Honouring the Past,
Treasuring the Present,
Shaping the Future

Conferencing Proceedings of the 2019 WASLI Conference

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Foreword

It is an honour and privilege to introduce the Conference Proceedings of our fifth and largest ever WASLI conference. Our conferences have allowed us to learn from many corners of our world, from our founding conference in Worcester, South Africa in 2005, to our 2007 conference in Segovia, Spain, followed by our return to South Africa in 2011 where we met in Durban, to Istanbul, Turkey in 2015, and most recently, Paris, 2019. Each of the conferences have offered tremendous conference presentations that represent the diversity that is our global interpreting community. Each conference offers its own energy, and the following papers represent some of the talented people who shared their energy, time, and talent in order to enrich our conference participants.

Our sincere thanks to Suzanne Ehrlich and Campbell McDermid for chairing the scientific committee and bringing us such a rich and varied conference program that was enjoyed by over 500 attendees from 67 countries. We also appreciate their editorial work, which was supported by Ashley Gentry, that has resulted in this interesting collection of papers.

We hope you enjoy reading each of the papers, beginning with the work of Jeremy Brunson, Cynthia Roy, and Christopher Stone, who draw our attention to the philosophies which have traditionally shaped interpreter education, and a call to action for a theoretical-based education paradigm. We move from education to a thoughtful discussion of exploring toxic ableism and its impact on Deaf communities, offered by Octavian E. Robinson, Naomi Sheneman and Jonathan Henner.

The contributions that follow canvas a range of topics from mentorship strategies after graduation from an interpreter education program by Kerrie Ellen Lovercheck, to a review of an interpreting program in Uganda, as described by Bonnie Busingye, and the impact of BSL legislation in Scotland, presented by Rachel Mapson, Vicky Crawley and Yvonne Waddell. Aurélia Nana Gassa Gonga, Onno Crasborn, Carl Börstell and Ellen Ormel offer us valuable insights about processing time when contrasting work into International Sign and NGT. Finally, our proceedings close with a paper that addressed our theme, treasuring our roots, authored by Naomi Sheneman and Octavian E Robinson. This paper examines the ways in which deaf situated knowledges can be centered within the professional of signed language interpreters.
We hope these papers offer you a window into some of the conference presentations, and inspire conversations among your local community of interpreters, and within our international network of practitioners, consumers, and educators. And, maybe, just maybe, they will also be a motivating factor in your planning to attend the next WASLI conference in South Korea in 2023.

With our best regards,

Debra Russell, WASLI Honorary President
and Christopher Stone, WASLI President
Editors’ Note

It is with great pleasure we bring you the conference proceedings for the 2019 WASLI conference held in Paris, France. Much credit goes to the authors for their presentations and for the innovative work they have performed, and which you are about to read. The WASLI Board has also been instrumental in supporting us in the creation of these proceedings and we owe them a debt of gratitude.

We would be remiss if we did not also thank the reviewers, who included a dedicated group of individuals (in alphabetical order):

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We hope that you find the various articles thought-provoking and informative and that they help to honor our past, treasure the present and ultimately shape our future.

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Shaping Our Academic Future

Jeremy L. Brunson
Cynthia B. Roy
Christopher A. Stone

Abstract

Many countries around the world struggle to provide Deaf people with qualified interpreters. Those who are institutionalizing a solution for this often do so through Interpreter Education Programs (IEPs) and typically situate their philosophy within a skill-based training – interpreting. We suggest this presents a myopic view of interpreting; a view that assumes language and interaction occur within a vacuum. Therefore, we believe a more useful paradigm under which to teach interpreting is a theoretical-based education – Interpreting Studies (IS). In order to do this, educators and students must be able to define Interpreting Studies and recognize the contribution of various disciplines that make up this field. Embedding these disciplines within IS requires grounding in each discipline’s theoretical principles which is significant as the education of interpreters takes hold in academia.

Introduction

Interpreting occurs within a particular socio-historical moment. It is influenced by interlocutors’ various identities. The language we use and how it is used is tied to our perceptions of self and others and is determined by the social relations in which we are embedded before, after, and during the interpretation. Therefore, a holistic view and examination of interpreting is necessary. This requires an understanding of the fields that, when used together, provide this type of insight.

Through our readings of the literature, we have found that the following disciplines have contributed to the development of an Interpreting Studies discipline: history, translation, linguistics, sociology, social psychology, and cognitive psychology (see Roy, Brunson, & Stone 2018). In this paper, we briefly describe the ways in which the major ideas and scholars of these disciplines have contributed to the knowledge base of IS. Our discussion here is not limited to one country or even one time period. To understand the shape of the future of interpreting, the field, its practitioners, and scholars who study it, the body of knowledge explored must be transdisciplinary, translocal, and translingual.

What is a Discipline

Most readers are probably familiar with the idea of disciplines, for example, psychology, English, mathematics, and others. However, it has been our experience that being familiar with the idea of a discipline and understanding the design of a discipline are different.
Every discipline strives to develop scientific theories about the ways in which either the world works or the ways in which we can understand human beings and their actions. Theories provide general principles for how something works or an explanation of the relationship between two or more concepts (Merton, 1967; Schneider, 2006). As Chafetz (1988) says: “The central task of any science and its theories is to aid in our understanding or explanation of some class of empirical phenomena.” (p. 5).

Empirical phenomena are facts or events that are observed, or that can be verified through approaches that include experiments, or observations, or interviews, or recordings, etc. Gathering facts, observing and recording events, interviewing people, counting occurrences, and detecting patterns are all different approaches to collecting data for research. Analysis then either confirms a theory about the way the world works or allows scientists to develop a new theory. We use theory as a way to explain how persons, places, or events, we experience are connected and related to one another. Within Interpreting Studies, we use theory to explain the process of working between two distinct languages.

Testing a theory requires designing a study. A study collects specific data (language examples, interpreting examples, survey responses, responses to experiments, etc.) and these can either be used to test a hypothesis, to explore the categories and themes that emerge from the data, or to describe specific phenomena within the data. Our own research work has put forth different, although not contradictory, theories about interpreting. For example, Cynthia Roy (2000) posits that interpreting is a discourse process; Jeremy Brunson’s (2011) position is that access is a matrix of various apparatuses that organize video relay service interpreters’ labor; or Christopher Stone’s (2009) position holds that Deaf translators adhere to norms that create an effective interpretation/translation. These theories were generated through the disciplines of linguistics, sociology, and Deaf studies, respectively. The challenge now is to incorporate them into a unifying theory that explains phenomena of interest to scholars in IS.

**What is Interpreting Studies (IS)**

To our minds, IS is the encompassing term for studies of interpreting between any language pair, and sign language interpreting is one area of study within IS. Whether a scholar is working in the field of literature, geography, or mathematics, if they are
examining interpreting, they are doing IS. We label IS for what it is, transdisciplinary. That is, IS examines interpreting at the nexus of multiple disciplines. This exploration then benefits from multiple disciplinary perspectives simultaneously rather than examining interpreting solely through sociology, linguistics, or cognitive psychology, for example. This approach can potentially move us closer to more holistic analyses of interpreting which would become both the form and the theory of the discipline of IS and Sign Language Interpreting Studies (SLIS).

As a field, IS strives to bring together different ideas of what interpreting is—an historical process, a translation process, a linguistic process, a sociological process, a social/psychological process and a cognitive process, among others. A unified theory of IS would describe how interpreting happens as an event created by relationships among people. Constructing a theory is and will be difficult, as not only does it have to account for at least three primary people (or more) and their interaction, but it also must account for layers of social and psychological forces and norms. There are so many concepts at play that it is like putting together a puzzle the size of a shopping centre!

Conducting research on the interpreting process seeks to explain how all the parts move and come together. Determining how we conduct research is where other disciplines have assisted. IS has borrowed methodological practices of other disciplines to investigate interpreting. For example, the cognitive process has been examined in experimental ways by psychologists (MacNamara et al., 2011), the discourse process has been examined through recordings of natural language by linguists (Marks 2018), social forces have been examined through institutional texts (Temple 2005), and norms and identity have been examined through interviews (McKee & Awheto 2010). There are many different paths to understanding the process and the future is to combine these theories and methods to present a more holistic picture. This is what we mean by transdisciplinary.

Adhering to an IS paradigm moves our profession away from simplistic discussions of interpreting towards substantive questions that encourage research and apply theoretical analyses. For example, in the late 1980s, we conceptualized the work of sign language interpreters as metaphors of practice (although they are erroneously referred to as a models). These metaphors (i.e., helper, conduit, communication facilitator, and bi-
bi) provided a label for one part of the work of interpreting. They focused solely on our interaction with the consumers. Within IS we recognize that interpreting can and should be examined as a social phenomenon, an event with people and practitioners all embedded in a particular history and influenced by the societies they all inhabit. IS illustrates that people involved in interpreted events are experiencing the moment not only physically but socially, linguistically, and psychologically. Understanding this larger picture informs the work of translators and interpreters.

**Six Disciplines**

What follows are brief glimpses of the six disciplines we consider the academic foundations of IS.

**Through the Lens of History**

History as a discipline brings together primary and secondary sources (i.e., interviews, diaries, newspapers, documents) to document and explain events that have happened, within the context that they happen. In doing so, the historian can provide plausible explanations for events in the present. Using a historical lens enables us to better understand the communities, and language practices that have occurred for different peoples located in different times, and how these resemble and differ from the current day.

Some scholars examine history and try to understand the multiple convergences of factors that bring about events. Looking at historical events is not merely learning about events of the past, but it is learning about who we are in the present by examining events of the past. Some scholars who examine historical events aim to unpack grand narratives, which often only offer a single viewpoint, in order to understand events within broader and wider discourses (Foucault, 1961). Foucault, for example, was far more interested in, and receptive to work which, instead of trying to understand the 'one and only' truth of things, tried to 'historicise' the different kinds of truth, knowledge, rationality and reason that had developed in cultures (Danaher, Schirato, & Webb, 2002, p. 6). Foucault's (1970) work in genealogy reminds us to be mindful of what information may be difficult to find, and how this might shed light on different aspects of “received wisdom”, such as the work of Deaf interpreters, or individuals, groups and communities that are
discriminated against, be they women, people of ethnicity, minority or low status language users.

Historical accounts of interpreting triangulate the historical evidence we have of interpreters working from different periods around the world and explore some of the earliest references we have of spoken and sign language interpreters. Leahy (2015), for example, provides an accounting of how interpreting occurred prior to the systemization of the field. In her analysis, she demonstrates that the narrative that many have learned – the first legal interpreters in the USA were from the schools for the deaf – may have been incorrect. This is just one example of how examining historical records and documents inform our understanding of the past, our sense of the present, and our direction to the future.

Through the Lens of Translation

Translation Studies (TS), a term coined by James Holmes (1972), is the scientific study of the many aspects of translation including the activity of translating. Holmes suggested that the concerns of TS are the complex of problems around translating as a process and a product, i.e. “What are the many decisions translators must make,” and, as a product, i.e. “Is the translation an accurate representation of the original message?” These questions also have a central place in the study of interpreting. Interpreting, as both a skill and a science, focuses on the nature and transfer of meaning which are parallel concerns with TS.

Other concerns and ongoing discussions in common with TS include whether a translation should reflect the worldview of the author, or the worldview of the reader, or perhaps a bit of both (Munday, 2012). As translation expanded into scientific, technical, legal and business works, scholars came to focus on the communicative interaction between people who did not share a worldview, and TS turned to theories and research from communication, discourse studies, and cognitive linguistics, taking in the theoretical stances and methodologies from these disciplines (Munday, 2012). These are disciplines to which interpreting has also turned.

Not only has TS contributed to our basic understanding of interpreting processes and products, but many IS principles evolved from those first put forth in TS. As Pöchhacker (2004) notes, “the basic insights and ideas about translation may now be
feeding more directly into interpreting studies and enriching its theoretical foundations” (p. 48). Thus, the discipline of TS forms the bedrock from which IS emerges.

**Through the Lens of Linguistics**

Intertwined with translation and interpreting is linguistics, the discipline that studies language. Linguists understand that language is a dynamic activity in which participants think of themselves as doing things with language, such as persuading, narrating, entertaining, or explaining. Understanding linguistic forms and strategies that people use to convey meaning is the essential purpose of linguistic study in interpreting. Talk is an activity in which participants determine minute-by-minute the meaning of something that is said or signed. Knowing and recognizing ways of using language to convey and construct meaning is an essential skill for translators and interpreters.

**Discourse and Discourse Analysis**

Analyzing the linguistic activity between people is the study of discourse and discourse analysis. Discourse is language as it is actually expressed and understood by people engaged in a social interaction to accomplish a goal (Johnstone, 2002). This definition, developed in linguistics, aims to discover and describe how participants in a conversation make sense of what is going on within the social and cultural context of face-to-face interaction. And it is this type of discourse, face-to-face interaction, that interpreters are principally involved in.

Johnstone (2002) and Schiffrin (1994) have suggested that discourse analysis is a variety of methodological approaches that can answer many kinds of questions about human interaction. While as humans we all are analyzing discourse, interpreters need an overt awareness of what people are trying to accomplish as they talk or sign. This type of analysis requires concepts from disciplines like sociology that are borrowed into linguistics, now known as sociolinguistics. The findings of linguistic research, primarily discourse analysis, have provided a vast knowledge of how languages create meaning, the central concern of both translation and interpretation.

**Through the Lens of Sociology and Anthropology**

Until recently, the two areas of IS that have received the least attention are sociology and anthropology. As Pöchhacker (2004) suggests, anthropology and sociology have “played a relatively modest role in interpreting studies to date” (p. 50).
This might be in part because both disciplines focus on intangible, but highly influential, aspects of human life and partly because of our roots in translation which has only recently had a cultural turn.

Anthropology and sociology are disciplines that start with what can be seen, what people are doing in their everyday lives. The anthropologist and sociologist focus on the various interactions that people find themselves in throughout their lives, and refer to these interactions as ‘the social.’ These disciplines attempt to understand how people, in their everyday lives, are situated within a social world that is, to some degree, directing and impacting their actions. Because of their similar focus – the human condition—both disciplines have been influenced by many of the same scholars. Their similar focus should not be confused with a lack of distinction, as sociology and anthropology are different in what they aim to understand from their observations. These two fields, when combined, make up what Pöchhaker (2004/2016) refers to as “socio/cultural” approaches.

**Identifying Power**

A recurring theme throughout socio/cultural lens is identifying and exploring power dynamics. There are many scholars of sociology whose work is applicable and could be applied to the study of interpreting. These include Du Bois’ (1903) work about “black folks”, Marx’s (1954) analysis of capitalism, Collins’ (2000) insight into the “matrix of domination”, and Smith’s (1987) method of inquiry into the “organization of the everyday”. Within anthropology, it is the political economic tradition, which draws on the work of Marx, that focuses on power. This is because this tradition takes up the examination of ideology, a key theme with Marxism.

Another theorist whose analysis of power has influenced both fields is Michel Foucault (1972). He spent his career identifying and exploring power throughout history. In his analysis, he notes power is embedded in the everyday and exercised through various discourses. These discourses wield a lot of power and refers to the systems of thought that influence individuals. This means that power is no longer solely part of a large apparatus, like the State, but rather part of the fabric of social relations.

A recognition of power has become a part of the discourse in United States interpreting. The Registry of Interpreters for the Deaf (RID) now requires a certain number of continuing education units (CEUs) to be in courses or workshops on ‘power, privilege,
and oppression’. As such, it would seem that the RID presumably has a clear definition of the meaning. But what is it? Sociologists and anthropologists would ask does it include issues of gender, sexuality, race, and ability? Or is it simply a way to talk about deaf and non-deaf dynamics? Who decides? These are the kind of questions that a sociocultural analysis of discourse could attempt to answer.

**Through the Lens of Social Psychology**

The field of social psychology is focused on how individuals interpret and assign meaning to the world around them. This body of work is found at the intersection of sociology and psychology. Through social psychology’s micro-level analysis, we can explore how an individual experiences everyday events and interactions. There are three central, interdependent concepts that we get from social psychology: self, identity, and role.

One sociologist whose work often appears in IS because of his interest in self, identity, and role is Erving Goffman (1959). He observed and wrote about interactions among people. He posed questions about how people typically interact and enact different roles in different situations. Goffman used the analogy of theatre performances to describe interaction and its rituals.

Llewellyn-Jones and Lee (2014) apply the work of Goffman and a social psychological lens to the analysis of interpreters and roles. As part of their analysis they put forth a model of multiple roles for “describing the place that community interpreters have in the communicative interactions in which they work” (p. 148). In developing this model, they work to debunk the long-held notion (often by those outside the field) that there is one role interpreters occupy. Rather, they demonstrate that there are multiple roles a single interpreter may occupy throughout their career or even a given assignment. Similarly, each interpreter makes decisions based on their experiences, background, etc. And each of these decisions shapes the role occupied by the interpreter. Therefore, there cannot be one role for all interpreters.

As scholars who have taken up Goffman’s work demonstrate, social psychology allows for a closer examination of human behavior and behaviors are interpreted by all the participants. His work allows us to ask questions like what it means for interpreters (students) to interact with members of Deaf communities? What are the behaviors and
identities we agree to when we decide to become interpreters? Social psychology can help us understand how these interactions are perceived and interpreted by all parties.

Understanding how our interpretations are shaped by the social context is important for all interpreters. This is not only important to the actual language work taught in interpreter education programs, but also for the interpersonal work that is a required component of any interpreting assignment (Stone & Brunson, 2020).

**Through the Lens of Cognitive Psychology**

In many ways, cognitive psychology, the final of the six lenses we will address, has influenced many of the models of interpreting that we use. Many of the concepts familiar in this field, such as working memory (WM), long term memory (LTM), and others, have gradually been woven into how we understand the cognitive mechanism that drives the linguistic processing of interpreting (see Llewellyn-Jones 1981). Most of this has entered our field via cognitive psychology, a field which combines the psychology of language and psycholinguistics.

More recently, with the development of greater experimental technique and equipment, cognitive psychologists have explored more directly the cognitive underpinnings of interpreting work. The work of interpreting is complicated and given the changing dynamics (e.g., teaming, videoconferencing interpreting, international interpreting, etc.) there is a need to understand the cognitive psychological processes interpreters are experiencing. As such we feel that the area of cognitive psychology, although new and complex for many of us, is worthy of inclusion as one of the academic foundations of IS.

From the mid 1990s onwards, we have started to see a greater exploration of cognitive issues in interpreting led by Moser-Mercer (1978) and others such as Christoffels, De Groot and Waldrop (2006). These studies have often explored specific aspects of the interpreting process: WM, articulatory suppression preventing sub-vocal articulatory rehearsal, LTM, the ever-increasing importance given to LTM -WM and its interaction in top-down processing and anticipation/prediction/inferencing. These help us to think more generally about why we prepare for interpreting work.

Cognitive psychologists continue to explore complex bilingual communication performance including simultaneous interpreting. This discipline continues to contribute
to IS knowledge regarding processing speed, psychomotor speed, cognitive control and task switching ability, working memory capacity, and mental flexibility (MacNamara et al., 2011; Stone, 2017). Investigating domain-general cognitive abilities and how they develop through interpreting training and as interpreters become experts are just a few of the studies possible within cognitive psychology.

**Conclusion**

For too long IEPs have focused on skills rather than encouraging students to think holistically about the work they do. We argue for a broader scope. Interpreting Studies, as transdisciplinary, relies on distinct fields of study to move forward and develop theories that explain interpreting in ways that move beyond the interpreted product. As we laid out in our book *The Academic Foundations of Interpreting Studies: An Introduction to Its Theories*, published by Gallaudet University Press (Roy, Brunson & Stone, 2018), the academic fields that make up the foundation of IS have a great deal to contribute to our understanding of interpreting. Our job as educators and practitioners is to become familiar with them and encourage our students and colleagues to do the same.

**References**


Toxic Ableism Among Interpreters: Impeding deaf people’s linguistic rights through pathological posturing

Octavian E. Robinson
Naomi Sheneman
Jonathan Henner

Abstract

Hoffmeister and Harvey (1996) describe pathological posturing as a way in which non-deaf\textsuperscript{1} people reinforce their supremacy over deaf people. Through a critical disability lens using standpoint theory, we theorize about pathological posturing strategies deployed by non-deaf signed language interpreters\textsuperscript{2} to reinforce ableism, audism, and paternalism toward deaf people.

Pathological posturing is rooted in the idea that deaf people have limited agency without the aid of non-deaf allies. Emotional weaponization occurs when labor is performed on the part of the non-deaf to assist deaf people is not met with gratitude and unquestioning acceptance. Non-deaf people deploy pathological posturing to perpetuate systemic marginalization and compel deaf people to abandon control of linguistic rights discourses. The resulting tension, \textit{abled resistance}, occurs when signed language interpreters prioritize their abilities, professional expertise, and feelings over deaf consumers.

Introduction

We theorize about the deployment of pathological posturing and its resulting tension, \textit{abled resistance}. Abled resistance is described from our perspectives as deaf scholars, based on our experiences as deaf individuals with different backgrounds and knowledges who have worked with signed language interpreters most of our lives (for a combined total of nearly one hundred years). Additionally, we all currently work in

\textsuperscript{1} Non-deaf refers to people who possess the ability to hear and thus enjoy the associated structural, institutional, and social privileges tied to being able to hear and speak within “normal” parameters without accommodation or assistive devices. We use this term instead of hearing to center the duality with deafness as the standard.

