completes our view of the Spanish situation by looking into the role of professional associations in the adoption of newly introduced legal provisions for legal interpreters and translators.

The second part of the book, revolving around healthcare interpreting, also strongly emphasises the need for training and awareness of each other’s roles by the different stakeholders involved in the interpreting process. Interestingly, the authors adopt different perspectives, ranging from the perceptions of healthcare providers (Foulquié-Rubio & Beteta-Fernández, Chapter 10), to interpreters (Hlavac, Surla & Zucchi, Chapter 12) and both groups (Crezee & Jülich, Chapter 9). Crezee and Jülich report on differences between healthcare providers and healthcare interpreters in their expectations towards the role of the latter group, in particular in some important areas such as impartiality, visibility of the interpreter and confidentiality. The findings of their survey show that health professionals need to be better informed about interpreters’ role boundaries. Foulquié-Rubio and Beteta-Fernández (Chapter 10) investigated the perspective of healthcare providers by means of a survey
among nurses in a paediatric emergency department in Spain, revealing that nurses feel that language barriers interfere with their professional aims. Based on these findings, the authors express the need for protocols on language policy in emergency departments. Language barriers, in particular those related to the often complex discourse of health providers and patients, are also investigated by Hlavac et al. (Chapter 13), whose survey further explores interpreters’ accounts of situational and physical features of interaction in mental health settings. Although the authors highlight the specific demands of this type of interpreting, their call for a «constructive working alliance» (p. 377) between health providers and interpreters, for example, by means of briefings before and after interactions, is perfectly in line with the call by many of the papers in this volume (including the part on legal interpreting), for a closer and more efficient cooperation between all participants in CI events.

The two remaining contributions in the second part of the book also demonstrate the importance of collaboration and training, by looking into the professionalisation of healthcare interpreting. Leung (Chapter 11) focuses on the very recent emergence of healthcare interpreting in Hong Kong and predicts its likely disappearance due to its low status and remuneration. Leung’s work also shows the urgency for better regulations and closer cooperation between users and practitioners. In the same vein, Valero-Garcés (Chapter 12) reports on collaboration in healthcare interpreting via the project INTER+MED. This aimed to mitigate language barriers in primary care in the region of Madrid (Spain) by creating a team of professional interpreters and intercultural mediators, which was closely monitored by researchers. By means of surveys and interviews with the mediators, valuable information was elicited concerning the difficulties they encounter in their day-to-day professional reality. As opposed to Leung, Valero-Garcés expects an increased use of language services, thanks to the project. However, in line with the other papers in the volume, the author highlights the lack of solid regulations concerning the use of interpreting services and calls for greater interdisciplinarity.

In spite of the contextual and geographical variety the collected papers represent, their common ground can be categorised into four key issues: a need for cooperation, interdisciplinarity, training, and awareness-raising. These are likely avenues of future CI research.

REFERENCES


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