

# Critical Analysis of Sports Interpreting and Medical Interpreting Performed by Professionals of Other Fields

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## Abstract

Interpreters play an important role in sports and medical interpreting. The development of globalization, immigration, and broadcast technology leads to an increasing demand for interpreters. But interpreting now is still performed by both professional and non-professional interpreters. Therefore, this essay compares the similarities and differences between sports and medical interpreting by non-professional interpreters in terms of interpreting strategies, identity roles, interpretation modes, and influencing factors. This essay also suggests that the low cost, high proficiency in specialized terminology, and a similar level to that of professional interpreters present new challenges for professional interpreters and interpreting pedagogy.

## Keywords

Non-Professional Interpreters, Sports Interpreting, Medical Interpreting

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## 1. Introduction

With the development of globalization, the demand for interpretation in various fields has gradually increased. Contexts where interpreting takes place, include (but are not restricted to) politics, diplomacy, religion, business, tourism, and even war (Antonini, 2015: p. 278). Increased immigration during the past decades has created multiethnic societies in many countries, posing a significant challenge in the healthcare industry and interpreting (Meleis, 1996). The same is true in the sports industry. The international nature of sports competitions and the advancement of broadcasting technology have put higher requirements for sports interpreting. Therefore, facing increased linguistic diversity, many countries tend to address these problems with non-professional interpreters (Ozolins,

2010). According to Ghignoli and Diaz (2015), interpreting now is still performed by both professional interpreters and non-professionals or professionals of other fields who know at least two languages. Therefore, this essay explores the similarities and differences between non-professionals' performance in sports interpreting and medical interpreting, during which the differences between professional and non-professional interpreters will also be included to offer inspiration for improving current interpreting pedagogy.

## 2. Literature Review of Non-Professional Interpreting

Non-professional interpreting refers to the interpretation or linguistic-mediation activities performed by people who receive no formal training in interpreting but know at least two languages (Antonini, 2015: p. 277). Therefore, the identity of non-professional interpreters varies across different scenarios. For example, bilingual staff or family members might perform non-professional medical interpreting, while non-professional sports interpreting can be achieved by journalists, volunteers, and even other athletes (Hsieh, 2015: pp. 178-179). To make a clear comparison between sports and medical interpreting, the "non-professional interpreter" in this essay refers to "professionals of other fields" (Ghignoli & Diaz, 2015: p. 193), which means journalists in sports interpreting and bilingual staff in medical interpreting.

Although non-professional interpreting has existed since the appearance of interpreting activity, research on such a topic remains a relatively new and small subfield in interpreting studies (Antonini, 2015: p. 278; Martínez-Gómez, 2015: p. 205). The primary research areas encompass policies regarding non-professional interpreters across different countries (Antonini, 2015: p. 278), comparisons between the performances of non-professional and professional interpreters (Ghignoli & Diaz, 2015), negative effects brought by non-professional interpreting (Schouten et al., 2012), and research on child interpreters (Orellana, 2009).

There is also literature analyzing why non-professional interpreters are preferred in some cases. From a practical point of view, choosing a non-professional interpreter may be motivated by time pressure, lack of availability, and cost concerns (Hsieh, 2015). The basic tool of interpreting is the command of languages, offering equal opportunities for professionals and non-professionals (Rudvin, 2007). Also, focusing too much on interpreting accuracy and professional ethics such as neutrality and fidelity, professional interpreters tend to neglect their interpersonal role (Angelelli, 2004), which is what non-professional interpreters are good at. What's more, the quality standard of interpretation is also becoming more and more comprehensive, focusing not only on the interpreter's performance but also on the fulfillment of the conversation purpose (Jacobs, Diamond, & Stevak, 2010). The three factors mentioned above may explain why sometimes untrained, non-professional interpreters are preferred.

Of all the contexts in which interpreting takes place, medical interpreting receives the most attention, while relatively little attention has been given to me-

dia, sports, tourism, and conflict interpreting (Antonini, 2015: p. 278). Unlike medical interpreting, whose context is usually the doctor-patient interview, interpretation scenarios in sports interpreting are very complicated. According to Ghignoli and Diaz (2015: p. 200), contexts under sports interpreting include press conferences, sports clinics, post-match interviews, and the match itself. In order to better compare with medical interpreting, this essay will narrow sports interpreting down to post-match interviews. Based on what has been mentioned above, comparing the differences between professional and non-professional interpreters and non-professionals' performance in different contexts plays an essential role in interpreting studies.