\textsuperscript{2} Deaf interpreters are capable of lateral ableism, which is what occurs when a disabled person is ableist toward another disabled person, e.g. ableism toward deafblind and deafdisabled people (Robinson, 2010; Ruiz-Williams, Burke, Chong, & Chainarong, 2015). While we believe the phenomena of \textit{abled resistance} occurs in situations involving deaf interpreters and a wide range of deaf consumers, the complexities of lateral and internalized ableism as well as the nuances of power relations involved requires a separate paper. We posit that there is a dire need for in-depth analyses of different levels of oppression that exist within the interpreting profession that goes beyond the dichotomy of deaf vs. non-deaf.
conjunction with signed language interpreter education programs in the United States in some form.

Originally, we organized contestations of power and expertise in deaf – non-deaf relations under Hoffmeister and Harvey’s (1996) umbrella concept of pathological posturing. In the months since we wrote the original abstract, we re-visited the concepts of pathological posturing, hearing fragility, and abled resistance within signed language interpreting aided by conversations with allies, non-allies, and members of the deaf communities. One challenge in writing about such power relations is the complexities inherent in the category of disability. Disability, because of its fluidity, laterality, and intricacy, complicates any discussion of power relations. Abled non-deaf and Deaf interpreters work with deaf and disabled clients tangling the threads of ableism within power relations. Abled resistance hones in on relations shaped by perceived power, expertise, authority, and relative ability.

Interpreters and members of the deaf community debate the elements that defines an interpreter’s expertise (Forestal, 2015; Kent, 2007; Napier, 2011; Stratiy, 2005). We argue deaf people are the experts on their accessibility needs as they possess situated knowledge about what accommodations or types of access work best for them. Unfortunately, the expertise of non-deaf interpreters and educators of the deaf are valued in this society and in the signed language interpreting profession over the epistemologies and ontologies of deaf people (see Sheneman & Robinson, this volume).

Service professions such as interpreting give professionals the power to define “the needs of their clients rather than allowing the clients to set the agenda,” (Mikkelson, 2004, para. 12). A recent example involves Anna Witter-Merithew, the Interim Executive Director of the Registry of Interpreters for the Deaf (RID) from March 2015 through July 2017, who served as an expert witness in at least three cases where her socially-assigned expertise assisted in decisions against deaf people: *Priscilla Saunders v. Mayo Clinic*,

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3 The word, deaf, is capitalized when referring to Deaf interpreters because they are part of the Deaf community and are native users of signed languages (see Beldon, Forestal, Garcia, & Peterson (2009) for further discussion). The authors choose to lowercase deaf when referring to deaf people in general as it is more encompassing of all identities (see Kusters & Friedner (2015) for further discussion).
"Durand et al. v. Fairview Health Services, and State of Tennessee v. Andrew Clayton Parker" (NAD, 2018). The NAD concluded that her testimony harmed deaf people’s civil and linguistic rights:

A reading of these reports and testimony makes it clear that Ms. Witter-Merithew served as an expert on behalf of defendants alleged to have violated the civil rights of deaf people who require communication access through qualified sign language interpreters. (NAD, 2018, para. 3).

In Priscilla Saunders v. Mayo Clinic (2013), Witter-Merithew argued that it was unrealistic for the deaf plaintiffs to expect a Mayo Clinic to satisfy their accessibility needs. In Durand et al. v. Fairview Health Services, Witter-Merithew (2016) claimed that even the presence of interpreters would not improve the deaf plaintiffs’ comprehension of medical information. As a result of Witter-Merithew’s testimonies, Rosenblum (2019), the Chief Executive Officer of the NAD emphasized that a future updated Code of Professional Conduct (CPC), last updated in 2005, should include a provision that stipulates interpreters have a responsibility to the deaf community and that they should carefully consider in what ways their expertise is being used outside interpreted situations. Witter-Merithew’s testimonies about deaf people’s accessibility needs were an example of how non-deaf interpreters use their expertise to speak on behalf of (and over) deaf people. This decision to offer expert testimony as a non-deaf person on a disabled person’s disability cultural competence, despite pushback from deaf people and a decades-long disability rights movement emphasizing the importance of “nothing about us without us”, is an example of abled resistance.

**Background Information**

Those who work closely with deaf people possess a lot of power: teachers of the deaf, doctors, audiologists, and interpreters. Interpreters are placed in positions of power

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4 See Levitzke-Gray (2020) for further discussion on the problems of interpreters taking the platform to speak on behalf of deaf people. The honorary WASLI president, Debra Russell (2020) responded stating that it was time for interpreters to explore their power and privileges as well as critically consider the choices they make that affect deaf people’s perception of interpreters.
within a larger system that values professional expertise over lived knowledge (Robinson & Henner, 2017) and a society that assumes abled people are more competent than disabled people. Interpreters that choose to comment on the deaf experiences are part of this larger social system (e.g. white, abled) that deprioritizes the innate knowledge of deaf people in maintaining abled supremacy.

The axis of dis/ability and the power of ableism is at center of this paper. Ableism describes structural, institutional, and individual acts of discrimination against those considered disabled and those who represent the valuation of specific abilities (Wolbring, 2008). People understand themselves as abled when placed in contrast to a person who is not abled; we know and understand disability in relation to ourselves (Campbell, 2019; 2012; 2008). Disability is cast as undesirable otherness, a divergence of body-mind that disrupts social order (and profitability). As undesirable others, society views disabled bodies as needing regulation, control, institutionalization, and governance. The disabled need the assistance and expertise of abled people to be restored to society (Longmore, 1985). Society confers power upon abled people as a consequence.

Power is an individual’s ability to wield one’s resolution over others (Foucault, 1980). As a result, a group of individuals with more power are put into a social system that holds traditional authority over others with lesser power (Foucault, 1980). Privilege is access to power structures and the ability to deploy that power to one’s advantage. Johnson (2017) describes privilege not as an individual possession but as a component of a social system in which people participates to maintain said systems. Discursive strategies like Hoffmeister and Harvey’s (1996) pathological posturing was pivotal in understanding how professionals within deaf related fields maintain abled supremacy.

The politics of signed language interpreters, their choices, and actions is one significant realm where deaf people encounter ableism. Ableism by interpreters directed toward deaf people are frequently discussed within community discourses. In the past, deaf people had fewer options to congregate outside of local communities. The rise of social media (e.g. Facebook and Twitter) has furnished spaces on a global level for the exchange of grievances and means of response to “terrible, lousy, awful” interpreters such as the discussion spurred by Levitzke-Gray (2020) about interpreters speaking for deaf people. Long before social media, and still today, deaf people gather in safe spaces
to talk about oppression and hearing people in safe spaces such as residential schools and deaf clubs (Ladd, 2003). Those oppressive experiences are discussed in various forms such as stories (Ladd, 2003); such narratives and gatherings are examples of hidden transcripts, which are devices of resistance to oppression (Scott, 1990). Tensions in relationships between non-deaf signed language interpreters and deaf people have emerged in studies by interpreter practitioners and researchers (Baker-Shenk, 1986; Cokely, 2005; Colonomas, 2013; Fant, 1990; Forestal, 2015; Kent, 2007; Mole, 2018). As part of the effort to dismantle ableism, interpreters’ actions, discourses, and emotional responses to being challenged must be interrogated. Signed language interpreter education, research, and professional organizations are the source of pathological posturing and ableism (Hall, Holcomb & Elliott, 2016). Ableism is systemic, structural, and sustained through interpreter education and professional practices. Those institutional realms of power must be transformed through a critical disability lens. Otherwise, ableist systems continue to reinforce deaf people as dependent others.

Ableism frequently emerges in interpreted contexts and encounters with deaf people such as the belief that deaf people know nothing about interpreting primarily because they were not professionally trained (Scholl, 2020; see Sheneman & Robinson, this volume for further discussion) along with the attitude that interpreters have to help deaf people. However, Ladd (2003) argued that the helper mentality must be abandoned altogether to ensure true inclusion. To offer some historical context surrounding the concept of helper, signed and spoken language interpreting were feminized and characterized as helping professions (Pöchhacker, 2004) which comes with the practice of caring (Blackwelder, 1997). The caring principle is problematic because it supports the premise that deaf bodies belong to the helpers and caretakers to hold the power in making decisions for deaf people (Padden & Humphries, 2005). The helper mentality/savior complex is how pathological posturing deprives marginalized individuals from receiving language concordant services (De Meulder & Haualand, 2019) and deaf people’s voices have to be carried through signed language interpreters (Padden & Humphries, 2005). More examples of ableism that emerges in signed language interpreting profession will be uncovered later this paper.
Based on our observations and as recounted to us by various deaf individuals, pathological posturing and abled resistance among interpreters appear in discourses among signed language interpreting professionals, researchers, and educators. We posit that by confronting those discursive strategies in various interpreting contexts, developing awareness of abled resistance, and dismantling the particular ways in which signed language interpreters uphold hearing supremacy and linguistic inequity offers much promise in reshaping discourses about values, ethics, practices, education, and research in signed language interpreting. Furthermore, combating pathological posturing among interpreters offers us an additional front in the battle for securing signed language rights and communication equity for deaf people.

Ableism within interpreter/deaf client dynamics often intersect with linguicism and phonocentrism. Linguicism is the belief that certain languages supersede others (Phillipson, 1992). Linguicism, in our contexts, is the ideology that spoken languages are superior to signed languages (Skutnabb-Kangas, 2016). Linguicism intersects with phonocentrism, which places greater value on the ability to speak and hear languages over the use of other language modalities. Ableism, linguicism, and phonocentrism combined together result into audism which is a negative perspective of deafness and deaf people (Bauman, 2004; Humphries, 1977). Examples of linguicism in interpreting can be seen in events where non-deaf interpreters prefer to speak even though they know deaf people are in the discourse environment.
Toxic Ableism

Non-deaf people occupy spaces in deaf lives as family members, neighbors, coworkers, colleagues, children, and as access providers, namely signed language interpreters. In intimate quarters, friction is inevitable. In these quarters, ableism is especially toxic because of the triadic relationship and the various power imbalances at play. The interpreter’s ability as a speaking non-deaf person is emphasized due to their proximity with deaf individuals in which two social constructs, ability and disability, are made apparent. The system deliberately elevates interpreters’ power in the interpreter/deaf client dynamic due to their status as an abled professional (Elliott & Hall, 2014). A person featured in the film, Audism Unveiled, spoke of how a signed language interpreter in their classroom ignored their signed answer, proceeded to answer the teacher’s question for the student, all the while without interpreting said answer (Bahan, Bauman & Montenegro, 2008). The ableism is toxic because the interpreter’s intended

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5 See Pirone, Henner & Halll (2018) for additional examples.
helpfulness, that the deaf student not appear unintelligent in front of their peers, seemed like a kind gesture. But instead, their actions deprived the deaf person of agency in their education and a possible opportunity to learn from a mistake. That is, if the interpreter had indeed been correct. But the interpreter was not. The student was, and instead, the teacher thought the student had not been doing their work. The interpreter’s decision, good intentions aside, resulted in harming the deaf student.

This relationship between the interpreter, the student, and the teacher in the previous vignette is akin to Hoffmeister and Harvey’s (1996) *pathological posturing*. Pathological posturing describes attitudes where the non-deaf interpreter assumes that the deaf person is dependent on them for help in order to function well in the hearing world. Pathological posturing, however, does not capture the full extent of deaf people’s experiences in navigating power relations with non-deaf people; hence the popularization of the phrase “hearing fragility” or our proposed neologism- *abled resistance*. The imbalance between deaf people and non-deaf interpreters is poignant (Ladd, 2003) that when a deaf person asks for access or asserts knowledge about disabilities, language, ontologies, and epistemologies only to experience pushback from non-deaf signed language interpreters (Baker-Shenk, 1986; Colonomos, 2013; Forestal, 2015; Kent, 2007; Mole, 2018).

To understand why non-deaf people push back, some deaf individuals have incorporated sociologist DiAngelo’s (2011) notion of *white fragility* in their analyses. DiAngelo coined this term to describe white people’s lack of stamina and resilience in discussing race, racism, and race relations. White people shut down conversations about racial power and privilege by derailing the discussion because of discomfort with the subject. White fragility is laden with emotional weaponization such as tears, anger, defensiveness, and the common refrain of “but not all white people.” DiAngelo’s description of *white fragility* evoked enough familiarity for deaf people to adapt this term into *hearing fragility* to describe such behavior by non-deaf people. The usage of hearing fragility has become popular in community discourses and refers to signed language interpreters’ responses to concerns from deaf people surrounding power imbalance issues in interpreted situations and within the relationship between interpreters and deaf people (Gunderson, 2019; MyFloRevolution, 2018; Styles, 2019; Withey, 2017).
For our purposes, hearing fragility does not suffice as a label for the concept that we are discussing. Fragility, in itself, does not adequately address the range of experiences or the power dynamic inherent in dis/abled relations. Ableism, racism, and white supremacy work in interconnected ways but do not have the same function and are not interchangeable (Campbell, 2008). The sociohistorical processes that have scaffolded whiteness and race intersect with, yet diverges from dis/ability. Those intersections are dynamic, suggesting caution in extending the logic of race to disability without interrogating such nuances. Thus, the outright application of the term, fragility as used in DiAngelo’s (2018; 2011) work to non-racial discourses is problematic, presents opportunities for post-racial whitewashing that works to the opposite ends of DiAngelo’s intent with addressing white fragility, and requires further consideration. Furthermore, the messiness of ableism and disableism fails to adhere to a neat binary that can be cleaved from race (Annamma, Connor, & Ferri, 2013). The category of disability is fluid, changing, and differently constructed and thus understood and experienced differently. Neither hearing fragility or pathological posturing as posited by Hoffmeister and Harvey (1996), while both useful concepts, capture the oversized and nuanced complexities that accompanies relations of power between abled and disabled body-minds (Schalk, 2018).

**Abled Resistance as a Conceptual Framework**

As we have argued earlier in this paper, the concepts hearing fragility, pathological posturing, and toxic ableism do not effectively describe the complex power dynamics between deaf and non-deaf peoples. It is our contention that the weaponized emotional push back from interpreters (and abled people) is not fragility or posturing, but abled resistance. Abled resistance is governed by systems of ableism that upholds abled body-minds (Campbell, 2008; Schalk, 2018). Abled resistance reinforces and reproduces ableism by deploying strategies that stun disabled people’s agency in negotiating or navigating access. Those actions, deliberate and/or non-deliberate, contribute to a situation where deaf people exert energy in emotional labor-managing non-deaf people’s emotional responses to issues, questions, and challenges about deaf-related policies, signed languages, deaf education, and access (Mole, 2018). Dealing with non-deaf

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6 The authors have evolved the term into abled arrogance which will be developed in a separate paper.
people’s emotional responses constitutes real labor for deaf people. Emotional labor is a common experience for marginalized people (Evans & Moore, 2015; Weekley, 2012). Lisa Cryer, a Deaf interpreter, once lamented, “emotional labor is real labor. And it is exhausting,” (Cryer, 2020a).

**Examples of Abled Resistance in Interpreting**

*Abled resistance* represents a small sliver of the whole of ableism that disabled people encounter. Abled resistance is how abled people respond to a disabled person’s challenges to perceived expertise or critiques of access work pertaining to disability. Abled resistance answers the question of “how do abled people respond to feedback or critiques from disabled people in the context of negotiating access?” There is no shortage of evidence from disabled people, including the authors’ lived experiences, in describing those encounters which will be further illustrated in the next section.

As mentioned previously, authority is automatically conferred upon the abled person in abled/disabled dynamics (Ahmed, 2011; Foucault, 1980; Johnson, 2017; Ladd, 2003) with or without awareness (McIntosh, 1998). Those with privileges are complicit in maintaining the power of the system (McIntosh, 1998). An ableist society confers upon non-deaf signed language interpreters, by virtue of perceived abilities, supremacy over deaf people. Ladd (2003) argues that interpreters who claim that they are maintaining neutrality in interpreted situations are doing the opposite, “an interpreter attempting a fully neutral stance will end up reinforcing the energies emanating from the more powerful group,” (p. 447). The realm of interpreting reinforces this ableism in multiple and sustained ways including but not limited to admission practices in interpreter education programs, policies and practices in signed language interpreter education programs, peer-review processes for conferences and publications, gatekeeping surrounding legitimate and credible knowledges and research praxis, the prevalence of “deaf people not being disabled” narrative, to everyday discourses and practices out in the field as interpreters.

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7 Liberation begins with unpacking our privileges and understanding the structural nature of systemic oppression upheld by individual actions and microaggressions. The authors of this paper recommend readers to immerse themselves in anti-oppression literature that deploys a variety of critical lenses.
Professional training gets more respect than lived knowledge (Robinson & Henner, 2017). Abled resistance plays a significant role in perpetuating systemic barriers to access and equity for deaf people. Abled resistance characterizes the behaviors exhibited by deaf/non-deaf people whose expertise is challenged by deaf, deafblind, and deafdisabled people and who then respond with weaponized emotions. This creates a relationship fraught with tension as deaf people recognize the vital role of interpreters in deaf people’s human, linguistic, and civil rights (De Meulder & Haualand, 2019). Interpreters serve as a linchpin of language access. We highlight some examples that fit our conceptualization of abled resistance within our proposed framework.

**Example #1**

The broader interpretation and translation field is filled with commentary about how the work is generally a thankless task that has persisted since at least the mid-twentieth century (Chamberlain, n.d.; Ekvall, 1960; Smith, 2014). Promoting gratitude for interpreters has manifested in an annual Sign Language Interpreter Appreciation Day occurring on the first Wednesday of every May in the United States since 2013 (DeafFriendly, 2013). However, some deaf people would not celebrate the occasion; Cryer (2020b) argues that not all interpreters as a collective deserve appreciation. In the context of disability and ableism, utterances of thankless job or complaints about deaf consumers not thanking the interpreter for their work adopts a new dimension. The uneven power dynamics inherent in interpretation catalyzes social courtesies into obligations that reinforce disparities in power between interpreter and client. Perceived gaps in satisfying obligatory social expectations, however innocuous they may appear (and perhaps this innocuous nature makes this all the more dangerous), results in ableist violence such as threats to withhold access. Campbell (2012) characterizes the expectation of gratitude in disability contexts as a form of narcissism.

While it is common to thank service people for performing their jobs (e.g. thanking the cashier for packing their bags) on individual/personal level, these acts of gratitude however typically occur when the person receiving the service has more power than the person providing the service. In interpreter/deaf client situations, these power dynamics may be flipped. For example, deaf people struggle on a daily basis with the idea of letting interpreters enter the private aspects of their lives including but not limited to healthcare,
legal, educational, financial, and occupation. Expectation of gratitude from marginalized people increases the emotional labor marginalized people are supposed to perform for access (Evans & Moore, 2015; Weekley, 2012); this is the case for deaf people as well. Furthermore, the expectation of gratitude creates an additional barrier for deaf consumers to offer constructive feedback on interpreters’ work. There have been instances in which signed language interpreters have weaponized emotional responses to deaf consumers’ feedback. Obligatory gratitude and negative emotional responses to constructive feedback communicates that interpreters’ feelings are prioritized over those of deaf people.

As more deaf people advocate for improved quality in accessibility, agitate for discourses about justice and equity, and urge the increased acceptance of deaf-centered input in the signed language interpreting profession, they are accused of being unappreciative of interpreters. A signed language interpreter illustrates this in her blog,

As an interpreter working in the field for over 15 years, I am dismayed at the idea that I have given so much time and effort to a profession that is suddenly unappreciated and scorned by the very people we strive to serve.” (Smith, 2014, December 28).

Smith’s (2014) blog tone-polices deaf activists and their allies. What flags the paragraph above is the phrase “suddenly unappreciated and scorned by the very people we strive to serve”. Earlier in the blog post, Smith (2014) bemoaned Street Leverage, a for-profit organization (founded by a non-deaf person) that claims to promote a more deaf-centered perspective in interpreting, for sighting “down the barrel of ‘deaf heart’” (para. 1). And the statement, “unappreciated and scorned by the very people we strive to service…” explicitly points to deaf consumers as the unappreciative lot. The mere interrogation of power relations and push for deaf-centered practices is construed as an absence of gratitude. The act of contesting power and centering non-deaf practice draws weaponized emotional accusations of deaf people of failing to be grateful for access. Such language reinforces the perspective that deaf people are recipients of charity and should consider themselves fortunate to have access. The expectation of gratitude
upholds a toxic form of the charity model where interpreters expect to be perceived as heroes; deserving of various types of gratitude and attention. Such narratives are reinforced by the common trope in media coverage of signed language interpreters as heroes (Kolb, 2017).

**Example #2**

Vocal deaf people who critique power relations in signed language interpreting have complained about ending up on blacklists of interpreters who refuse to interpret for vocal, ungrateful deaf people. Some interpreters are not willing to work with one of the authors primarily because he does not smile often. There are interpreters who are prickly about attempts to dispute whiteness, ableism, and other positions of privilege occupied by interpreters. At times deaf people are dismissed as being angry for challenging interpreters (Suggs, 2012). One of the authors found themselves unable to obtain an on-site signed language interpreter while at the emergency room. While they were waiting anticipatedly for the interpreter, they learned that the agency was unable to locate someone who was willing to interpret for them due to their activist work. Placing vocal deaf activists on blacklists and declining emergency room coverage because of the deaf person’s politics suggests deaf people should feel fortunate for access and thus obligated to know our place. More to the point, it becomes problematic when deaf people who ‘misbehave’ for fighting injustice are believed by the interpreting community to not deserve access. Yet, proper behavior and courtesy is determined by the dominant majority - here hearing people who can also be interpreters - who holds the reins of power. It is this group that decides what is civil, what is respectable, what is appropriate, and what is not acceptable.

The refusal to interpret for particular deaf people or situations silences criticism while preventing opportunities for dialogue about power and privilege. Interpreters should not be the arbiters of who deserves access. Rhetoric surrounding who is deserving of access places disabled people atop a slippery slope. It is not a far reach from “impolite

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8 The charity model of disability is different from the medical/pathological model often discussed in Deaf Studies. This model implies that deaf people need help/charity and that the “help/charity” is burdensome (MIUSA, n.d.).
deaf people hate me because I’m white and hearing” to “this person didn’t take care of their health so why should I be up in the middle of the night interpreting for them in the emergency room” to “homosexuality is a sin. I won’t interpret for them”. If access is a right, not a privilege, then deaf people should be free to speak to critiques of power, privilege, and oppression without the emotional backlash of an interpreter’s ego, the self-perception as a good person, or the withholding of access.

**Example #3**

Based on our observations and as recounted to us, the lack of willingness to embrace a signing space has been witnessed over and over by numerous deaf individual stakeholders of the interpreting profession at various professional meetings and conferences. Although some organizations set forth a communication policy identifying signed language as the official language for those events such as the RID and Conferences of Interpreter Trainers (CIT), interpreters continue to opt not to use signed languages as the primary communication language(s) in areas where people are mingling (e.g. meal breaks, hallway) despite the presence of deaf interpreting professionals and deaf consumers (Silva, 2019). Therefore, interpreting-related events practicing 100% signing space is extremely rare. Some interpreters argue that they are speaking to benefit the interpreting students but Erin (2019) argues that should not be the case, “Respect for Deaf colleagues and the language itself are far more important than the needs of students.” Thus, the refusal to use signed language at those meetings and conferences furthers abled resistance as it benefits only other abled individuals by prioritizing their developing expertise and networking opportunities over linguistic primacy and parity. Interpreters have complained in the presence of the authors of this paper when requested to not speak in forums where deaf people are in attendance because the use of signed language seems more time-consuming and cumbersome.

This example is tied to the ongoing phonocentrism and linguicism in the profession. This is also reflective of the insufficient inclusion of multiple critical lenses, such as Critical Disability (DisCrit) and Critical Race Theory (CRT) in this profession and signed language interpreter education curriculum (Hall, Holcomb & Elliott, 2016; McDermid, 2009a; McKinney, 2016; Moutinho, 2019; Webb, 2017). The inclusion of critical lenses, which supports the interdisciplinary nature of interpreting studies, helps us understand others,
develops disability cultural humility, fosters a sense of social justice and equity, teaches empathy, reveal how people have tried to understand the world, consider multiple perspectives, and develops informed and critical citizens (Hall, Holcomb & Elliott, 2016; McKinney, 2016; Webb, 2017).

For a long time, the approach to signed language interpreter education was vocational in nature with the aim of teaching a trade of specific sets of skills among students (Monikowski, 2013). As more community colleges and four-year universities require humanities in their core curriculum even for interpreting majors, interpreter educators are challenged to rise to the change by ensuring they are competent to teach future students (Monikowski, 2013). Monikowski (2013) expresses concern that there are not enough doctoral level interpreter educators to effectively teach and do scholarship to better support students. One important consideration in this push for more doctoral level faculty in interpreter education is Robinson and Henner’s (2018) argument: “Due to systemic inequities, particularly in access to higher education, non-deaf signers are more likely to possess advanced terminal degrees compared to their deaf counterparts,” (para 19). This also means more white abled individuals are teaching in signed language interpreter education lacking critical lenses necessitating the use of critical pedagogy methods (McDermid, 2009a; Williams, 2016). Deaf faculty, staff, and students in signed language interpreter education programs report that they experience oppression from non-deaf faculty members in their department (Galloway & Gibbons, 2019; McDermid, 2009b; Robinson & Henner, 2018). Moutinho (2019) argues that “educators lack the cultural and instructional competence to facilitate learning on diversity, equity, and inclusion,” (para. 1). In line with McDermid (2009a), we argue that interweaving critical lenses across the entire signed language interpreter education curriculum have potential in promoting the growth of interpreters with significantly improved results, including a greater awareness of power dynamics, marginalization, ableism, and their own roles as actors within larger social systems of oppression and privilege.

Non-deaf and abled signed language interpreter educators are often oblivious or unwilling to examine their positions as transmitters, refractors, and reproducers of structures of systemic oppression primarily because they are mostly white and abled (Moutinho, 2018). The lack of critical lenses in educators results in negative perceptions
of deaf people among interpreting students (McDermid, 2009b). McDermid (2009b) claimed that if interpreter educators do not explicitly address the power dynamics between non-deaf and deaf people with interpreting students, then the “graduates run the risk of beginning their careers by objectifying Deaf individuals as disabled clients, thus maintaining the subaltern status of the Deaf,” (pg. 245). One strategy to minimize this negative perception would be for signed language interpreter educators to rethink whose voices and perspectives are most prevalent in the classroom. The insistence upon professional experience and expert authority being invited into the classroom while treating community members (deaf people) as marginal knowledge holders reinforces bias against situated knowledges (Haraway, 2004) and false beliefs about objectivity in academia.

An additional concern is the value of using signed language as the primary language of instruction in signed language interpreter education programs. Like Bourdieu’s (1991) premise that majority languages often trump minoritized languages, some non-deaf interpreter educators may find discomfort with teaching in signed language over spoken language (Ehrlich & Wessling, 2017). One of the authors, to give but one example, stepped in to substitute for a non-deaf teacher’s interpreting class; the students were complaining in the substitute teacher’s presence for signing because their ongoing teacher uses spoken language. Ehrlich and Wessling’s (2018) survey of language use in signed language interpreting courses indicate that the determination whether to use signed or spoken language are dependent on course content. The respondents to their survey also reported concerns that second language learners may not be able to learn or understand course content in a signed language (Ehrlich & Wessling, 2018). However, we dispute this argument. How can non-deaf students effectively graduate to interpret a variety of discourses if they are not taught how to communicate about different topics in signed languages? Furthermore, not using signed language(s) as the primary language of instruction has a domino effect on tomorrow’s interpreters’ attitudes about using signed languages and the devaluation of signing spaces.
Example #4

Another form of abled resistance is when interpreters weaponize emotions in a backlash against perceived critiques of their expertise. For example, when a deaf person questions the interpreter’s qualifications, or the decision they make during the interpreting process. Deaf people often share stories about outraged interpreters who take offense when the deaf person asks to see their credentials. Some interpreters argue that a deaf person should not challenge the interpreter’s expertise because they have purely good intentions just like how Arthur (2011) explained any signed language interpreter “cares deeply about humanity in its many forms” (para 9). Constructive feedback is difficult for interpreters to embrace (Emmart, 2015). Deaf people complain of punitive backlash from interpreters when feedback or critiques of ability to interpret effectively is offered. One of the authors previously worked in an interpreting referral agency and received feedback from deaf consumers about particular interpreters. Deaf consumers did not want their names disclosed to the interpreters because they feared how interpreters might react. Some responded with hurt feelings; others responded with anger and threats to withhold access. Feedback leads to different forms of punishment for deaf people. Limbeck-Dishaw (2017) describes such backlash,

Not all Deaf people are allowed to be honest mom. Sometimes they think they have to tell the interpreter it’s ok because if they get mad or hurt feelings then they will not work for us. Interpreters have power. If we say we don’t like it, they say no one else complained. Other people said they like it. I have to tell the truth because I can’t see. Then when I do say something I am a brat or that word you said..... high maintenance. I just wish interpreters could understand. (Limbeck-Dishaw, 2017).

The underlying message is that abled people are not willing to accept a disabled person’s evaluation of their ability to provide access in a given moment. All three authors have experienced pushback and emotional outbursts from signed language interpreters in response to feedback. Resistance to feedback impedes the quality of signed language interpreting services that deaf people sorely need (Hall, 2018). The professionalization of signed language interpreters has put non-deaf interpreters in charge, which has resulted in centering deaf people in the education, training, provision, and ethical decision-
making of the signed language interpreting profession (Cokely, 2005; Fant, 1990; Forestal, 2015; Kent, 2007; Wilson, 2011). We argue that such decentering has reinforced the notion that deaf people’s feedback and input is unimportant or welcomed only on the terms set by signed language interpreters. As we have observed and others recounted to us, the response to feedback from deaf people often involves weaponized emotions like hurt feelings (e.g. bursting into tears after receiving feedback from deaf individuals), anger and deflection (e.g. labeling the deaf person as angry or reducing the issue to deaf-hearing identity politics), victimization (e.g. claims of ingratitude for said efforts or past advocacy), injury (e.g. “but I’m a good person”, which ignores impact vs. intent), and threats to withhold future access (e.g. not willing to interpret if the deaf person is not considered nice). And in the same breath, interpreters remind deaf people that they are the experts and authorities in the profession while deaf people’s opinions are subjectively welcome. This perspective is based on the misassumption that disabled (namely deaf in this case) individuals do not have valuable knowledge or contributions to offer.

**Conclusion**

Some resistance to social justice in interpreting lies in the argument that the concept of ally ship comes from war and conflict, which requires an adversary, but interpreters cannot be imagined as adversaries (Dean, 2017). Deaf, deafblind, and deafdisabled people, from our positions on the power axes of disability, argue interpreters indeed can be adversaries. One important function of this adversarial relationship is weaponized emotions used to push back against deaf people’s agency, knowledge, and expertise in communication access. This is what we call abled resistance.

Former World Federation of the Deaf (WFD) president, Colin Allen, stated in his opening address of the 2019 WASLI conference in Paris that there should not be a division between signed language interpreters and deaf people but that those two groups should become one unit. More recently, there has been the drive to recognize interpreting as a collaborative process and as a critical partnership between deaf and non-deaf people (De Meulder, Napier & Stone, 2018). Abled resistance can be combated through reframing and revisioning interpreter education and the work of interpretation itself, promoting recognition of deaf people’s epistemic authority and ontological realities,
securing greater representation and agency of deaf people in interpreter education and research, and standing up for disability justice together.

Our goal for those conversations is two-fold. First, to foster a progressive change in the relationship among deaf, deafblind, deafdisabled, and non-deaf people where access is grounded as an act of love (Mingus, 2017) and in recognition that access is a non-negotiable unwavering entitlement for disabled people. Second, to minimize interference with our fundamental human rights to language, access, belonging, and positive identities as deaf people (Murray, 2015) while valuing our ontologies and epistemologies (Robinson & Henner, 2017).

Can we imagine a fundamental transformation of how deaf people and signed language interpreters work together to make access happen? We hope to provoke dialogue about our relationships with each other and how we respond when ableism manifests. This begins with an interrogation of our views of disability, impairment, and language, and sites of knowledge production. It extends beyond simple willingness to accept feedback or make decisions in isolated moments to ‘equalize’ the situation (Mole, 2018). An emancipatory framework in signed language interpreting is a start, as Mole (2018) suggests, but hardly adequate. For real change to happen, ableism must be dismantled, and a world needs to be built where access work is viewed as positive interdependence rather than as an act of unilateral power transference or management (e.g. helper, conduit or ally). One starting point for the interpreting profession is to stop deploying weaponized emotions in response to perceived challenges to one’s status as expert or to one’s goodness as a person.

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Focusing the Gap: Productive post-IEP development

Kerrie Ellen Lovercheck

Abstract
There are few formal transition programs to aid sign language interpreters. Research in other practice professions has shown that gradual transitions towards autonomy under adequate supervision and coaching provides a forum for practitioners to grow in their professional abilities with the support needed to guide them. In medical residency programs, the model adopted by this study, underclassman learn a new skill from an upperclassman, practice this skill, and finally teach the skill to the next cohort, all under a competent professional's supervision. This autoethnographic study found support for a model with graded autonomy and competent oversight. The medical education model of learn, practice, teach is shown to benefit transition into interpreting autonomously.

Introduction

There is a discrepancy between completion of an interpreter education program (IEP) and work readiness (Walker & Shaw, 2011). This period of transition is important for building a professional foundation (Halpern & Detski, 2014; Witter-Merithew, 2005). According to Hoza (2016), research in other practice professions has shown that gradual transitions towards autonomy under adequate supervision and coaching provide a forum for practitioners to grow in their professional abilities toward expertise.

With other long-established practice professions, we see some more formal systems of training extending into the first years of work. Doctors have a series of stages progressing through medical school, internship, residency, fellowship, etc. At each stage these doctors are taught new skills by an upper year doctor while under the supervision of an attending physician. By learning from a more experienced practitioner who is under the supervision of a seasoned professional, the student witnesses someone in the process of the final stages of learning, while the professional coaches and keeps the teaching true.

Such a system has striking features, including constant availability of support and oversight, gradual transition to autonomy, constant in-person instruction and feedback, and the repeating cycle of learning a new skill, practicing the skill, and teaching it to others. To address that question, an autoethnographic project was developed that looked at the kinds of support available for interpreters exiting their IEPs, the gaps in these supports, what other practice professions do to prepare their new professionals for the field, and how to apply these to practice.
Background

It could be argued that most interpreters finish their education program expecting to have everything they need to begin work, but many are left unmonitored to deal with this transition and all the challenges they will face (Witter-Merithew & Johnson, 2005). Wilbeck (2017), Boeh (2016), and Ball (2007) report on interpreting students’ and professionals’ desires including a desire for more postgraduate mentorship experiences. Wilbeck (2017) and Boeh (2016) found evidence of only the learning and practicing elements of the learning process in sign language interpreter education. They do not address the third element of this study’s proposed learning process, teaching. Winston and Lee (2013) suggest that both mentor and intern benefit from working with each other and engaging in this reciprocal teaching.

How the individual interpreter faces these challenges can lead to patterns in their career habits. Without formal or informal guidance during this time, an interpreter could overlook the development of some necessary skills; ethical decision making and situation management, to name a couple.

There are some options for new interpreters in terms of enhancing their practice post-graduation. Finding a mentor is one. Mentors need to be vetted, matched, and given the support they will need to mentor well. Another option is for the new interpreter to go back to school; This is not always an option for someone trying to make ends meet in a new profession.

One option for further education is to pursue a master's degree. These can fall into two categories; specialization (medical interpreting, legal, or teaching interpreting) or research. There are hypothetical limitations to either type of program. Specialization for a new professional interpreter may limit her exposure to developing her skills in a range of settings. However, focusing on research right after graduating from an IEP may lead to an interpreter missing the professional building blocks new interpreters need in the foundational years of their practice. At the same time, these programs typically require several years of experience in the field prior to an application.

Workers in the craft trades start with an apprenticeship. When they have amassed the bulk of their knowledge, they then become journeymen to practice the skills they have observed. Journeymen practice their trade skills under the auspices of a master
craftsman. The master craftsman is responsible for the work. Any failure by the journeymen is the responsibility of the master craftsman (Drystone, 2018).

Hoza (2016) talks about this progression from novice to expert in three ways: knowledge, dealing with complexities, and autonomy. The approach to dealing with complexities in the work starts with the novice. Degree of autonomy goes from a dependent to a holistic view (Halpern & Detski, 2014; Hoza, 2016). These transitions need to be fostered during the formative years of an interpreter’s career (Hoza, 2016).

Medical Field

By looking at other practice professions for models to develop competent professionals we can inform our interpreter education systems. A more developed practice profession’s system of education, the medical field, provided the foundation for this autoethnographic research. The medical profession has continually looked at their education methods to improve their approach (McGaghie et al., 2011; Halpern & Detski, 2014; Lempp & Seale, 2004). A comparison of the RID National Interpreter Certification (NIC) pass rate (RID, 2017) and the United States Medical Licensing Examination (USMLE, 2018) found that the overall pass rate for the NIC was 69% lower than the medical boards.

Within the model adopted for this project was an extended time of monitored transition (Snell, 2009; Halpern & Detski, 2014). Doctors go through a series of phases starting with medical school, internship, residency, fellowship. At each phase, and even within each phase, these doctors are taught a new skill by an upperclassman. This process occurs several years after graduating medical school but before doctors can practice independently. All of this is done under the supervision of a seasoned professional, the attending physician (Babenko et al., 2017; Halpern & Detski, 2014).

This process does several important things. The learner hears from someone in the process of learning the skill themselves, while the professional coaches and keeps the teaching true. The learner moves into practicing the skills while still under the supervision of the upperclassman and attending physician. Once she has refined her skill at this level the learner is ready to move up and teach what she has learned, while starting the process over for the next stage of her education as a teacher-student under the
tutelage and observation of her higher ups (Hoza, 2016; Halpern & Detski, 2014; Snell, 2009).

Halpern’s and Detski’s (2014) described the cycle for medical residents. They explained “Follow[ing] the apprenticeship model: students, residents, and clinical fellows participate in delivering medical services to patients under the supervision of accredited professionals” (Halpern & Detski, 2014, p.1086). Such a system provides trainees “graded responsibility,” over time gaining mastery of increasingly complex skills while oversight is distanced (Halpern’s & Detski, 2014, p.1086). Halpern and Detski emphasized that attending physicians need to be able to train and evaluate skills learned. Finally, when doctors start their independent work, there is an expectation they will also participate in the instruction of new doctors by overseeing and training them.

With many similarities between practice professions, interpreter training could mirror medical training. If interpreters, like novice doctors, are raised up in an environment where they can reach out to a seasoned professional for help during a job (teaming or mentor-intern work) or discuss the work with a mentor or an attending interpreter, interpreters may have the same success as physicians in developing towards competency. If interpreters are obliged to articulate their knowledge of the process and ethics to the next generation of interpreters by overseeing the development of newer interpreters, their own foundation in fundamental skills should increase as well.

**Positioning the Researcher**

As a signed language interpreter who completed an interpreter education program (IEP) and struggled through the following years out in the field with little or no support, I see the need for a formal progression towards autonomy in our practice. My experience in interpreter education has been that we are left to find our own way. That might mean setting up a casual mentorship or relying on other professional relationships. There are mentorships offered by agencies and local RID chapters and there are graduate programs offering something to bridge or narrow the post-IEP gap. These programs are vital to the growth of the field, but are they fully addressing the post-IEP interpreter’s needs during the most formative years of her career?

Although I have had successful mentorships, for some people these pairings fall short. Some, for example, have been teamed up rather randomly with a mentor, or the
mentor did not know how to address the specific issues the interpreter faced. In some cases, the interpreter or mentor could not put enough time into the program while trying to make ends meet.

**Objectives**

The problem addressed by this study is the lack of preparation for employment for interpreters after graduating their IEP, a problem noted in the literature (Walker & Shaw, 2011). With other long-established practice professions, like teachers, lawyers, social workers and physicians there are more formal systems of training required after initial entry into the field (Dean & Pollard, 2013; Docterly, 2018; Social Work Guide, 2018). While the burden of responsibility could be lighter for sign language interpreters as compared to some field, such as medicine, it has been argued that it might be just as weighty (Dean & Pollard, 2013).

In this study, my overall objective was to look at an approach for focusing the formative years of an interpreter’s career (Hoza, 2016), gleaning from medical residency programs for a model to apply (Halpern & Detski, 2014). By increasing independence during a series of cycles through learning, practicing, and teaching this study investigated the integration of basic concepts of interpreting into practice. Specifically, my objectives included:

1. To apply a micro-model of a medical residency on interpreting. This included teaching/mentoring under guided observation to solidify the skills and ethical foundations of interpreting.
2. To provide another option for developing the professional foundation in the transition between novice and expert. Rather than narrow the gap or get rid of it, a plan to use that time in a supported and focused way was established.
3. To apply increasing independence during a series of cycles through learning, practicing, and teaching.

**Method**

This study involved an autoethnographic approach. The initial learner worked with an attending interpreter as the professional observer and an interpreting undergraduate as the learner in the teaching phase. When I started the research, the first thing I did was to get connected to an attending interpreter or mentor. Once that was set up and we had
our first meeting my mentor mentioned to me that when she accepted the pairing she immediately went and found someone to mentor her. Therefore, with my mentor and my mentor’s mentor standing beside me, forming a mentor tree, I was supported through mentoring my intern. Using the model of medical residency, the researcher as the participant went through the phases outlined in Figure 1.

**Figure 1**

*Phases of the study*

<table>
<thead>
<tr>
<th>Phases of the study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning Phase</td>
</tr>
<tr>
<td>• Paired with an attending interpreter</td>
</tr>
<tr>
<td>• Several interpreting fundamentals were focused on</td>
</tr>
<tr>
<td>• Discussed approaches to ethical decision making</td>
</tr>
<tr>
<td>Practice Phase</td>
</tr>
<tr>
<td>• Continued work with attending interpreter</td>
</tr>
<tr>
<td>• Applied learned fundamentals to interpreting work</td>
</tr>
<tr>
<td>• Discussed approaches to teaching</td>
</tr>
<tr>
<td>Teaching Phase</td>
</tr>
<tr>
<td>• Paired with intern</td>
</tr>
<tr>
<td>• Fostered fundamentals from learning phase with intern</td>
</tr>
<tr>
<td>• Continued support from attending interpreter</td>
</tr>
</tbody>
</table>

**Data Collection**

After each encounter a journal entry was made including the experience of the encounter, which questions came up, and what was observed in the encounter. Prompts were used to standardize qualitative data in journal entries pre-encounter and post-encounter (see Figure 2) and free writing was utilized throughout the three phases. The qualitative data was then collected and sorted into themes.

**Figure 2**

*Pre- and post-encounter journal prompts*

<table>
<thead>
<tr>
<th>Pre-encounter journal prompts:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Overall feelings heading into session.</td>
</tr>
<tr>
<td>• Will you be facing anything new?</td>
</tr>
<tr>
<td>• Do you have the knowledge you need for this session?</td>
</tr>
</tbody>
</table>
• What controls might you need to use this session?

Post-encounter journal prompts:
• Overall feelings finishing the session.
• During the session, what stood out to you?
• How were you connecting with participants (interlocutors and intern) and content?
• What do you feel you need more time with? A concept in the work, an aspect of the situation you feel unsure about, etc.

Results

From the collected data the themes that were seen most often were the themes shown in Figure 3 below. Looking closer at these themes the qualitative trends changed over time.

Figure 3

Significant themes of the data
• Foundational Understanding
• Philosophy and Practice Accountability
• Discussion of the Field of Interpreting
• Development of Patience and Grace
• Perceived Confidence Level
• Frustration as a Learning Tool

Discussion

Hoza (2016) talks about the practitioner progressing through stages to a level of holistic understanding, which informs their work and where experience and intuition can guide their work. In the data I looked at skills basic to interpreting and became more proficient in foundational understanding. As I progressed through recording my findings each day, a significant amount of my time was spent talking about the basics of interpreting including how to approach ethical situations, best practices for a wide variety of settings, and communication needs.

Having an intern and attending interpreter in discussions and observing the work added to my philosophy and practice accountability. The results of my experience in this study made me aware of the relationship between my philosophy and my practice.
Daily conversations about interpreting and the process increased my ability to discuss the field of interpreting. Discussing my thoughts solidified them and hearing the thoughts of others in the field broadened my understanding of my own practice. Throughout the phases of the micro-model I experienced a gradual increase in my comfort level and ability to put my process into words. From my experience in this study I could see that the additional step of teaching increased my ability to perform as an interpreter.

Hoza (2016) mentioned one of the hallmarks of an expert is the ability to take in the depth of the whole situation. I felt shades of this in my practice as I tried to support another who was growing in her practice too. Working with anyone in the deeply personal way interpreters do can make us vulnerable or defensive. The unexpected but steep increase of my patience towards another person’s insecurities and grace to help the other person work through them, seeing it from another’s perspective, and remembering what it was like starting out, made me aware of my own presentation.

The category perceived confidence level had two components; decreasing perceived confidence and increasing my ability to manage insecurities. While questioning the work and my decisions more, the ability to manage insecurity while working increased over time. Progressing through the daily challenges of mentoring surprisingly diminished my confidence bit by bit. However, there was an equal and opposite increase of my ability to manage and set aside my insecurities. Through working under scrutiny in the three phases, being vulnerable with the coach and the intern, and talking about the good and not so good aspects of my work, I became able to be open enough to learn from myself.

Repeated failure forced me to be resourceful and creative. In this autoethnographic research project, I noted the category of how frustration was a learning tool. When I made a plan for working on something and the strategy I used to address it did not work, I thought I had failed. When I implemented my attending interpreter’s ideas they failed too. While working with others I felt I could not give up. Giving up meant letting others down.

Looking over the journaled data, I saw my use of the word failure as a red flag. Picking out all of the “failure” references and looking at them as a whole, I realized that what I was seeing as moments of failure were actually moments of frustration with the strategies tried. The techniques did not work the way I expected them to. Not giving up
made the failure become just a frustration. Through the frustration I learned many other ways to address the original subject.

**Conclusion**

The post-IEP years are important for developing expertise. Focused and supported professional development during this transition from novice to proficient professional should be considered as a support. In my own experience, and as in medical residency programs, the model of cycling through learning, practicing, and teaching phases fostered my development of professional skills.

I propose a gap program modeled after the medical residency programs. This might look like medical teaching hospitals. Imagine a workplace like a school or office with enough Deaf people there every day to become familiar to the interpreters. This workplace would need a team of interpreters to work there. This team might consist of several interpreters recently graduated from their IEP, some interpreters with a few years of experience, and several interpreters with lots of experience to guide and supervise the learning and development of the others. The set-up of an environment like this might be better suited to a workplace than an educational establishment.

Through the process of running this study I saw the natural formation of what I referred to as a mentor tree. When I enlisted an attending interpreter to support my practice through the study, on her own, she sought a mentor to oversee her work with me. This linking of professionals for the purpose of supporting the practice could be more powerful than the three-phased model I proposed. The mentor tree could have the potential to carry a practitioner through her career, supporting her practice all the way. The mentor tree could involve novices learning from experts and experts learning from novices as anyone, at any level, can give insight to others.

The field needs to break away from the master and apprentice dichotomy. We need to allow for the middle journeyman stage, where we are doing the work but with a master craftsman to support us. By structuring a community of interpreters who foster each other’s practice we make that middle stage of journeyman the growing/practicing stage, the testing our abilities stage. Taking on a less experienced interpreter in the role of mentor, or engaging in peer-mentoring with colleagues, could improve the practice of any interpreter, at any level throughout her career. This mentor tree might be more long-
lasting and could be more community-focused than my original structured medical-residency style program.

References


Abstract
This study evaluated the teaching and learning processes of the diploma programme in Ugandan Sign Language Interpreting (UgSLI) at the Department of Special Needs Studies, Kyambogo University in Uganda. The problem identified by the researcher was that graduates from the programme possessed average skills in UgSLI but did not have the competencies required by employers. The purpose of the study was to evaluate the programme in order to improve its teaching and learning processes to enable trainees to attain the required competencies needed by the world of work. The study employed a participatory action research approach. Thirty-seven (37) participants involved in the study were purposely selected based on their experience and competence in the field of UgSL interpretation. Challenges identified included inadequate teaching materials and textbooks, obsolete equipment to facilitate learning and a lack of a sign language laboratory, underutilization of Deaf and interpreter role models, and limited learning rooms. Other challenges included more theory sessions than practical, low self-esteem and a negative attitude in some students, poor time management by both students and lecturers, and a lack of interaction with the Deaf community.

Introduction
Ugandan Context
Ugandan Sign Language (UgSL) gained status when it was recognized in the Constitution of the Republic of Uganda (Constitution of the Republic Uganda, 1995). According to Uganda constitution (1995) Principle xxiv (c): “The State shall promote the development of a Sign Language for the Deaf.” (p. 27). The intention of its inclusion in the constitution was to promote the rights of Deaf persons to express themselves freely and to access information through sign language interpreters.

The database from a study conducted by the Deaf Education Section at the Department of Special Needs revealed that only two hundred (200) Ugandan sign language interpreters (UgSLI) had been trained up until 2001. However, the number of professional Ugandan sign language interpreters (UgSLI) has increased since 2001 (Lutalo-Kiingi, 2014; Lutalo-Kiingi & De Clerk, 2015). Lutalo-Kiingi (2014) noted also that "a number of Deaf people have been given funding to pay for interpreters so that they can access further and higher education" (p. 35).

The training of UgSLI has also increased. This has led to an increase in opportunities for Deaf people to education in inclusive settings at higher levels, and increased access to medical, religious and socio-cultural settings as well as the news.
The demand for interpreters has also risen because of advocacy for the inclusion of persons with disabilities in all programs. Furthermore, the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) (2016) Article 9 recommends that, “The state shall provide forms of live assistance and intermediaries including professional sign language interpreters”. These have all led to more demand for sign language interpreting services.

How Training Started

The Danish Deaf Association (DDL) funded by DANIDA through a capacity building programme started a sign language interpreter training program in Eastern and Southern Africa in 1997. The organisations that participated in the training were the Uganda National Association of the Deaf (UNAD), the Kenya National Association of the Deaf (KNAD), Tanzania (CHAVITA) and the Zambia National Association of the Deaf (ZNAD). Each of these four countries identified two participants who were hosted and trained by KC Denmark, one Deaf instructor and a hearing interpreter. The two Ugandan representatives later spearheaded the Diploma in Ugandan Sign Language Interpreting Programme at Kyambogo University.

The initial training for interpreter trainers was followed by the Regional Sign Language Project 2 for East and Southern Africa between 1998 and 2000. The Uganda National Association of the Deaf (UNAD), which was based at Namirembe, hosted the administrative offices for the Regional Sign Language Project. The activities were monitored by the Regional Secretariat for Eastern and Southern Africa (RSESA) which was an affiliate to World Federation of the Deaf (WFD). This was based in Kenya.

Participants in the Regional Sign Language Project included three Deaf instructors and three hearing sign language interpreters who were identified from each of the four countries and organisations listed earlier. In total, 12 Deaf instructors and 12 hearing interpreters from the four countries were trained. The trainers were the pioneers who were trained by the Danish Deaf Association in 1997 working with consultants from KC Denmark. Participants from each country were then certificated and tasked to further train sign language interpreters and Deaf instructors in their respective countries. This is how sign language interpreter training spread in Eastern and Southern Africa.
In Uganda, between 2000 and 2002, Kyambogo University worked in co-operation with UNAD and was funded by the Danish Deaf Association to train 44 Deaf instructors and 38 interpreters who graduated at the certificate level. It should be noted that Kyambogo University was the first African institution to recognize sign language and offer academic qualifications. The participants were identified based on their merit according to representatives from the North-East, South-West and Central Uganda areas and trained for one year through a distance education program. The role of UNAD was to identify the students and to employ facilitators while Kyambogo University’s role was to monitor, assess and award certificates to the participants. The aim of this program was to prepare Interpreters for upgrading to the diploma level.

The pioneers who began educating UgSL interpreters at Kyambogo University were funded by a Government of Uganda scheme. The programme began at the diploma level and the first group of students graduated in 2005. Resource persons from the International Centre for Sign Language and Sign Supported Communication-KC Denmark (University College of Copenhagen) were involved in the training and supervision as well as empowering lecturers in specific areas of UgSL interpreting.

As proposed earlier by Kyambogo University, UNAD in partnership with the DDL project recommended that the certificate holders proceed with the diploma programme. However, there were complications as the majority of the certificate holders did not meet the Kyambogo University entry requirements. Instead, direct entry students were admitted who lacked fluency in UgSL and knowledge of Deaf people. This saw direct entry candidates outnumbering the targeted certificate holders which affected the expected outcomes in terms of competence acquired by the graduates. Thus, the argument within the Deaf community was that the graduates of the two-year diploma sign language interpreting programme were not as fluent in sign language interpreting as expected. This concern prompted a research study to evaluate the programme.

Global Context

Napier (2004) highlights the reasons the United States, the United Kingdom and Australia are considered leaders in the sign language interpreting profession. Areas where they are more advanced than developing countries include interpreter training, testing, and accreditation. For example, in some programs in the United States, senior
students take the written portion of the Registry of Interpreters for the Deaf (RID) examination before graduation. In Britain, all interpreters are required to complete an NVQ portfolio demonstrating that they meet all competency requirements for British Sign Language (BSL) interpreters. In Australia, an accreditation system for the qualification of Auslan interpreters was established and is under the auspices of the National Authority for the Accreditation of Translators and Interpreters (NAATI).

In the countries listed, certification is a highly valued asset that provides an independent verification of an interpreter’s knowledge and abilities. This allows him/her to be nationally recognized in the delivery of interpreting services (Napier, 2004). However as RID, NVQ and NAATI play leading roles in establishing national standards in their respective countries, similar associations or testing bodies in Uganda are not yet established. For example, the Kyambogo University and the Department of Special Needs Studies does not perform this function. At the same time the Deaf community continues to criticize the level of service provided by graduates of the program.

Another indication of how Australia, Britain and the United States are leading the field of interpreting is the length of interpreter education programmes. Currently the programme offered at Kyambogo University is a two-year course at the diploma level compared to the longer programs in the developed countries. Napier (2004) points out, for example, that in the United Kingdom, USA and Australia, training programmes are offered at bachelors and postgraduate levels unlike Kyambogo University in Uganda which is still training at the diploma level due to limited resources.

**Students’ Motivation**

An important aspect of education is motivation. According to Kristmanson (2000) motivation can be achieved by creating an atmosphere in which students are not afraid to make mistakes and are encouraged to take risks. Teacher’s professionalism is also a very important factor for motivation (Reece & Walkin, 2007). Reece and Walkin add that teachers’ support is vital for student motivation for learning foreign languages. To motivate students, the teacher must conduct lessons in a way which will interest them and incite their participation. In addition, Markwell (2003) highlights that engagement with learning occurs where students feel they are part of a group and committed to learning
both in and outside of the classroom. Activities outside of the classroom should be considered as important as timetabled and structured experiences to enable students to actively connect to the subject matter.

Learning Sign Language

Several authors argue that students should have regular interaction with the Deaf community to learn sign language. Napier, Leigh and Nann (2007) point out that regular attendance at any of the numerous Deaf clubs, social gatherings, and events where Deaf people get together and share information are the best places for practicing interpreters. Quinto-Pozos (2011) agrees that regular attendance at Deaf events is needed.

Linking students with Deaf role models is also crucial in learning a sign language. UgSLI graduates need a broader knowledge of signs to help them transition to work in a range of settings. Language models should be invited to the class who come from a variety of settings including religious, medical and political. The trainees can then gain most of the vocabulary used in such settings. This is in agreement with Knoors and Marschark (2014) who affirm that bringing in sign language models such as fluently signing Deaf professionals would be a way to facilitate language proficiency.

Objectives of the Study

The goals of this study were to examine the teaching and learning process within the Diploma in UgSLI programme at the Department of Special Needs Studies (SNS) and to:

1. Identify the challenges which affect the teaching and learning processes,
2. Generate implementable solutions to the challenges that affect the teaching and learning processes, and
3. Evaluate the impact of solutions implemented to improve the teaching and learning processes.

Methodology

The study employed a participatory action research approach. The motivation to conduct action research was based on the hope of improving the teaching and learning processes in the UgSLI programme in order to contribute to the production of competent graduates who could satisfy the needs of consumers. This is supported by Bradbury-Huang (2010) who notes that in action research, partnership is tied to the quality of
relationships we form with stakeholders and the extent to which they are involved in the process and outcomes of change.

Thirty-seven (37) participants including students and lecturers were involved in the study. Employers were also involved and included representatives from the Uganda National Association of the Deaf (UNAD), Sign Health, and National Union of Women with Disabilities in Uganda (NUWODU), United Deaf Women’s Organisation (UDEWO) and Immanuel Church of the Deaf (ICD). All were selected using a purposive sampling technique. Table 1 provides the numbers for the participants.

**Table 1**

*Sample Size*

<table>
<thead>
<tr>
<th>Category</th>
<th>Target size</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diploma UgSLI students</td>
<td>25</td>
<td>18</td>
</tr>
<tr>
<td>Lecturers</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>Administrators</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Professional UgSL Interpreters and employers</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>from the world of work</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>48</strong></td>
<td><strong>37</strong></td>
</tr>
</tbody>
</table>

In this study, one of the methods used in data collection were interviews to gain an understanding of the participants' perceptions of challenges encountered at workplaces. Seidman (2013) states that interviewing provides a necessary sufficient avenue of inquiry. It is a valuable assessment tool because it allows participants to share their experiences, attitudes, and beliefs in their own words. Merriam (2009) states that “interviews can be used to obtain direct quotations from people about their experience, opinions, feelings, and knowledge” (p. 85).

An interview guide was designed and used to collect information on the challenges encountered by the UgSL interpreters and their employers. The interview prompts were open-ended and further questions supplemented where needed for clarification.
Following the interview process, a “future workshop” was organised. According to Jungk and Müller (1987 as cited in Apel, 2004) a future workshop is where participants of a project are involved as a way to highlight problems and look for suggestions, generate a vision for the future and discuss how this vision can be realised. The participants in the workshop were lecturers, students and administrators. The workshop aimed at recognizing the duties, tasks and competencies required at each stage in the process by students, lecturers and administrators as well as the challenges they encountered. Through focus group discussions at the “Future Workshop”, the lecturers, students and administrators expressed their views.

Another data collection technique was observations. Observation was used to watch students during follow-up group meetings. This involved observing their facial expressions and level of participation. When the researchers noted that the participants were often silent, the procedure was changed, and meetings were held separately with students and another with the lecturers and administrators in order to collect further data for the study.

**Findings**

The results of the analysis found that upon completion, most of the graduates first served as volunteers in the Deaf community, organizations and institutions to acquire the competencies needed by the world of work. However, criticism of these graduates still occurred by the employers in that they did not understand the Deaf culture, did not have knowledge about linguistics, and they failed to socialize with the Deaf community where they would learn informally and see variations in signs. The identified gaps are listed in Table 2.

**“Future Workshop” and Diploma Program**

Table 3 outlines the themes found in a discussion with the students, administrators and lecturers of the diploma programme.
### Table 2

**Graduates and Employer Comments**

<table>
<thead>
<tr>
<th>Graduates</th>
<th>Employers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short notice before many assignments.</td>
<td>Failure to observe professional ethics like confidentiality or neutrality. Take on advisor role with Deaf people.</td>
</tr>
<tr>
<td>Community lacks awareness of the interpreter role.</td>
<td>Disappearing for ‘kyeyo’ † without permission.</td>
</tr>
<tr>
<td>Prolonged assignments without breaks and a co-worker to team with.</td>
<td>Fluent signers but not competent in voicing.</td>
</tr>
<tr>
<td>Lack of sign vocabulary in medical and legal settings (court and police); therefore, they find it hard to interpret such situations.</td>
<td>Omit information when interpreting.</td>
</tr>
<tr>
<td>Some organisations expect pro bono work.</td>
<td>No interaction or associating with the Deaf to improve language competence.</td>
</tr>
<tr>
<td>Working with Deaf in villages who use local signs and gestures.</td>
<td>They ask the Deaf person what he or she wants to present before the Deaf person begins.</td>
</tr>
<tr>
<td>Some of the graduates are labelled as fake.</td>
<td>They demonstrate no respect for Deaf people at the workplace because in some organisations, they report to hearing administrators.</td>
</tr>
<tr>
<td>Lack of confidence by some graduates from the Diploma in UgSLI program.</td>
<td>Deaf consumers tend to monopolise specific interpreters. They then ignore recent graduates from the diploma program and fail to give encouragement or opportunities to novices.</td>
</tr>
<tr>
<td>No prior information or preparation given before interpreting (TV, workshops).</td>
<td>Some interpreters fail to convey the meaning of signers due to a poor command of English.</td>
</tr>
</tbody>
</table>

† “Kyeyo” in UgSLI context means a short interpreting assignment with relatively a good pay like a brief meeting or workshop apart from one’s permanent interpreting job.
### Table 3

#### Diploma Programme Challenges

<table>
<thead>
<tr>
<th>Challenges presented by students</th>
<th>Challenges presented by lecturers and administrators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Out-dated equipment</td>
<td>Out-dated equipment</td>
</tr>
<tr>
<td>Inadequate teaching materials</td>
<td>Adapting available training material to current ICT technology.</td>
</tr>
<tr>
<td>Few Deaf instructors and teaching staff</td>
<td>Inadequate textbooks</td>
</tr>
<tr>
<td>Limited learning rooms</td>
<td>Insufficient time for practical work</td>
</tr>
<tr>
<td>Limited advanced ICT skills (Instructors)</td>
<td>Limited participation in field excursions</td>
</tr>
<tr>
<td>Limited time for submitting course work</td>
<td>Lack of sign language laboratory to facilitate students’ practical work</td>
</tr>
<tr>
<td>Delay in getting feedback</td>
<td>Deaf and hearing resource persons are not utilised in the teaching and learning process due to inadequate resources</td>
</tr>
<tr>
<td>Too much theory and less practical exercises</td>
<td>Students admitted with no background in Deaf community and sign language which affects their attitude</td>
</tr>
<tr>
<td>Low self-esteem among students</td>
<td>Students admitted with no background in Deaf community and sign language which affects their attitude</td>
</tr>
<tr>
<td>Poor time management by both students and lecturers</td>
<td>Students admitted with no background in Deaf community and sign language which affects their attitude</td>
</tr>
<tr>
<td>Little interaction between the Deaf models and students</td>
<td>Students admitted with no background in Deaf community and sign language which affects their attitude</td>
</tr>
<tr>
<td>Few and outdated reference textbooks in UgSLI</td>
<td>Students admitted with no background in Deaf community and sign language which affects their attitude</td>
</tr>
</tbody>
</table>

### Proposed Solutions

Several solutions for the challenges identified earlier were proposed by the participants. It was recommended that communication between lecturers and students should be improved through the use of email. The use of Ugandan Sign Language in the lecture rooms and outside was emphasised. Students wanted access to professional UgSL interpreters during practical sessions in the first two weeks as the students only had basic communication in UgSL. This meant they could not communicate effectively with the Deaf instructors. It was emphasised that UgSLI students should learn the target language (UgSL) throughout the program in order to develop competence. Furthermore,
the suggestion was that more practical activities be conducted or incorporated in the timetable in order to improve UgSL communication skills.

It was noted that there were not enough rooms for practical activities and the administration was of the view that students could instead watch UgSL videos for a few hours. They would then engage in independent practice as a solution. Kristmanson (2000) supports this activity, in that the role of the instructor is to aid self-preparation and provide useful guidelines and exercises that can be used outside the sign language laboratory.

It was noted that interaction between the students and the Deaf community should be improved. Students were encouraged to attend practical lectures. They were also encouraged to interact with the Deaf students within Kyambogo University and on Sundays they should opt to attend churches of the Deaf and meet Deaf adults for interaction and exposure. This could then potentially link them up for more job opportunities. Throughout the study, improvement in interaction was evidenced by some students who were interested in visiting Deaf communities to interact with fluent signers and meeting other professional sign language interpreters.

Attitude was identified as a problem with some students. It was suggested they have career counseling or guidance by the lecturers, hopefully resulting in more passion for the interpreting profession. An evaluation of career counseling in fact revealed that most of the students were motivated through such career guidance.

Improved time management was an issue. However, it was noted that some of the lecturers did not adhere to the measures taken. Students revealed that their instructors had canceled or missed class lectures, or things were done at the last minute. These were some of the reasons why the students lacked confidence and were not sure that they were ready for the world of work.

Prompt feedback on course work was an issue identified by the students. This was later improved upon, though some of the lecturers only gave feedback just prior to the students’ examinations toward the end of the semester. Gibbs and Simpson (2004) point out that the feedback should be timely in that it should be received by students while it still matters to them and in time for them to pay attention to further learning or receive further assistance. Immediate feedback at each stage of a student’s progress through
coursework has been demonstrated in many studies to improve student performance (Gibbs & Simpson 2004).

Involving stakeholders from a variety of workplaces was identified as crucial to make it possible for students to transition to the world of work (Atchoarena & Delluc, 2002). It was noted that most of the Deaf role models and presenters were from different organisations and students had many opportunities to create links for field placements. Having a variety of models enabled the students to see a variety of sign language vocabulary from religious, medical and political settings.

Conclusion

In conclusion, the Deaf education department should make a policy for all lecturers and students to use UgSL both inside and outside the lecture rooms. There should be a budget for Deaf role models/guest speakers, study tours to Deaf communities and workshops, to update learning equipment/technology and to replace the outdated ones in use. The library must be restocked with the most current textbooks, journals and other related materials relevant to sign language interpreting. Further the University should start administering pre-assessment interviews for candidates with an interest in the programme. More research is required on UgSLI as there are still few resources about UgSL and interpreting in Uganda. Finally, the UgSL interpreting Associations in collaboration with Kyambogo University should establish an accreditation program for graduates.

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Sign Language Interpreting in Scotland: A landscape review

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Vicky Crawley
Yvonne Waddell

Abstract

The passing of the British Sign Language (Scotland) Act 2015 has reinforced the necessity to improve understanding of the landscape of BSL interpreting in Scotland in order to ensure effective service provision for the Deaf population. Following the publication of the first BSL National Plan 2017-2023, the Scottish Government funded Queen Margaret University in Edinburgh to conduct a scoping study of BSL/English interpreters. This article details some of the initial analysis from this research. Data were collected in a mixed method approach involving online surveys and semi-structured interviews. In addition to the views of interpreting practitioners the study incorporated the perspectives of interpreting organisations, public bodies that work with interpreters and members of the deaf BSL community. The study aims to outline current routes into interpreter registration and identify the future career options for registrants. In addition, the study is designed to analyse how interpreters source their work and to map interpreters’ geographic locations and working patterns. It also identifies barriers to interpreters’ professional practice.

Introduction

This article details some of the initial analysis from a scoping study commissioned by the Scottish Government. The research was motivated by the need for more detailed information to inform policy developments around the implementation of the British Sign Language (Scotland) Act 2015 and the BSL National Plan 2017-23 that followed. The lack of data around BSL/English interpreting in Scotland has challenged the Government’s ongoing work following the BSL (Scotland) Act of 2015. This led to an identified need for more evidence of what is happening at present in order to inform decisions around how best to deliver services and target improvements to existing provision.

In particular the research has contributed to the following three actions from the BSL National Plan.

- Action 7 – Review a range of current and on-going Scottish and UK evidence about the BSL/English interpreting landscape, for example, the UK Market Review of BSL and communication provision, and the Scottish Government funded review of the Scottish Association of Sign Language Interpreters (SASLI).
- Action 8 – Analyse the learning from actions we are taking forward in health, education and justice (referred to in this plan) to strengthen Scotland’s interpreting profession.
- Action 9 – Consider what further work is needed to ensure that a strong and skilled pool of BSL/English interpreters are working efficiently across Scotland.

**Research Questions**

The research, as agreed with the Scottish Government, was designed to draw together the different perspectives that exist around BSL/English interpreting in Scotland, and in particular to identify:

1. Relevant documentation, reports and literature.
2. Current progression routes to interpreter registration and post registration career options.
3. Where interpreters live and work.
4. How interpreters source their work.
5. Barriers to interpreters' professional practice.

This article reports on some of the preliminary findings of the study.

**Method**

Data were collected in a mixed method approach involving online surveys, responses to Facebook consultations, email correspondence and semi-structured interviews. These methods were used to generate data representing multiple perspectives relating to BSL/English interpreting. These included the views of public bodies, the BSL community, interpreting stakeholders and interpreters.

An online survey was distributed to all public bodies in Scotland. These included some national organisations such as Police Scotland, and all local authorities (councils), universities and colleges, regional health boards, and health and social care partnerships. Forty-eight public bodies from a range of organisations across Scotland responded to the online survey. Some organisations submitted multiple responses, representing different departments; there were 55 submissions in total. Data from public bodies was further supplemented by email correspondence and Freedom of Information requests to all local authorities.
To examine the perceptions of the BSL community, the research team reviewed the published responses made during the consultation phases of the BSL Bill and the BSL National Plan. These contributions from the BSL community were posted on dedicated Facebook pages created specifically for those consultations. The research team additionally conducted interviews with key BSL stakeholders, including representatives from the British Deaf Association (Scotland), Deaf Action, Deafblind Scotland, deafScotland and Deaf Links.

Data on interpreting stakeholders’ perspectives were generated via semi-structured interviews. The agencies interviewed included Deaf Action, Sign Language Interactions, Deaf Links and Deaf Services Lanarkshire, all providing specialist BSL/English interpreting services. Interviews were also conducted with all organisations providing initial interpreter training in Scotland, the Association of Sign Language Interpreters (ASLI) and the two registration bodies for BSL/English interpreters operating in Scotland. These are the National Register for Communication Professionals working with Deaf and Deafblind People (NRCPD) and the Scottish Association of Sign Language Interpreters (SASLI), which has since changed its name to the Scottish Register for Language Professionals working with the Deaf Community (SRLPDC). A written response to the same questions was submitted by the National Union of BSL Interpreters (NUBSLI). The third group of interpreting stakeholders comprised the organisations providing initial interpreter training in Scotland. These included the two National Vocational Qualification (NVQ) centres in Scotland that deliver the Level 6 NVQ Diploma in Sign Language Interpreting, Deaf Perspectives and BSL Scotland, both based in Glasgow. In addition, Deaf Services Lanarkshire delivers the SASLI Customised Award BSL/English Interpreting Qualification (SCQF Level 10) and an academic route to registration is provided by Heriot-Watt University in Edinburgh, via their four-year MA (Hons) British Sign Language (Interpreting, Translation and Applied Language Studies). Interviews were conducted with representatives from all four providers.

Interpreter data were also generated via an extensive online survey. The survey included 65 questions designed to find out more about interpreters’ working patterns, the type of work they engage in and any barriers experienced in relation to training and employment. A total of 69 interpreters responded to the survey, including 48 registered
interpreters, thus representing 45% of registered interpreters at the time of the survey. Respondents also included 11 trainee interpreters, 3 students and 7 un-registered interpreters. Survey respondents were also given the option of semi-structured follow-up interviews once they had completed a survey. These interviews were all conducted online. Twelve respondents took part in semi-structured follow-up interviews.

Findings

Public Bodies

The survey responses highlighted a concern around the lack of availability of interpreters, a view shared by 73% of the respondents. However, this concern was particularly noted for public bodies operating in rural areas, for those whose work regularly involves operating outside normal working hours and for those trying to procure interpreters with appropriate specialist skills and/or experience. This lack of availability leads to difficulty in making short notice bookings, which has a greater impact on certain sectors, and additionally impacts on expenditure. Several organisations (41%) reported regularly (or always) incurring significant travel costs for the interpreters they employ.

Respondents commented on how time-consuming it can be to deal with interpreter bookings (44%). One respondent remarked: “Important to note that the booking process for interpreters is very cumbersome. Current process not easy and can put people off booking. If you don’t find an interpreter through the first process it all has to be repeated.”

Some respondents expressed a preference for a central information base and booking system, and others reflected that there was a need to deploy interpreters more efficiently across different organisations.

BSL Community

The views of the BSL community and BSL organisations indicated that the main areas of concern were around healthcare and education. These included an awareness of geographic inconsistency of interpreting provision, with particular concern for areas where there were fewer, or no, interpreters. This shortage of available interpreters, particularly in rural areas, reduced the choice of interpreter and increased the difficulty in finding an interpreter at short notice. One interviewee commented: “The interpreting landscape in Scotland is not designed to provide interpreters at short notice.”
One recurring theme was that of interpreters not arriving for appointments, particularly in the health sector. Data indicated a lack of clarity within the BSL community about the different interpreting qualifications and different registration bodies, and a concern around the inconsistent quality of interpreters’ professional practice.

**Interpreter Organisations**

Representatives from ASLI and SASLI/SRLPDC and NUBSLI raised various concerns around the commissioning and contracting arrangements for interpreting services, with NUBSLI expressing a preference for direct procurement of interpreters rather than via agencies. NUBSLI also shared a concern about fees being suppressed or eroded by agencies and the public bodies procuring interpreters. As reported by one participant, “What commissioners do not understand is that it makes no sense to ignore what the practitioners are saying, particularly when they are all saying the same thing.”

All interpreting organisations additionally expressed a concern around the inappropriate use of video remote interpreting (VRI), particularly in emergency and sensitive situations.

**Interpreting Agencies**

The responses from the agencies interviewed included a shared concern about the geographic challenges presented in Scotland and the lack of interpreters in some areas. Concerns were also expressed about the variable quality of interpreter training and on interpreters’ availability for ad hoc appointments that typically occurred in the health sector. A further issue relating to healthcare appointments was the implementation of General Data Protection Regulation (GDPR) legislation, and the reticence of health authorities to share the patient information necessary to provide an effective interpreting service. Data suggest that this was exacerbated by the complexity of internal booking systems within some institutions like the National Health Service (NHS).

**Interpreter Training Providers**

Training providers all had a slightly different focus on the academic element of interpreter training, although there was consensus around the value of practical experience for student interpreters. Providers also shared a concern about the lack of a career structure within the profession and some articulated a more pressing concern
about the lack of suitably qualified and experienced BSL tutors able to deliver training at more advanced levels of BSL. As one shared, “It is impossible to have good interpreters if we don’t have good BSL tutors.” Discussion additionally indicated a lack of interpreters available for the supervision and mentoring of student, trainee and newly qualified interpreters.

**Interpreters**

Interpreters, like the agencies, expressed a concern about the impact of GDPR (General Data Protection Regulation) on the sharing of information considered necessary to deliver bookings effectively. This was particularly acute in the health sector. One remarked,

> “I was given a date of birth for a GP appointment and the booking agency stated the name they thought it might be. However, on arrival it was a different person, and the client was male. It was a GP appointment and as a female interpreter this was not appropriate.”

Data indicated that the implementation of GDPR may have additionally resulted in work being inappropriately allocated to trainee interpreters.

Respondents shared NUBSLI’s concern about the erosion of the interpreters’ terms and conditions. Individuals commented that this related both to organisations and to agencies. Another concern relating to agencies was the practice of asking interpreters to hold a provisional booking in their diaries. These bookings were typically cancelled prior to the applicability of a cancellation fee. Interpreters related how this made management of their work diaries, and effective employment, problematic.

Geographic details of the respondents highlighted the shortage of interpreters in some areas of the country. The distribution of respondents to the survey shown in Figure 1 broadly mirrors the distribution of all registered BSL/English interpreters in Scotland.
Interpreters living in areas away from the central belt, around Edinburgh and Glasgow, described the challenge of travelling to engage in training, interpreting work, and in continuing professional development (CPD) activities.

Interpreters provided a different perspective on the issue of named interpreters not turning up for health appointments. They related incidents where Deaf clients complained to them about this, but it was apparent that the interpreter had not received any request for the earlier booking.

Career development and training issues were other issues raised. More experienced interpreters expressed the need for recognition of interpreting specialisms and the benefit of a more defined career pathway. Respondents also reported that initial interpreter training was not always well matched to the National Occupational Standards and did not ensure that students were ready for work on completion. These comments related to others about the need for improved cohesiveness within the profession and

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support of novice interpreters. However, data indicate that only 10 of the 69 respondents had qualifications in training, assessing or supervision.

Conclusion

This Landscape Review aims to provide the Scottish Government with detailed information about the current context of BSL interpreting in Scotland. This information will inform future decision-making in relation to provision for the BSL community and will feed into the 2020 review of the BSL National Plan 2017-2023.

The data shared here represent a limited selection of preliminary findings designed to stimulate discussion with delegates at the WASLI 2019 conference to help the research team to better understand the commonality or uniqueness of these issues with the global interpreting landscape. The final report from the research was presented to the Scottish Government in October 2019. The Executive Summary (in BSL and English) and the full report, together with a recording of a presentation delivered in BSL to the BSL community are now available online at http://bslscotlandact2015.scot/landscape-review/

Acknowledgement

This research was commissioned by the Scottish Government, who funded the project team at Queen Margaret University to conduct a scoping study of British Sign Language (BSL) interpreting in Scotland.

References


Comparing IS and NGT Interpreting Processing Time: A case study

Aurélie Nana Gassa Gonga  
Onno Crasborn  
Carl Börstell  
Ellen Ormel

Abstract

This study investigated the duration of the processing time between two teams of international sign (IS) and Sign Language of the Netherlands (NGT) interpreters working in parallel from the same source discourse in a conference setting. IS interpreting is increasing in international settings and IS interpreters tend to work along with national SL interpreters.

Two studies on English to IS interpreting reported an extended processing time for IS interpreters based on data from 1995 (McKee and Napier, 2002) and 2002 (Rosenstock, 2008), ranging from between 10 and 16 seconds (McKee & Napier, 2002). In contrast, in another study on ASL interpreting, the interpreters’ processing time was between 2 and 4 seconds (Cokely, 1986), which corroborated the values measured for spoken language interpreting of between 2 and 5 seconds (Timarová, 2011).

In our study, based on data collected in 2018, we compared the processing time of a group of IS interpreters to the processing time of a group of NGT interpreters. The results showed no statistically significant difference in the interpreting processing time between the IS and NGT interpreters. The results do not align with the reports from previous IS interpreting studies but are similar to the processing times seen in spoken language interpreting (Timarová, 2011) and in one study of ASL interpreters (Cokely, 1986). The difference between IS and NGT interpreting processing time in this study appears to depend more on individual differences between interpreters than on the languages involved.

Introduction

International sign (IS) interpreting is one of the recent signed language (SL) interpreting practices inherited from the past and the use of IS is shaping the future of sign language interpretation worldwide to a great extent. Indeed, an increasing number of European institutions and deafness/SL-related conferences choose to use IS as one of their official “languages”\(^1\). Nowadays, it is common to see a national SL interpreter working on stage along an IS interpreter\(^2\). Observing this situation, many (including us) intuitively consider that the processing time of the IS interpreter is much longer in

\(^1\) We use quotation marks given the fact that IS is not considered as a full-blown language in the literature.

\(^2\) See conferences from WASLI, EFSLI, WFD, TISLR, etc.
comparison to the national SL interpreter working in parallel. But do IS interpreters indeed have a longer processing time than national SL interpreters do? This research aimed to provide an answer to this question.

Processing time in interpreting, also known as lag time, ear-voice span, or in French *décalage*, is defined as “the time between delivery of an original message and the delivery of the interpreted version of that message” (Cokely, 1986, p. 341). In simultaneous interpreting, it has been defined as “the moment a segment is heard and the time it is reformulated in the target language” (Gile, 1997 cited in Pöchhacker & Shlesinger, 2002, p.172), which reflects the cognitive processing of simultaneous work. For spoken language interpreting, previous studies have found mean processing times between 2 and 5 seconds (Timarová, 2011, p. 122).

Indeed, simultaneous interpreting is not merely repeating something in another language (which would be close to shadowing)\(^3\), but it involves extracting the meaning of a linguistic utterance or series of utterances and re-expressing it in another language. Comparison studies between shadowing and simultaneous interpreting have shown that simultaneous interpreting leads to increased cognitive load, which was indicated for instance by the interpreter having a bigger pupil dilation (Hyönä et al.,1995) and/or by an extended processing time (Treisman, 1965).

**Processing Time in SL Interpreting**

Based on a literature review in interpreting studies of publications in both French and English, only a single study related to the processing time in SL interpreting has been conducted so far. Cokely (1986) video recorded four ASL interpreters working from English to ASL during a national conference in the US, in 1983. These ASL interpreters had 7 to 8 years of working experience. Cokely measured the processing time of these four interpreters and correlated the results with the miscues occurring in the target language (ASL). According to Cokely, a miscue was “… a lack of concordance between the information in a [Target] [Language] interpreted message and the information in the [Source] [Language] message it is supposed to convey” (Cokely, 1986, p. 344).

\(^3\) Shadowing is a technique consisting of repeating aloud a source text with the same intonation, rhythm, etc. It can be seen as an exercise before learning simultaneous interpretation (Lambert, 1992).
Quantitatively, the processing times measured were an average of 2 seconds for two interpreters (ranging between 1 and 4 seconds for one interpreter and between 1 and 5 seconds for the other one), and an average of 4 seconds for the two others (ranging between 1 and 6 seconds for both interpreters).

Qualitatively, the main finding of Cokely's (1986) study was the fact that when the processing time is longer, the number of miscues was lower. Cokely argued for using a longer processing time in simultaneous interpreting situations in order to produce a more accurate interpretation: “The greater the lag time, the more information available; the more information available, the greater the level of comprehension.” (Cokely, 1986, p. 375).

Cokely's study was unique in the sense that it investigated interpreting in a cross-modal setting – that is, the source and target languages were produced and perceived in different modalities\(^4\) (spoken: vocal–auditory; signed: gestural–visuals). Because of this modality difference between the source and target languages, we might expect an average processing time for SL interpreting even longer than the average processing time measured in spoken language interpreting. This is because modality differences could result in very different strategies being used to structure the target text. Cokely mentions that “when the structures of the two languages are similar, a shorter lag time may be possible; however, when the structures are significantly different, longer lag time is required” (Cokely, 1986, p. 343). So far, no systematic quantitative research has supported this assumption, and in fact Cokely's study on ASL interpreting aligns with the results based on spoken language interpreting.

However, this assumption of a longer processing time might be shown to be correct when we investigate the processing time in IS interpreting. Interpreting into IS adds further

\(^4\) Here, we are looking at simultaneous interpreting and not consecutive interpreting. For simultaneous interpreting, we do not quite know what the modality effects are. Would it take more or less time to go from auditory to visual or vice versa, in comparison to working from speech to speech with a headphone on in a sound-isolated booth?

\(^5\) SLs used by DeafBlind individuals are a tactile rather than visual perception. Tactile signing is, however, outside the scope of this study.
complexities, as this is not a fixed linguistic system with a consistent lexicon and grammar. Rather, IS is a way of communicating used by SL interpreters during international events to interpret to a wide audience with different SLs. It is similar to how cross-signing communication is used between deaf individuals without a shared language (Hiddinga & Crasborn, 2011; Zeshan, 2015). Despite its debated linguistic status (Hansen, 2016), IS is an effective way to convey a meaning to a multilingual broad deaf audience. As reported by the European Union of the Deaf, “…IS is - albeit not being the perfect solution - a good option when working with a diverse audience” (EUD, 2012).

However, it has been argued that IS, as used by interpreters in European institutions and studied by researchers, is mainly targeted to a Western deaf audience with a certain level of education (Rosenstock & Napier, 2016). At the same time, IS is dependent on the context and target audience and may thus differ from situation to situation. Also, IS has a minimal repertoire of signs (Allsop et al., 1995; Moody, 2002). Whynot (2016) found that some 200 signs recurred frequently in her dataset across presenters using IS at WFD meetings. In comparison, the national SLs that have been documented are known to have a conventionalized lexicon consisting of signs numbering in – at least – the thousands (for instance, more than 6000 lexicalised signs according to LSF dictionaries6). Reducing the use of lexical items, one of the strategies used in producing IS is to make maximum use of different types of iconic strategies available to signed languages (Cuxac, 2000; Taub, 2001). In summary, IS has been recognized as a form of SL with fewer conventionalized signs (Moody, 2008; Rosenstock, 2008).

Lexicalised signs in SLs are comparable to words in spoken languages. For instance, a sign is often glossed with a corresponding word. Therefore, we could assume that if spoken languages and national SLs are very dissimilar from each other, spoken languages and IS are even further away as there are fewer signs in IS. In that case, lexical meaning in the spoken language has to be converted to an equivalent expression that uses fewer lexical signs in IS or gestures and a series of gestures and signs as mentioned by Adam (2012). This situation might lead to a longer processing time for IS interpreting.

6 (Galant & Collectif, 2013; Girod & Collectif, 1997; Girod, Vourc’h, Hof, & Collectif, 1997).
So far, no systematic quantitative data have corroborated this assumption, but two studies on English to IS interpreting briefly report about it and support it.

First, McKee and Napier (2002) analyzed 14 minutes of authentic data for four IS interpreters working from English to IS in 1995, in three different international conferences in Finland, Denmark, and Austria. We do not have any details about the audience involved, but it is likely that they were from European-western countries. McKee and Napier (2002) reported an “extended lag time” which was “commonly between 10 to 16 seconds, and sometimes more” (p. 42) but no average value nor descriptive method of the measurement was noted. Their study was mainly qualitative and described different strategies used in the IS interpretation.

Second, Rosenstock (2008) explored a 10-minute stretch of two IS interpreters working in an international conference in the US in 2002. Again, we do not have any details about the audience involved, but we assume it might have been mainly American and participants from European-western countries. In her study, she wrote about a strategy “to reduce lag time” (Rosenstock, 2008, p. 146), implying long processing time value(s) might be something the IS interpreters needed to manage. However, here again, there was no systematic quantitative data, nor a description of the method of the measurement. The study was qualitative and focused on the role of iconicity in IS interpreting.

In order to complement these previous studies, our study aimed to report quantitative data on IS and NGT interpreting processing time, using a more recent and larger amount of data. Our research question was, “How long is the processing time in IS vs. NGT interpreting?” To answer this, we collected authentic data during a small-scale international event and selected a measurement system from different methods used previously in spoken language simultaneous interpreting studies (Timarová, 2011).

Here, we are not looking at IS to English simultaneous interpreting. Actually, one study from IS to English interpreting reports an isolated value of processing time: 18 seconds. This long processing time is related to the strategy of expansion used by the IS interpreters (see Best, Napier, Carmichael, & Pouliot, 2016).
Methodologies to Determine Processing Time

Previously, many studies related to spoken language interpreting have measured processing time values using different methods. However, no matter which one was used, “...there seems to be an agreement that the average of time lag in simultaneous interpreting is roughly between 2-5 seconds, extending up to around 10 seconds…” (Tímarová, 2011, p. 122).

Irrespective of the method chosen to measure processing time, you need to decide on a unit and point of measurement. The unit of measurement is the processing time quantified in some explicit way: e.g., the interpreter lags $n$ words, $n$ syntactical units, or $n$ seconds behind the speaker. For instance, Gerver (1969) found an ear–voice span mean of 5 words behind the speaker when the rate of the input was 120 words per minute.

The point of measurement is the way the source discourse is chunked to measure the processing time: every five seconds, every 5th word (Gerver, 1969), at the beginning of every sentence, at the beginning of every unit of meaning, etc. Then, using both the unit and point of measurement, the word/sign/meaning correspondence can be found in the target discourse.

Tímarová et al. (2011) provided an overview of previous time lag studies. The most common unit of measurement was seconds. Concerning the point of measurement, every 5 seconds and the start of the sentence were the most common reference points.

Since interpreting is about extracting the meaning of an utterance and re-expressing it in another language, we choose to follow Podhasjšká (2008) method. Also it should be noted that interpreters do not follow the words/signs but the meaning of the utterance which has led Lederer (1978) to put forth the general concept of unit of meaning: “I suggest that such units are segments of sense appearing at irregular intervals in the mind of those who listen to speech with a deliberate desire to understand it.” (Lederer, 1978, p. 330). This concept of unit of meaning has led to the “Interpretative Theory of Translation”\(^8\) developed by Lederer and Seleskovitch (1985/2014) in Paris 3 University/ESIT. Hundreds of conference interpreters have been trained using this

\(^8\) Known in French as « la théorie du sens ».
theory. This meant that instead of applying the every-5-seconds rule we chunked the source discourse into units of meaning following Lederer’s rationale (1978). A unit of meaning was defined as a sequence of words long enough to make sense and long enough to give access to the intention of the speaker. Therefore, we decided to annotate our data by first chunking the source discourse into units of meaning.

Method

The length of the processing time varies according to several factors, internal to the interpreter (personality, expertise, experience, etc.) and external to the interpreter (content discourse difficulty, the accent of the speaker/signer, delivery rate, languages involved, etc.). These internal variables are hardly controllable, so it is impossible to fully compare the exact same situation (same internal and external variables) in interpreting studies. However, for this study, we controlled the external variables by asking the team of IS and NGT interpreters to interpret the same conference discourse and work in parallel, side by side on stage. As mentioned previously, this specific set up is often seen at conferences.

Data Collection

We collected a dataset of three English-spoken lectures on SL linguistics by different non-native English speakers. This event took place at Radboud University, in Nijmegen (The Netherlands), in May 2018, as part of a regular lecture series on sign linguistics (‘Sign Pop-ups’). The structure of each lecture was 45 minutes of lecture and 15 minutes for a question and answer (Q&A) session. The whole 3-hour event was simultaneously interpreted by two accredited IS interpreters and two registered NGT interpreters, in parallel. As usual, interpreters were alternating every 15 minutes more or less. From the audience’s perspective, IS interpreters were situated at the left of the screen (where the slides were displayed) and NGT interpreters at the right side. Therefore, both interpreters were standing next to the screen and could refer to it if

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9 See the website of ESIT Alumni association (https://www.aaesit.com/page/presentation, visited in April 2020).

10 WFD-WASLI accreditation.
needed. The speaker was standing at the extreme right side of the screen, next to the NGT interpreter. Figure 1 illustrates this setting. We set up three cameras: one filming the IS interpreter and the slides; a second one recording the NGT interpreter, the slides and the presenter; and the third one was directed at the audience (hearing and deaf).

**Figure 1**

*Setting of the data collection*

![Diagram of setting](image)

**Setting of the Event**

The lectures were intended for a linguistic academic audience: researchers and students, from Nijmegen, other cities within the Netherlands and even the countries close by (such as Belgium). The audience consisted of mainly hearing people, with few deaf attendees. Two Dutch deaf people were receiving the presentation via NGT interpreting, and one American deaf person was receiving the presentation via IS interpreting. At that time, the American deaf person had been living out of the US for more than 10 years, using BSL for the past few years and had started learning NGT one month prior. She was also using IS in her daily workplace and had already had many opportunities to work with these IS interpreters because of her extensive international experience.

**Participants**

For this paper, our primary focus was on the interpreters (see Table 1). Their work was influenced by the speakers and their fluency in English, accent, etc. (see Table 2)
and the audience involved. During the event, IS interpreter #1 was working in parallel with NGT interpreter #2 and IS interpreter #3 with NGT interpreter #4.

**Table 1**

*Demographic Information of the Interpreters*

<table>
<thead>
<tr>
<th>Interpreter</th>
<th>Mother-tongue</th>
<th>Acquired languages</th>
<th>Basic knowledge of languages</th>
<th>Interpreted to</th>
<th>Years of experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NGT and Dutch</td>
<td>English, ASL, IS</td>
<td>LSF</td>
<td>IS</td>
<td>35</td>
</tr>
<tr>
<td>2</td>
<td>Dutch</td>
<td>English, NGT, IS</td>
<td>French, German, BSL</td>
<td>NGT</td>
<td>13,5</td>
</tr>
<tr>
<td>3</td>
<td>Dutch and German</td>
<td>English, NGT, ASL</td>
<td>French, Italian, Portuguese and Spanish</td>
<td>IS</td>
<td>16</td>
</tr>
<tr>
<td>4</td>
<td>Dutch</td>
<td>English, NGT, some IS</td>
<td>German, French, Italian, ASL</td>
<td>NGT</td>
<td>6</td>
</tr>
</tbody>
</table>

After the three lectures, the interpreters were asked to briefly reflect on their performance and the event. The NGT interpreters shared that their main difficulty was working in a relatively unusual setting, i.e. from non-native English to NGT instead of from Dutch to NGT. The two NGT interpreters also shared that they had already worked from English into IS from time to time. Therefore, it was hard for them to not switch to IS while interpreting from English to NGT. The IS interpreters shared that they tried not to produce

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1 NGT 2 interpreter herself added the question mark regarding her IS acquisition even though she has been working from English/Dutch to IS few times for one year

12 NGT 4 interpreter did not mention IS as a fully acquired language even though she has been working from English/Dutch to IS few times for one year.
a too strong ASL version 13 of their IS, as they knew the background of the international deaf attendee. These two factors may have influenced the processing time values for the IS and NGT interpreters.

Table 2

Demographic Information of the Speakers

<table>
<thead>
<tr>
<th>Speaker</th>
<th>Mother-tongue</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Russian</td>
</tr>
<tr>
<td>B</td>
<td>Italian</td>
</tr>
<tr>
<td>C</td>
<td>French</td>
</tr>
</tbody>
</table>

Data Annotation

The video footage of the interpreters was imported into ELAN, software developed by the Max Planck Institute for Psycholinguistics in Nijmegen (Crasborn & Sloetjes, 2008). ELAN enabled us to transcribe many features of linguistic and interpreting strategies on multiple annotation layers (tiers).

First, we annotated the source discourse chunking it in units of meaning (points of measurement as mentioned before). The concept of a unit of meaning as a point of measurement has the advantage of being directly related to the essence of the work of the interpreters but it remains fairly subjective. We wrote some guidelines to increase the consistency of the annotation between different annotators (there was one annotator and one reviewer involved in the annotation process, both sign language interpreters and researchers) and the guidelines may allow replication of this method (see below).

The guidelines state that basically, in the source discourse, a unit of meaning can be coded as a sentence, a part of it, a proposition, or even a word. This depends on the

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intonation of the speaker’s voice and the pauses the speaker introduces. The aim was to not segment the source texts word by word, but to segment them rather at the sentence-level. Prosodic and production factors (such as hesitations) led to smaller-than-sentence units. Form-wise, a unit of meaning started after a pause and ended with the voice of the speaker falling (going down) or staying in suspension. Content-wise, a unit of meaning was determined to be a unit containing “sense”, or at least carrying the intention to render sense (Lederer, 1978).

We annotated the processing time for each interpreter on a dedicated tier, as visualized in Figure 2. The processing time annotation started when the speaker started to utter a source unit of meaning and ended when the interpreter started to produce the target correspondence of this source unit of meaning. This corresponded to the time between the start of the speaker and the start of the interpreter.

The annotation of the start of the target utterance (i.e. end of the processing time annotation, see Figure 2) followed three possibilities. The first option regarded when the interpreter was resting in a neutral position, with hands-cropped (or not) and with hands down. When ready to interpret, s/he raised her/his hand(s) to produce the target utterance. We decided to annotate the moment when the hands were in front of the chest, which was considered the neutral signing space. Even if the sign was supposed to be articulated at a higher location in the signing space, the intention, the goal to produce the target utterance, was already obvious at this moment.

The second possibility related to the situation where the interpreter was resting in a neutral position, hands-cropped and up (in the neutral signing space, in front of the chest). When s/he was ready to interpret, s/he released the hands to produce the target utterance. We decided to start the annotation at the very beginning of the release of the hands.

A third possibility occurred when the interpreter was interpreting a unit of meaning and did not lower her/his hand(s) before interpreting the next unit of meaning. The hands were still raised in this neutral signing space or higher. Therefore, we decided to annotate the very beginning of the first movement of the following sign related to the interpretation of the corresponding source unit of meaning.
We started the annotation process with three tiers, listed in Figure 3: Speaker utterance, IS interpreter processing time, and NGT interpreter processing time.

Then, we added two more tiers: IS interpreter processing time overlap and NGT interpreter processing time overlap. This corresponded to the times where the processing time to render one source utterance was overlapping with the next source utterance, as visualized in Figure 4. In this situation, the speaker had started to utter the unit of meaning
2 but the interpreter had not even started to interpret the unit of meaning 1. Thus, there was an overlap between the processing time of the unit of meaning 1 and the processing time (overlap) of the unit of meaning 2.

**Figure 4**

*Example of Processing Time Overlapping*

Finally, one last tier was added to annotate the false starts of the interpreter. These false starts did not correspond to false starts of the speaker. This tier was related to the processing time tier of the interpreter and was included to identify where a processing time annotation corresponded to a false start.

We identified three types of false starts. The first one was when the interpreter started and stopped immediately, to start again in a different way. The second one was when the interpreter started and froze at the first position and movement of the beginning of a sign, then continued signing the same sign. And the third one was when the interpreter started with one sign, then stopped and crossed the hands again, and restarted in a different way. These false starts were part of the calculation of the average processing time for interpreters as the intention to produce was obvious. Even more, the production had actually started.

For each of the three lectures, we initially wanted to annotate three sections of their presentations, the first 5 minutes, 2.5 minutes in the middle of the speech, and the
last 2.5 minutes. These 10-minute excerpts were chosen because we wanted to have a general overview for each interpreter all along the assignment. However, due to technical issues, we were not able to annotate the end of some interpreting sections. Therefore, we downsized our aim to 7.5 minutes though could not reach it for lecture B which was 6 minutes (see Table 3). During the event, the IS interpreter #1 was working in parallel with the NGT interpreter #2, and the IS interpreter #3 worked with the NGT interpreter #4.

Table 3
Overview of Data Annotation in Minutes

<table>
<thead>
<tr>
<th></th>
<th>Lecture A</th>
<th>Lecture B</th>
<th>Lecture C</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>IS interpreter 1</td>
<td>7 mins 30 secs</td>
<td>6 mins</td>
<td>7 mins 30 secs</td>
<td>21 mins</td>
</tr>
<tr>
<td>NGT interpreter 2</td>
<td>7 mins 30 secs</td>
<td>6 mins</td>
<td>7 mins 30 secs</td>
<td>21 mins</td>
</tr>
<tr>
<td>IS interpreter 3</td>
<td>7 mins 30 secs</td>
<td>10 mins</td>
<td>7 mins 30 secs</td>
<td>25 mins</td>
</tr>
<tr>
<td>NGT interpreter 4</td>
<td>7 mins 30 secs</td>
<td>10 mins</td>
<td>7 mins 30 secs</td>
<td>25 mins</td>
</tr>
</tbody>
</table>

In total, regarding working languages, we have an annotated dataset of 46 minutes for the IS interpreters and 46 minutes for the NGT interpreters.

Data Analysis

Once the selected video footage was annotated, we ended up with 747 points of measurement (368 for the IS interpreters and 379 for the NGT interpreters). Some points of measurement could not be applied to the IS output because some omissions were made by the IS interpreters.

We imported these data to R (R Core Team 2020) to calculate processing times per language and per interpreter, and to compute and visualize our results. In R, we removed extreme values in processing times, which we defined as any value that fell

14 This 10-minute data annotation aim was achieved once for lecture B and IS3 and NGT4 interpreters.
above or below 3 standard deviations of the global mean. This removed seven data points, thus resulting in a final dataset consisting of 740 data points (IS: 363; NGT: 377).

Results

Means and Ranges of Values

At first glance, the results indicate that the two IS interpreters have slightly longer processing times than the two NGT interpreters, with the IS interpreters having a mean processing time of 2891 milliseconds (ms) (SD = 1262; range = 40–6570) versus the NGT interpreters mean processing time of 2162 ms (SD = 1080; range = 78–6510) – see Table 4. However, the difference between the IS and NGT interpreters’ processing times are very small and in need of further statistical analysis. Furthermore, with the limited dataset in this case study, with only two participants for each language, it is also important to interpret the results with care, since the variation observed relates more to the individual interpreters than the languages involved, i.e. IS vs. NGT.

Processing Time Per Interpreter

The results of the means, standard deviations (SD), and ranges of the processing times per language and interpreter are presented in Table 4.

Table 4
Overview of Values of Processing Time in Milliseconds

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
<th>Range</th>
<th>Interpreter</th>
<th>Mean</th>
<th>SD</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>IS</td>
<td>2891</td>
<td>1262</td>
<td>40–6570</td>
<td>IS1</td>
<td>2967</td>
<td>1402</td>
<td>40–6570</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>IS3</td>
<td>2829</td>
<td>1133</td>
<td>40–6487</td>
</tr>
<tr>
<td>NGT</td>
<td>2162</td>
<td>1080</td>
<td>78–6510</td>
<td>NGT2</td>
<td>2558</td>
<td>1211</td>
<td>283–6510</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NGT4</td>
<td>1836</td>
<td>831</td>
<td>78–4380</td>
</tr>
</tbody>
</table>

Looking at Figure 5, it looks as though the processing times for the IS interpreters were longer, which – on average – is true, as shown in Table 4. However, we also noted that there was individual difference between the interpreters, which may be more important than the languages themselves, specifically since interpreter NGT 4 showed
the shortest processing time of the four and the smallest overall range in processing times.

**Figure 5**
*Processing Times per Interpreter*

In our data, we have interpreter processing time durations as well as the duration of the source utterances linked to each interpreted segment – both as values in milliseconds. We transformed these durations to a logarithmic scale and compared them using the `cor.test()` function in R (R Core Team 2020). This test gives us a significant positive correlation between processing time and source utterance duration ($r = .2611843$, $t(738) = 7.3505$, $p^* < .001$) – that is, the processing time for interpreters increased as a function of the length (duration) of the source utterance (Figure 6).
Looking at Figure 6, a similar pattern emerges for both IS and NGT interpreters. We constructed a mixed-effect model (Kuznetsova et al., 2017) to investigate the correlation between processing time and source utterance duration using “interpreter” and “talk” (the specific presentation being interpreted) as random effects. We compared a null model without “language” as variable to a full model including “language” using an ANOVA test. Here, we find that language does not significantly affect processing time ($\chi^2(1) = 3.7693$, $p = 0.0522$). Thus, our tentative finding from this small-scale case study does not support the hypothesis that language (IS vs NGT) has an effect on processing times for interpreters, although we find that across languages, processing times are positively correlated with the duration of the source utterance.

**Qualitative Observation**

This process-oriented study is quantitative in nature and does not aim to report extensively on qualitative results. To follow the path of Cokely (1986) and McKee and Napier (2002), we hope to qualitatively analyze the potential correlation between the processing time and the quality of interpreting, in the future. As a first step, we observed one specific qualitative fact: a couple of false starts by the NGT and IS interpreters worth
reporting. Some false starts by the NGT interpreters particularly drew our attention. Sometimes, the NGT interpreter would start and then pause and start again. The moment the NGT interpreter started again corresponded to the moment when the parallel working IS interpreter started for the first time, within a few microseconds. The reverse, namely the IS interpreter producing false starts and starting again at the same time as the NGT interpreter, was not observed within the annotated data. However, McKee & Napier (2002) observed in their dataset that the false starts of the IS interpreters corresponded to the “point when they would normally begin their interpretation if working into their national SL.”

All this said, our observation could thus be interpreted as if the NGT interpreters may have rushed to produce a target text when they could have waited longer, at least as long as the parallel IS interpreter. This actually happened when they decided to stop and restart interpreting at the moment the IS interpreter commenced.

We do not think that the work of the IS interpreters influenced the work of the NGT interpreters or that they wanted to deliver the information in a time-alignment with the IS interpreters. Moreover, the interpreters did not mention if they wanted to be time-aligned with other interpreters working in parallel.

Even if this case study did not find a significant difference between IS and NGT interpreters’ processing times, this preliminary qualitative observation corroborates the findings from McKee & Napier (2002) about the fact that IS interpreters “tackle a larger chunk of text in order to maximize contextual information and completeness of the message” (p. 43). National SL interpreters could do so too. Again, this preliminary observation calls for more research and could lead to findings IS interpreters’ strategies that could benefit national SL interpreters, as suggested by McKee and Napier (2002).

**Discussion and Future Directions**

In conclusion, this case study shows how the processing time used by IS and NGT interpreters aligns with the processing time of spoken language interpreters. The mean values of interpreting processing times found in this study were between 1.8 and 2.9 seconds, similar to the 2 and 5 seconds for spoken language interpreting. However, the processing times of the IS interpreters’ in this study do not align with the very high values reported in the earlier study by McKee & Napier (2002). In our case study, although it
seemed superficial that the two IS interpreters had longer processing times than the NGT interpreters when interpreting the same discourse, the differences were between individuals and not language pairs.

There were several limitations to this study. The setting was unusual and the task of English to NGT interpreting was also challenging, as this was not the common working language combination of the two NGT interpreter participants. We might assume that the task was more cognitively demanding than usual. In addition, the two IS interpreters targeted one single deaf attendee while previous studies included a more numerous and wider audience. Here, we might assume that this made the task less cognitively demanding than when targeting different deaf attendees from different countries. Still, even in this context, the processing time was longer for the two IS interpreters. Other contexts could have led to even larger differences. Also, this study only looked at four interpreters. This necessitates looking at larger numbers of interpreters but also at larger numbers of data points within more different interpreting situations including a more diverse deaf audience.

Another limitation of this study is that the practice of IS interpreting is always changing and interpreters continue to adapt to their audience(s). Back in 1995, according to McKee and Napier’s (2002) data and in 2008 according to Rosenstock’s study, IS interpreting was even less common, and so the language options IS interpreters had may have been less conventionalized than now. The work of interpreting concepts into IS where there was less shared practice and less conventionalized language may have been more cognitively demanding, leading to an extended processing time. Nowadays, some recurrent signs have been spotted by Whynot (2016) which may lead to less effort to provide the corresponding target utterance in IS. Plus, this study’s IS interpreters may have been particularly skilled as they both have long years of experience.

Acknowledgement
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Treasuring our Roots: Centering deaf situated knowledges in the signed language interpreting profession

Naomi Sheneman
Octavian E. Robinson

Abstract

We reflect upon present day challenges centered on the notion of “nothing about us without us” motto of the disability rights movement (Charlton, 2000). During the groundswell of the minority rights revolution of the latter 20th century, deaf and non-deaf members of deaf communities capitalized upon the moment to come together to establish professional signed language interpreting organizations. As we honor those roots of professionalization, we are at a critical juncture in the progression of deaf people’s linguistic rights as a sociolinguistic minority and as a disabled population (Hall, Holcomb & Elliott, 2016; De Meulder, 2017; De Meulder & Murray, 2017). We currently confront attacks on the landmark 1990 Americans with Disabilities Act (ADA) in the United States (Americans with Disabilities Act, 1990) and the 2006 United Nations’ Convention on the Rights of Persons with Disabilities (CRPD) (United Nations, 2006). Continued resistance toward and efforts to secure linguistic rights for deaf people via signed language interpreting and linguistic access urges us to consider how deaf communities and signed language interpreters can work together to secure those rights for deaf people.

Fundamental to those efforts is a careful consideration of the place of deaf people in developing critical theoretical frameworks, applied research, and ethical best practices in signed language interpreting. Using the standpoint theory, we apply a critical disability lens to theorize about unequal power relations between deaf and non-deaf people in signed language interpreting. We explore how we can center and gain from deaf people’s perspectives to advance theoretical and practical applications in signed language interpreting.

Introduction

The signed language interpreting profession, particularly in research and theoretical development, does not sufficiently incorporate deaf people’s lived experiences and knowledge (Bryant, 2017; Forestal, 2015a, 2015b; Galloway & Gibbons, 2019; Hall, Holcomb, & Elliott, 2016; Stratiy, 2005; Wilson, 2011). While much of our discussion centers on practices in the United States, we hope the larger points about structural and systemic ableism, marginalization of deaf people in interpreting, and opportunities for improvement are beneficial across borders.

This exclusion of situated knowledges is a consequence of dominant ideas about the production and validity of knowledges. Standpoint theory (Haraway 2004; 1988) challenges those ideas, arguing that knowledge and authority can come from a person’s lived experience as well as their social and political positions. Central within the body of
standpoint theory is Haraway’s (2004; 1988) concept of situated knowledges. Haraway (1988) argued that the inclusion of situated knowledges had many benefits for science, challenging scientific objectivity as a false impartiality that only serves to hide and reinforce dominant hegemonies. Dominant hegemonies, like whiteness and masculinity, are unmarked but very much present in scholarship and knowledge production. To pretend that research and education is inherently objective is to perform what Haraway (1988) calls the god trick, the erasure of inherent subjectivities that all scholars bring to their work. The functional assumptions about scientific objectivity and knowledge production results in the dismissal of knowledges from non-dominant positions as invalid and subjective. Rejecting false impartiality, Haraway (2004; 1998) recommended situated knowledges as a method for producing knowledge based on lived experience from particular social and political locations while interrogating the power relations involved in knowledge production. This type of knowledge is valuable because it produces a more nuanced, critical, and deeper understanding of the questions at hand.

Deaf people possess situated knowledges that can enrich the signed language interpretation profession. Little of those knowledges emerge in the literature in signed language interpreting. Burke’s (2017) points to one possible explanation:

One of the challenges in writing an academic paper that relies heavily on sociocultural knowledge that is commonplace within the signing Deaf community, but not well known or well documented in the culturally Hearing academic community is managing the practice of citations of common knowledge. Information that is commonplace in the Hearing world does not require a citation; information that is commonplace in nonmainstream communities does. (Burke, 2017: 295)

Deaf people confront traditional barriers to the academy as a result of systemic ableism, audism, and linguicism. Deaf people’s knowledges are shared across deaf communities/networks as stories, jokes, and venting sessions. When those knowledges are transmitted into scholarly or professional spaces in signed language interpreting, this knowledge is dismissed as subjective because of the absence of scholarly citations, claims of uncommon knowledge, and filtration through the hegemonies of the academy dominated by abled white people.
We offer an example of the dismissal of situated knowledges, which happened at a Minnesota town hall meeting in 2019. The town hall meeting hosted Howard Rosenblum, the president of the National Association of the Deaf (NAD) in the United States and stakeholders, in a conversation about licensure for sign language interpreters. The town hall was recorded and uploaded to YouTube for the public. The town hall was called because a deaf man, Sonny Wasilowski, proposed a statewide signed language interpreter licensure bill, which upset professional interpreters. After being criticized by non-deaf interpreters, including one interpreter who angrily said it was wrong of him not to consult with interpreters, Wasilowski took to the stage. He lamented, “I am sorry. I am tired of being a second-class citizen. I must ask [interpreters] for permission,” (MRID Update, 2019, Timestamp 3:32:19). An allusion to Susan Dupor’s famous painting, *The Family Dog* (1991), WASilowski invoked the feeling of being the family pet; to sit in the corner [and mind our place]. Some interpreters at this town hall claimed that deaf consumers should not be included in licensure efforts, asserting that deaf people did not know enough about interpreting. Those statements neglected deaf people’s lived experience as consumers, as language teachers and coaches, disability cultural competence experts, and disability rights activists. Those statements neglected deaf people’s contributions to knowledge production about signed language interpretation, which is not a new phenomenon (Galloway & Gibbons, 2019; Robinson & Henner, 2017).

Insufficient integration of deaf people’s situated knowledges is a result of the academization and professionalization of signed language interpretation. Prior to its professionalization, deaf people were central in the development and quality assurance of signed language interpreters (Cokely, 2005; Fant, 1990; Forestal, 2015b; Kent, 2007; Wilson, 2011). Deaf communities “grew” their own interpreters. Some of them were children or siblings of deaf people; others were visitors cum settlers in deaf worlds who learned signed languages, perhaps worked with deaf people as clergy or educators, and volunteered their services as interpreters when needed (Cokely, 2005; Fant, 1990). In the 1960s, deaf people and signed language interpreters collaborated in the United States to

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15 Town hall meeting is a phrase used in North America discourse to describe community-wide meetings with community leaders and key stakeholders.
establish a national professional organization for signed language interpreters during the ascent of the disability rights movement (Quigley & Youngs, 1965). In subsequent decades, as interpreter education programs proliferated in the United States, deaf people found themselves sidelined in interpreting research as well as teaching, training, and screening of interpreters; their influence on interpreting practices diminished (Cokely, 2005; Forestal, 2015b; Kent, 2007; Wilson, 2011). Wilson (2011), a Deaf-parented non-deaf interpreter in the United States, described how deaf people once served as gatekeepers, which allowed deaf people to vet interpreters. Wilson (2011) claims that the professionalization of interpreting “bypassed” the deaf world’s gatekeeping channels. Bryant (2017) describes this phenomenon as credentialing by hearing proxy in which non-deaf people assume the power of speaking for/on behalf of deaf people.

Centering deaf people’s knowledge and active participation in research, education, and professional practice offers significant interventions for improving the interpreting profession. As professionalization of interpreting shifted the site of interpreter education from communities to the academy (Cokely, 2005), we interrogate the academic institution as a critical site of marginalization of deaf people. Deaf people offer not only linguistic modeling and instruction in the classroom, they offer opportunities for non-deaf people to develop disability cultural competence (Robinson & Henner, 2018). Disability cultural competence was conceptualized by disability studies scholar Garland-Thomson (2017) as a response to Garden’s (2009) cultural humility, incorporating a critical disability lens. Disability cultural competence is the fundamental notion that an individual understands how to respectfully navigate relationships with disabled people, respecting disabled people as the authorities on living with said disability (Garland-Thomson, 2017). This lived experience in adapting to the world as disabled people leads to disability cultural competence. Conversely, abled people do not have lived experiences as disabled people and have not fully developed disability cultural competence (Garland-Thomson, 2017). Therefore, abled people should follow the lead of disabled people (Garland-Thomson, 2017). However, there is much resistance to disabled situated knowledges because our society privileges dominant knowledges. Henner (2020) illustrated this point in his Twitter post, “Interpreters don’t want to hear from the people they assume they have power over. They want to hear from other hearing interpreters,” (May 3, 2020). Not only do interpreters
ignore deaf people’s situated knowledges, they are uncomfortable with being confronted with such knowledges (see Robinson, Sheneman, & Henner, this volume). Additionally, it is not unusual for interpreters to become the spokespeople for deaf people (Levitzke-Gray, 2020). Non-deaf people best develop such disability cultural competence by engaging with and elevating deaf people’s situated knowledges through both scholarly query and cultural narratives beyond signed language instruction (Robinson & Henner, 2018). Following the World Association of Sign Language Interpreters’ (WASLI) 2019 conference theme, “Honouring the Past, Treasuring the Present, Shaping the Future”, in what follows we offer retrospection, reflection, and illustrate some prospects for a more inclusive future.

**Background Information**

Deaf scholars define deaf epistemologies as a collection of experiences and situated knowledge that non-deaf people do not have (Padden & Humphries, 1988; Robinson & Henner, 2017; Rosen, 2008). This knowledge is typically transmitted through deaf discourses such as storytelling, folklore, histories, and artistic expression (Bahan, 2006; Coleman & Jankowski, 1994; Holcomb, 2013, 2010; Radner & Carmel, 1981). Storytelling plays a significant role in deaf people’s understanding of their place in the world and shapes how they, in turn, parlay that understanding to non-deaf people. Deaf people commonly use stories as a device to share information about their values, needs, desires, and ideas (Peters, 2000). One such example concerns a story regarding deaf people’s values in the practice of signed language interpreting. A deaf person recounted a story where they believed an interpreter was unprofessional because they would not pass a cup to the deaf person across the table during an interpreted meal. This may be easily dismissed as complaining. Instead, we suggest this story reveals important information about deaf people’s values in signed language interpretation. For one, this account highlights a fallacy of the conduit model of interpreting (Roy, 1993) which implies that interpreters are invisible demonstrating no actions beyond that of interpreting; thus, passing the cup was not part of the interpreting task. While this may not fall in the realm of “allyship,” this scenario suggests we need to do further research on what it means to the deaf person to have the interpreter deal with non-interpreting tasks such as passing of the cup. The role-space framework as proposed by Llewellyn-Jones and Lee (2013)
may be of interest as we further explore how deaf consumers want interpreters to align with deaf consumers that goes beyond the task of interpreting.

As Haraway (2004) argued, marginalized people’s situated knowledge is often dismissed by those in positions of power. In a similar vein, the authors have observed in various situations that the value of such stories or how they are deployed as tools to educate non-deaf people is also dismissed by non-deaf signed language interpreters who express that stories have no relevance, are not academic enough, nor objective. The ability to excavate such meaning is typically developed in a liberal-arts education curriculum where students are taught to read and think critically and interpret meaning in the text. The ability to care about such meaning, however, is developed through disability cultural competence. Much critical knowledge and insights are often erased by dismissive attitudes claiming that deaf people are non-experts, non-professionals, non-interpreters (Galloway & Gibbons, 2019; Hall, Holcomb, and Elliott, 2016; MRID Update, 2019). At a town hall meeting in Minnesota on interpreter licensure as mentioned earlier in this paper, an interpreter proclaimed that deaf consumers should not be involved in the licensure process because they are not interpreting professionals and because “many consumers tend not to understand what interpreting means,” (MRID Update, 2019, Timestamp 3:02:45) serves as a glaring example of the perception that deaf consumers are only consumers (Galloway & Gibbons, 2019). The systemic belief that situated knowledges have no relevance or place in objective research, education, or professional discourses is a consequence of professionalization (Chapman & Withers, 2019; Kent, 2007). Ableism and the helping nature often inherent in-service professions exacerbates the marginalization of deaf people. As Hauser, O’Hearn, McKee, Steider & Thew (2010) emphasized, “Society is made up primarily of hearing individuals who define how deaf people are to live, express or inhibit their capabilities, and experience their bodies,” (p. 490). In this, deaf situated knowledges are suppressed, filtered through abled and non-deaf understandings of how deaf people experience interpreting.

In a pushback against those attitudes, Stratiy (2005), a deaf educator, argued it would benefit interpreters to engage with deaf communities to better understand effective communication and interpretation practices while recognizing the impact of their decisions on deaf consumers. Deaf people, as consumers of interpreting services, can offer
valuable insights. The Chief Executive Officer of the National Association of the Deaf (NAD) in the United States, Howard Rosenblum, encourages the inclusion of deaf consumers in feedback processes for the interpreting profession. The deciding factor for Rosenblum is the politics of signed language as the language of deaf people (MRID Update, 2019). Beyond language, the question is about deaf people’s access to social and political spheres. Who understands this access better than a deaf person?

Some arguments against the inclusion of situated knowledges involve the complexities of the deaf communities. Deaf communities are diverse and composed of individuals with a wide range of experiences. While a single person would constitute tokenism, and while studies may not capture the entirety of the diversity of perspectives and experiences of deaf communities, this complexity is no excuse to simply walk away from deaf situated knowledges while reifying the unmarked non-deaf white gaze in signed language interpretation practice and research.

Researchers have a duty to engage with communities being researched (Boyer, 1996; MacDonald, 2012; McKee, Thew, Starr, Kushalnagar, Reid, Graybill, Velasquez & Pearson, 2012; Van de Ven, 2007). Another ethical consideration is to ensure deaf-centered research practices (Robinson & Henner, 2017; Singleton, Jones & Hanumantha, 2012) when non-deaf research practices are centered, we must challenge this god trick of disappearing subjectivity (Harris, Holmes & Mertens, 2009). Deaf-centered research practices informs deaf-centered pedagogical practices in signed language interpreter education, which in turn ideally produces deaf-centered signed language interpreters. McDermid (2009) offered a similar argument expressing concern that if deaf-centered pedagogical practices are not adopted, then interpreting students will continue to view deaf people as subalterns just like their interpreter educators did. Signed language interpreter practitioners and organizations should also adopt the same considerations for professional conferences and professional development opportunities in centering and embracing deaf situated knowledges. If elite non-deaf interpreter educators and researchers are often sought after to give presentations and workshops, opportunities are not being made to support prospective deaf interpreter educators and researchers to elevate deaf situated knowledges.
Due to social attitudes about ability, disablism, and the helping professions (see Robinson, Sheneman & Henner in this volume), signed language interpreting pedagogy, research, legal expertise, certification/assessment, service provision, and ongoing professional development is reported as dominated by non-deaf signed language interpreters as a direct consequence of professionalization (Chapman & Withers, 2019; Galloway & Gibbons, 2019; Kent, 2007). A study by Galloway and Gibbons (2019) found systemic, structural, and institutional barriers in where deaf faculty, staff, and students in interpreter education programs in the United States were often ignored and disregarded. Their subjects described dealing with frequent microaggressions, which is no small thing as Kendi (2018) explains in *How to be Anti-Racist*:

> A persistent daily low hum of racist abuse is not minor. I use the term ‘abuse’ because aggression is not as exacting a term. Abuse accurately describes the action and its effects on people: distress, anger, worry, depression, anxiety, pain, fatigue, and suicide,” (p. 47).

Similarly, deaf teachers in McDermid’s (2009) study in Canada reported they experienced oppression from non-deaf faculty. Furthermore, a two-tiered system exists in interpreter education programs where interpreting faculty occupy higher status, e.g. tenure-track versus non-tenure-track status, in contrast to signed language faculty (McDermid, 2009; Robinson & Henner, 2018). The ableist dynamics of higher education itself, attitudes toward signed languages (Robinson & Henner, 2018), and the nature of separating faculty into either interpreting or signed language teaching specialist roles complicate problems of hierarchy, institutional power, and validity of knowledges. One such means of reinforcing this hierarchy of non-deaf dominance in interpreter education programs is the Commission on Collegiate Interpreter Education’s (CCIE) requirements for program directors/chairs to be certified interpreters and for directors/chairs to furnish curriculum vitae outlining their experience, credentials, and qualifications in interpreting (CCIE, 2018). This requirement means only deaf faculty members who hold interpreting certification would be considered to be department chair. The number of certified hearing interpreters far exceeds the number of certified Deaf interpreters. This does not view deaf language teachers who are not certified interpreters as equal partners in the development of novice interpreters in instilling in them language, culture, disability cultural competence,
or critical thinking skills that accompanies an undergraduate liberal arts education. Nor does this take a holistic view of interpreter education that values the humanistic aspects of interpretation.

The lack of holistic representation of deaf people and systemic marginalization of deaf people, fueled by ableism- structural, systemic, and individual, centers non-deaf people in interpreting education while gatekeeping deaf people from entry or advancement. However, Galloway and Gibbons’ (2019) study revealed a small hope. Non-deaf interpreting students who had deaf interpreting teachers joined deaf people in their desire to have deaf-centered programs (Galloway & Gibbons, 2019). We should be questioning whether sufficient efforts are being made to actively recruit deaf students in interpreter education and interpreting studies programs at all levels (associate, bachelors, masters, and doctorate). One step to such recruitment is to have more representation on the faculty, namely deaf people in lecturer and tenure-line positions teaching interpreting courses and upper-level courses, not confined to teaching language courses.

A dominant model of interpreter education programs for both spoken and signed language is that the teachers must be interpreters. This is problematic considering the interdisciplinarity and transdisciplinarity of interpreting studies. Pöchhacker (2004), a spoken language interpreter researcher and an interpreter, describes interpreting studies as interdisciplinary which was reaffirmed by non-deaf signed language interpreter scholars, Roy, Brunson, and Stone (2019) including their suggestion that interpreting studies be transdisciplinary. Thus, we challenge the ongoing premise that only interpreter practitioners can teach in interpreter education programs. This can be accomplished by engaging with deaf educators and researchers in other disciplines to teach interpreting courses. Diverse deaf individuals should be invited to teach interpreting students as they offer valuable lessons from their own situated knowledges (Galloway & Gibbons, 2019).

Since signed language interpreter education is interdisciplinary/transdisciplinary, non-deaf scholars from a variety of disciplines continue to be recruited to teach in interpreter education programs. Why not recruit deaf scholars? Additionally, programs incorporate scholarly publications that are rife with non-deaf contributors. Recently published textbooks in signed language interpreting targeted at interpreter education programs do not have deaf contributors. An absence of literature and exclusionary
citational practices is a rejection of deaf people’s situated knowledges. Editors and authors of such collections have the responsibility to make the publication process accessible to deaf contributors. Recruiting one person and giving up on them in the process does not suffice. Recruiting and retaining one person also does not suffice. This is tokenism as deaf people are diverse in their perspectives and interpretations of data. Deaf researchers across different disciplines are not being sufficiently enlisted for teaching, research, or publication opportunities within the interpreting field.

One significant step in bringing more deaf voices to this profession was the publication of an anthology edited by Holcomb and Smith, *Deaf Eyes on Interpreting* (2018) consisting of contributions from various deaf authors. In the introduction of this book Holcomb and Smith (2018) argued that publications rarely include the deaf perspective: "There is a growing body of literature related to ASL/English interpreting. However, there is very little published that presents the views of Deaf people as they revolve around interpreting." (p. xv). While the efforts in putting together this volume is commendable, it still was filtered by non-deaf interpreters. Holcomb and Smith (2018) expressed that there were concerns about non-deaf people responding negatively to deaf people’s unfiltered situated knowledges. The need for this filtering urges the question of whether deaf people will ever have a platform to be radically transparent without obtaining the approval of non-deaf people or incurring their defensive responses.

The exclusion of deaf situated knowledges in interpretation research and education has negative implications for the signed language interpreting profession. The exclusion of a critical lens in interrogating power relations of ability results in interpreter practitioners and researchers who reproduce dominant knowledge structures and structural oppression of deaf people. The remedy calls for deaf people to have a larger role in interpreting education, research, and practices. Centering deaf situated knowledges by centering deaf researchers, consumers, and educators is to embody the spirit of disability rights activism, “nothing about us without us.”

Forestal (2015) asserted that due to the lack of input from deaf people, the profession has been redefined over the years based on the experiences of non-deaf interpreters which influence novice interpreters to adopt practices that are not deaf-centered. Almost 30 years ago, Fant (1990) presented the same argument: “Academic
knowledge can go only so far in its preparation of interpreters, the deaf community must assist in supplying the vital ingredient of experience,” (p. 76). Although not explicit, the ableist nature of the academy as referenced by Fant suggests signed language interpreters’ academic knowledge is governed by non-deaf people as well as the educated elite among deaf people who were able to obtain employment as signed language teachers and/or interpreter educators. The educated elite, typically white, middle-class, and possessing dominant language literacy, represents a very small sliver of overall deaf situated knowledges in working with access and interpreters.

The shift from deaf communities in recruitment, screening, and education of signed language interpreters to the academy and interpreting professional organizations resulted in minimizing deaf consumers’ views on both the macro and micro levels (Kent, 2007). On the one hand, the establishment of the RID meant that signed language interpreting, as access work, was being taken seriously as skilled labor. This also meant that deaf people’s inclusion in society, through qualified interpreters, mattered. On the other hand, deaf people had limited voice in the RID from its very beginning. The founding charter of the RID relegated deaf individuals, including Deaf interpreters, to non-voting member status and immediately established limits on the growth of the non-voting section (Fant, 1990). This section could not grow in numbers since members were only replaced by existing members when one died or left the organization (Fant, 1990). This established deaf members, including those who worked as interpreters, as unequal partners in the organization. This set the tone for deaf people’s involvement in the RID. Forestal (2015), a deaf interpreter and researcher, remarked that a small number of deaf people are involved with RID. This low participation limited deaf people’s voice in the interpreting profession: “this is a classic example of exclusion and marginalization of Deaf people in this vital organization that had tremendous impact on the growth and development of the interpreting profession,” (p. 7). Those debates over inclusion of deaf community members are infused with claims that deaf people do not know or understand interpreting while neglecting the value of deaf lived knowledges and experiences (see MRID Update, 2019 as an example).
The Present

The present is impacted by past decisions and actions that excluded deaf voices in every arena of the profession from learning, teaching, publication, research as subjects and collaborators, and organizational leadership, and silencing of voices through the weaponization of emotion. We pose the following questions for your consideration and reflection. We invite you to engage in dialogues and research within your countries as you collectively consider responses to those questions.

In your country/region, what is the level of involvement of deaf people in various aspects of signed language interpreting profession: screening/evaluation, education, research, practice, and professional activities?

- Reflecting upon theoretical frameworks, interpreting models, ethical decision-making framework, curricular development and updates and publications about the signed language interpreting profession, were/are deaf people consulted? Why/why not? How much?
- How many deaf people in your country teach interpreting courses (not counting signed language courses)?
- What is the language of instruction for interpreting courses?
- How many deaf individuals serve as leaders in interpreter education programs?
- Are meetings that include at least one deaf individual conducted in spoken or signed language?
- How many interpreting services referral/coordination agencies are owned/run by deaf people?
- Do signed language interpreting professional organizations invite/include deaf people who are not deaf interpreters?
- What solutions might you suggest to your country to incorporate practices that center deaf situated knowledges?
- What can we learn from other countries that have different experiences?

The Future

There is a popular saying, “History informs the present and shapes the future,” that is relevant in this context. We hope that the discussion of the questions in the previous
section will shape the future that pivots to a more deaf-centered signed language interpreting profession. Centering deaf situated knowledges can make numerous significant contributions to this profession. In this part, we highlight some of those potential contributions.

- The incorporation of deaf people in this profession offers stronger language models to promote better quality interpreting services. Non-deaf interpreter educators' express discomfort in teaching interpreting courses using signed language as discussed in Ehrlich and Wessling’s (2017) presentation.
- Interpreters can learn about deaf people’s situated knowledges through their narratives.
- Deaf people can support interpreters (deaf interpreters as well) in making conceptually accurate interpretation/translation decisions.
- Deaf perspectives in ethical-decision making have potential to shift how we respond to ethical dilemmas.
- Interactions with deaf people can shape interpreters’ attitudes.
- Interpreters benefit from ongoing feedback to improve quality interpreting services. Feedback from deaf people should be construed as a gift (Hall, 2018).
- Inclusion of deaf people can lead to more deaf-centered practices in teaching, research, and coordination of services.
- Deaf people, including those of various marginalized groups, can support non-deaf interpreters in deeper examination of their privileges and work towards minimization of microaggressions against them and dismantle ableism, audism, phonocentrism, and linguicism along with other structural oppressions. Additionally, this examination can lead interpreters to become increasingly aware of power imbalances within interpreted situations.
- Deaf people’s involvement in interpreter education programs can influence deaf-centered curricular development and updates.
- Deaf people can offer input in shaping the research agenda of this profession.

Keep in mind that this list is not exhaustive and there are many more benefits to consider.
Conclusion

Central to our success in advancing the field as both academic endeavor and as vocation is to return to our historical roots in deaf situated knowledges. In recent years, deaf people have become increasingly vocal about offering their knowledge to the field only to be ignored and accused of being uncivil or labeled as “angry deaf people,” (Suggs, 2012). We aim for a future where deaf communities and the signed language interpreting profession are equally engaged partners and co-collaborators as practitioners, researchers, and educators. Deaf people possess lived experiences as deaf individuals, with rich knowledge of their cultural values and norms, the structural violence of ableism, and the wide range of interpreting competencies that affect their lives. Deaf people’s situated knowledges should be embraced by non-deaf interpreter practitioners and educators. This makes engagement and open communication with the community crucial to minimize conflict and resistance (Van de Ven, 2007). As the honorary WASLI president, Debra Russell (2020) recommended in her Twitter post, interpreters should unpack their privileges “while reflecting critically on their choices” (May 3, 2020) as it impacts how deaf people perceive interpreters. To best learn about deaf people’s perspectives of interpreters, the interpreting profession, and interpreting studies is to fully engage with them. Therefore, we posit that signed language interpreting as a profession cannot move forward without deaf people taking active roles in all arenas. After all, we should bring deaf situated knowledges which Fant (1990) described as “vital ingredient of experience” (p. 76) into the textbooks, classrooms, labs, and organizations. Perhaps, then, this profession can embrace disability cultural competence and deaf situated knowledges.

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Interpreting for Physiotherapy: A Classroom Based Perspective

Rachel Mapson
Yvonne Waddell

Abstract

This chapter explores the development of rapport management skills in student interpreters when working in clinical settings. Communication is a vital component of healthcare interactions (Roberts, 2007), functioning both to facilitate exchange of information and to build a relationship between the clinician and patient. However, although the importance of rapport within healthcare interpreting is now recognised (Major, 2013; Schofield & Mapson, 2014; Hsieh & Nicodemus, 2015) there is an indication that interpreters may prioritise information exchange over the language intended to establish rapport (Albl-Mikasa et al., 2015). This tendency may be more prevalent in situations where interpreters lack experience (Mapson, 2015). The project involved a group of physiotherapy students and a group of British Sign Language/English interpreting students working with deaf patient actors who use British Sign Language (BSL). Outcomes reinforce the value of simulated interactions for the learning of both healthcare practitioners and interpreters. Students’ experiences underline the importance of interpreters needing to understand the purpose of the rapport building language used by healthcare practitioners.

The learning experience outlined here involved a group of hearing physiotherapy students from Queen Margaret University and BSL/English interpreting students from Heriot-Watt University in Scotland. This exercise formed part of a pilot project to integrate the learning of healthcare and interpreting students. A major focus of the learning experience was the importance of rapport in intercultural healthcare. This study details the rationale for the initiative before discussing the outcomes of the teaching activity and subsequent group discussions.

There is very little research on the specific field of interpreting in physiotherapy settings. However, interpreting in physiotherapy involves particular challenges with physical positioning for those working to/from a signed language. Research involving students working with actor patients can therefore provide a useful means of observing the challenges of interpreting clinician interaction, whilst simultaneously providing a mutual learning experience for those involved. The experience also generated learning points useful for educators who may wish to replicate this initiative within their own institutions.
Background

This initiative sought to address several problems. The first issue concerns the health inequalities experienced by the British Sign Language (BSL) community in the United Kingdom. Their experience of healthcare is significantly worse when compared with that of the majority hearing population. A recent report on deaf people’s health issues, Sign Health’s ‘Sick of It Report’ (2014), exposes the detail of these inequalities and the serious disadvantages experienced by the deaf community. For example, it is far more likely that doctors fail to diagnose serious health conditions in deaf people. These undiagnosed conditions include high blood pressure and pre-diabetic symptoms, which can lead to life-threatening illness. The research additionally indicates that even when deaf people have a condition diagnosed, they are far less likely to have that condition under control or be receiving treatment for it, in comparison with hearing patients. In fact, many of the participants in the 2014 study were identified as having conditions of which they were previously unaware.

A second problem addressed by the project is the lack of confidence and experience that hearing clinicians have when working with Deaf people and interpreters. Professional education for healthcare professionals does not typically include training on deaf awareness, working cross culturally or working with an interpreter (Chovaz 2013). Furthermore, where studies cover these topics, it is often on an ad hoc basis, and not a mandatory part of the curriculum. The lack of experience of working with interpreters is known to prove challenging for clinicians (Schofield & Mapson, 2014) particularly for those new to their clinical professions. Embedding appropriate experiences within healthcare practitioner training is therefore a step towards ensuring that these professionals are well equipped to approach interpreted interactions with more confidence in their future work.

The final problem relates to student interpreters. For them, gaining first-hand experience of interpreting in these kinds of settings is a challenge. In Scotland, interpreting students have not been allowed to undertake medical bookings until they hold registration with the professional body, making realistic experience of healthcare work during their training problematic. This is exacerbated by the difficulties experienced in arranging suitable observation opportunities of genuine interpreted
interaction in medical contexts as this requires the permission of all participants in the healthcare interaction. Student interpreters are therefore rarely able to observe genuine interpreted healthcare interactions. It is therefore unsurprising that student interpreters lack confidence and experience of this type of work. However, this is problematic because once eligible for registration on graduation, healthcare appointments are likely to be a significant element of the range of work they are likely to undertake.

This chapter focuses in particular on interpreting in physiotherapy. Although physiotherapy is an area of clinical practice in which signed language interpreters work, there is very little research on this specific field. This is partly due to the complexity of obtaining ethical approval for any interpreting research involving patients as the experience of Crezee (2013) and Major (2015) exemplify.

**Healthcare Communication**

Communication is a vital component of healthcare interactions, and often said to be the most important aspect of practice that health professionals have to master (Roberts, 2007). Communication can be considered to have two key purposes: to exchange information, and to build a relationship between interlocutors (Roberts & Bucksey, 2007).

The first of these functions is to enable information exchange. Clinicians must be able to inform their patients and impart information to them, but crucially, patients must be able to convey information to the clinician. A clinician’s accurate diagnosis relies on patients being able to talk about their experience, their symptoms and how they impact their daily life. Bi-directional information exchange is therefore an essential element of clinical communication.

The second function of communication is relationship building. Communication helps the development of rapport between the clinician and the patient. Patients are far more likely to share information about their condition with their clinician if they feel they have a good rapport with them (Roberts & Bucksey, 2007). Therefore, rapport building is critical because it actively helps to promote the exchange of information.

**Rapport in Healthcare**

There is a wealth of literature that evidences the importance of the rapport building function of communication in monolingual healthcare settings. When there is a
positive rapport between clinicians and patients this leads to greater patient satisfaction and improved health outcomes in general (Bultman & Svarstad, 2000; Clarkson, 2003; Dieppe et al., 2002; DiMatteo, 2004; Ong et al., 1995; Schofield & Butow, 2004), including physiotherapy patients (Roberts & Bucksey, 2007).

When the clinician and patient have good rapport, this improves patient knowledge and understanding about their condition. Patient compliance is also improved, since it is likely to improve the way the patient follows instructions around treatment or prevention (Bultman & Svarstad, 2000; DiMatteo, 2004). This might relate to following prescription for taking medication, performing physiotherapy exercises, or following dietary advice. In turn this leads to greater patient satisfaction with their treatment. All these factors add up to better health outcomes for the patient and in the case of physiotherapy, it leads to greater effectiveness of the treatments provided.

The importance of good rapport between clinician and patient in intercultural interactions has also been recognised in translation and interpreting research (Albl-Mikasa et al., 2015; Hsieh & Nicodemus, 2015; Major 2013; Schofield & Mapson 2014). However, other studies indicate that in interpreter mediated healthcare interactions, interpreters' focus on the rapport element of communication is often overlooked. This is particularly the case for novice interpreters, although there is evidence that similar issues may apply to more experienced interpreters when working in new or unfamiliar settings (Mapson, 2015). In these situations, whether the interpreters are newly qualified, or the setting is new to the interpreter, interpreters tend to focus predominantly on information exchange (Albl-Mikasa & Hohenstein, 2017; Mapson, 2015).

As good rapport is essential to promote the effectiveness of treatment and promote positive health outcomes, it is therefore critical that this feature of the interaction is accurately relayed by the interpreter in the healthcare setting. If signed language interpreters fail to focus on rapport in the same ways as clinicians, the goals and intentions of the clinicians are unlikely to be achieved. Interpreters may be inadvertently thwarting the goals of the healthcare setting and in doing so are likely to exacerbate the inequalities typically faced by Deaf patients.
The Gap

For interpreting students, access to realistic situations can be problematic. Observations in medical environments are often difficult to secure and happen rarely. While university courses often attempt to replicate what happens in a medical appointment in simulation activities, these frequently involve students taking turns at the various participant roles. Although valuable in some respects, this situation does not accurately replicate the true dynamics of genuine interpreted medical interaction. A further limitation is that such simulations typically focus on appointments with general practitioners and doctors. This means that students lack exposure to the broader range of healthcare professionals that practicing interpreters are likely to work alongside.

Experienced practitioners will recognise that some of these healthcare contexts generate very specific challenges for signed language interpreting. For example, the challenges are very different when working in opticians and dental surgeries. Physiotherapy also presents challenges in relation to physical positioning and instruction. Exposure to a variety of situations will benefit students as they prepare for the range of healthcare work in which they are likely to engage on graduation.

Method

Participants

Two groups of students were invited to a learning session lasting three hours at Queen Margaret University in Edinburgh. The healthcare students were all post-graduate students on the MSc in Advancing Physiotherapy Practice from Queen Margaret University. These physiotherapy students were all existing practitioners, engaging in further training to advance their practice. They therefore already had experience of professional practice. All were hearing and had no prior knowledge of any signed language, signed language interpreters or deaf patients.

The interpreting students were fourth year students from the undergraduate MA (Hons) British Sign Language (Interpreting, Translating and Applied Language Studies) from Heriot-Watt University. These students were very close to graduation and becoming registered interpreters about to begin their own professional practice. Details about the two student groups are detailed in the table below.
Table 1  
Demographics  

<table>
<thead>
<tr>
<th>Student type</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSL/English Interpreter</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>Physiotherapy</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

The activity also involved three deaf BSL users who acted as patients. Selection of the 'patients' involved convenience sampling and was designed to ensure there was a mix of both male and female participants who were representative of a range of ages, different styles of signing and regional dialects. The fourth 'patient' was a hearing participant fluent in BSL, who stepped in to replace a deaf actor who was unable to attend. The hearing actor wore earplugs during the sessions and did not use their voice at all to ensure the reliance on the interpreter was as realistic as possible.

Table 2  
Actors  

<table>
<thead>
<tr>
<th>Actor</th>
<th>Age range</th>
<th>Sign Dialect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deaf Male</td>
<td>20-30</td>
<td>North Scotland</td>
</tr>
<tr>
<td>Deaf Male</td>
<td>30-40</td>
<td>England/Edinburgh</td>
</tr>
<tr>
<td>Deaf Female</td>
<td>50-65</td>
<td>Glasgow</td>
</tr>
<tr>
<td>Hearing Female</td>
<td>40-50</td>
<td>Scottish/English</td>
</tr>
</tbody>
</table>

Data Generation

Clinical dialogue scenarios were devised in collaboration with the physiotherapy lecturers to ensure they were as realistic as possible. These scenarios were given to the Deaf actors ahead of time to allow them to familiarise themselves with the contents. A brief was given to each physiotherapy student about the 'patient' they were about to meet, whereas the interpreters were not told anything in advance, since it is typical for
interpreters to only know the patient name and time of the appointment before they enter the clinic.

The session was conducted in the physiotherapy teaching space at Queen Margaret University, which is set up in the same way as a typical physiotherapy clinic. There is a waiting area with seating for patients to be collected, and treatment areas with beds curtained off. It was agreed that students were given the same amount of time for the activity as for a typical appointment. Appointments therefore lasted 45 minutes to ensure a situation that was as realistic as possible, whilst also supporting the interpreting students to build up their stamina when interpreting for a longer time. Student interpreters met their ‘patient’ in a waiting area, before the physiotherapist arrived to collect them both, and escort them to the clinical area. The interpreted appointment activity was followed by a group discussion facilitated by lecturers, involving both sets of students reflecting on their learning experience and sharing the challenges involved. A separate discussion with the deaf participants explored their experiences from a patient perspective.

The interpreted physiotherapy interactions were video recorded in addition to observational notes made by the researchers during the session. Discussion data were analysed thematically, while the video recordings of clinical interactions were reviewed to ascertain how rapport-building language was interpreted.

**Outcomes and Discussion**

Preliminary analysis of the learning experience suggests that interpreting students required a deeper understanding of the goals of clinicians, and the purpose of specific forms of questioning. For the physiotherapy students, the discussion revealed an appreciation that interacting via an interpreter created a considerable difference in their ability to establish rapport with their patients. As educators who conducted the session, there were learning points to take into consideration for future teaching of this nature.

**The Clinicians**

Key learning for the physiotherapy students included the changes they needed to make to their professional practice to work in a bilingual, bicultural and bimodal interaction with a Deaf patient and an interpreter. From the first point of contact with the
patient at the waiting area, the physiotherapy students were uncertain who should take the lead with introductions and presented awkwardly due to their unfamiliarity with the situation.

Spatial organisation of the treatment room was also something that was negotiated during the interaction. For example, the physiotherapy students were not used to a sign language interpreter being opposite the patient when interpreting into English. One commented that “there was talking coming from a different direction and it felt weird.” Spatial organization impacted in other ways too. The patient was invited to sit on the bed, as is typical in this situation, but students quickly realised that sight lines were an issue, as the Deaf patient and interpreter require eye contact to communicate. A further discovery for them was that changes to the physical surroundings, such as lowering the bed, could not be made during conversation with the deaf patient as they would with a hearing patient because the patient would be looking at the interpreter. This meant additional time was needed in the appointment to first communicate what the procedure would be, and then by lowering the bed into position.

When taking the patient history, student physiotherapists described the need to chunk information to promote effective communication, and ensure they only asked one question at a time during the session. In the group discussion with the interpreting students that followed, the physiotherapy students started to appreciate the benefits of pacing their spoken language and when to pause. They additionally discovered that often it is not word for word interpretation, but rather the sense and meaning that are interpreted. Understanding how interpreters make translation choices, made clear to the physiotherapy students why pausing after each word is unhelpful.

The physiotherapists also described the need for inter-professional communication and the need for clarification. This meant giving time for the interpretation to be delivered, and being clear on who required the clarification, whether this was a clarification from the interpreter, or the interpreter relaying the patient’s request.

One crucial element specific to physiotherapy involved coordinating instructions between the physiotherapist and the interpreting student. When the patients were asked to demonstrate a movement, or copy an exercise, the deaf person had two points of
reference. They needed both to look at the interpreter for what the physiotherapist was saying, and at the physiotherapist, to see the exercise they were modelling. The video data revealed that negotiation between the interpreter and the physiotherapist involved requests for repetition of the demonstrated movement and/or pausing where the interpreter referred to the clinicians’ movements.

**The Interpreters**

Student interpreters recognised the importance of building rapport with both clients, in addition to facilitating the clients to develop their own rapport. One commented, “it’s a working relationship between us, it’s important that we have rapport too”.

Translating open questions was a particular challenge for the student interpreters and a key focus within the reflective discussion that followed. The nature of specificity in BSL as compared with spoken English (Crawley 2018) means it is often easier to translate a question by providing example answers (Taylor 2002) In many contexts, such as healthcare, this may be seen as asking leading questions, where the interpreter is supplying the answer. For example, students reported the challenge of interpreting ‘pain scales’ where patients were asked to rate their pain on a scale of 0-10 to ensure that an accurate number was relayed to the clinician without providing examples of what that pain might be like. In the time for shared reflection between the students, the physiotherapists explained their aim in asking that question; what interested them most was to understand how the patient perceived their pain, and the impact it was having on their life, rather than the number they ascribed to the pain. Their intention was to allow the patient the space to talk about the pain in their own terms, which the actions of the interpreters might unintentionally inhibit.

This highlighted the need for the student interpreters to understand the goal of the interaction and an appreciation of the physiotherapist’s thought world (Dean & Pollard, 2013) and to factor those into their decision-making processes when interpreting. Understanding how their own language choices might impact on diagnosis and treatment was therefore a key learning point for the interpreters. By understanding the deliberate use of open-ended questions by clinicians to elicit diagnostic information, students were able to appreciate the importance of rapport building, and why it might be
more effective to hold back from giving examples in their interpreted rendition of questions. When a good rapport existed between participants, this meant the patient shared more information. Students also discussed how simple remarks, that they might overlook if they did not consider them to be critical information, presented opportunities to build rapport between the clinician and the deaf patient.

**The Educators**

There were several learning points for the authors as interpreter educators. One key aspect to consider in future was the careful selection of deaf actors. The selection on this occasion was a disadvantage in relation to the reflective discussions. Although the clinical dialogue scenarios progressed well, problems were encountered when discussing how the students’ practice compared with the real life experiences of the deaf actors. At this point it became apparent that most of the deaf actors preferred not to use interpreters for their own health appointments, choosing to communicate directly with the clinician through written notes. This meant they were less able to discuss how the student practice compared with their own experiences, and how the students’ work could be improved. Future iterations of this initiative will therefore involve deaf patients whose personal experiences can usefully feed into the teaching and learning experience.

A more successful strategy was the decision not to give the ‘patients’ a detailed script for the patients to follow during the appointments. Providing just a brief outline, along with some indicative answers, led to people presenting more naturally in the interaction and added to the authenticity of the session for the students.

It was beneficial to allow sufficient time for all parties to discuss the exercise at the end, and to reflect on their learning together as professionals. Both sets of students were able to learn from each other during this discussion, with the interpreting students gaining a much better insight into what the physiotherapists were aiming to achieve in their dialogue with patients. The discussions also allowed students to generate useful group feedback and to share strategies. Further benefit stemmed from the ability to provide individual feedback to students on their practice, which was assisted through video recording the interactions. These recordings can then be reviewed in future class time with the students allowing lecturers to pause at certain points for discussion.
Ensuring students also have access to the recordings allows students to perform their own self-reflection.

**Conclusion**

This initiative provided a valuable experience for both physiotherapy and interpreting students. Both cohorts of students gained confidence, experience, and valuable learning that is directly applicable to their professional practice.

The healthcare students increased their awareness about working with deaf patients who use BSL as their first or preferred language, gained greater confidence in communicating through an interpreter during clinical appointments and an understanding of how the interpreted interaction can impact rapport building. Being familiar with these elements will benefit their future professional practice.

The student interpreters benefited from improved confidence in the logistics involved in interpreting in clinical contexts and a greater understanding of the way healthcare practitioners use language to elicit information and to reassure patients. The experience of interpreting in such a realistic situation helps redress the problems typically experienced by student interpreters in relation to opportunities to observe authentic interactions, thus better preparing them for their future practice.

Overall this type of learning experience reinforces the value of inter-professional training that incorporates interpreting and healthcare students in joint teaching and learning activities. The success of this pilot initiative has led to a drive to embed learning opportunities like this within healthcare programmes at Queen Margaret University on a more formal basis. This exercise has since been replicated with other healthcare students in nursing and speech and language therapy degree programmes, with plans to extend this across the range of healthcare practitioner programmes at the University. The diversity of different professionals trained at Queen Margaret University makes it an ideal place to host this cross-disciplinary work, incorporating use of the campus facilities that include rooms designed to replicate clinics and hospital wards and contain all the relevant healthcare equipment.
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