### 3. Similarities in Sports Interpreting and Medical Interpreting Performed by Non-Professionals

There are many commonalities in interpreting practice. Downie (2021) criticizes that an over-focus on interpretation settings can easily lead researchers to silo thinking, overlooking the common features in interpretation. Therefore, in this section, I will analyze the similarities between sports and medical interpreting performed by non-professionals from three perspectives.

From a linguistic perspective, like many professional interpreters, non-professional interpreters will use techniques such as summary, omission, and clarification (Downie, 2021: p. 330). Baraldi and Gavioli (2016) present some strategies they often use. Formulation means a summary or development of the gist through "shifting the focus and explicating" (Heritage, 1985: p. 104). Multi-part renditions can be achieved by splitting rendered information into different talking turns (Baraldi, 2012). Non-renditions are "responses to the interlocutors in their own language" (Baraldi & Gavioli, 2016: p. 43). However, their use of interpreting techniques is unconscious compared to that of professionally trained interpreters. Their aim is not to produce an "equivalent text" but to "serve the purposes of the event" (Wadensjö, 1992: p. 148; Downie, 2021: p. 333). Their interpreting standards are variable or even non-existent (Downie, 2021).

From an extralinguistic perspective, non-professional interpreters play a more active role than professional ones in sports and medical interpreting. Ghignoli and Diaz (2015) did an empirical study comparing the performance of journalism and interpreting students when doing sports interpreting. They found that interpreting students focused more on content than discourse style, whereas the opposite was true for journalism students. They also concluded that journalist interpreters tend to add positive conclusive sentences and are willing to be part of the conversation (Ghignoli & Diaz, 2015). The same situation could also be seen in bilingual staff's medical interpretation. According to Hsieh (2015), when they serve their colleagues as interpreters, they tend to bring their medical expertise and institutional role into the interpreting process.

The interpreter's visibility or invisibility has been heatedly debated in interpreting studies. Bartłomiejczyk (2017) points out that invisibility is commonly recommended, and the "conduit model" has been influential in the early stage of

interpreting (Hsieh, 2015: p. 180). However, Angelelli (2004: p. 2) argues that the invisibility of the interpreter is, in fact, an ideal state that could not be achieved. She also identifies five subcomponents of visibility: alignment with the parties, establishing trust between the parties, communicating effects as well as messages, explaining cultural gaps, and establishing communication rules during the conversation (Angelelli, 2004: p. 50). Based on these standards and descriptions in the previous paragraph, journalist interpreters and bilingual medical staff tend to be visible in interpretation. Such “visibility” can be expressed through the third person and non-verbal behaviors. Phelan and Parkman (1995) recommend that professional interpreters use the first person to represent the original speaker. However, non-professional interpreters often habitually use the third person to refer to the speaker, thus changing the conversation from a dyadic structure to a triadic one. Besides, the frequency of non-verbal behaviors such as eye contact, gaze, and nodding also indicates that they subconsciously see themselves as participants in the conversation. Such a situation can be explained by the fact that since they are not professionally trained, they are not well aware of the difference between their role as interpreters in a conversation and as journalists or doctors. Thus, rather than seeing themselves as “neutral, distant mediators”, non-professional interpreters see themselves more as “intercultural mediators” (Downie, 2021: p. 322; Baraldi & Gavioli, 2016: p. 35).

In addition to the similarities in interpreting strategies and identity roles mentioned above, journalism interpreters and bilingual medical interpreters face a similar challenge. Their main jobs are journalists and doctors, not interpreters, so they are not paid extra to interpret (Downie, 2021). As a result, they might struggle to balance their additional workload as interpreters with their primary duties, especially for bilingual medical staff.

#### **4. Differences in Sports Interpreting and Medical Interpreting Performed by Non-Professionals**

The previous section analyzed the similarities between sports interpreting and medical interpreting performed by professionals of other fields from three aspects: interpreting strategies, identity roles, and challenges. However, the common features in these two areas do not mean they are identical. So in this section, I will focus on their differences. According to Antonini (2015), non-professional interpreting has only recently gained recognition, and the focus is mainly on medical interpreting. Relatively little attention has been given to sports interpreting. Therefore, there are few pieces of literature on sports interpreting, which brings a huge challenge for analyzing the differences between sports and medical interpreting.

According to Ghignoli and Diaz (2015), sports interpreting belongs to the subcategory of media interpreting. It can be further divided into two types based on whether the viewers can see the interpreter. With the development of technologies, media interpreters speak to varied audiences that are very large in numbers, and their performances might be recorded and even compared with

the original (Kurz, 1995). Pöchhacker (2011) suggests that such features in media require a high level of expertise, and “the interpretation quality is even considerably higher than conference interpreting” (Pöchhacker, 1995: p. 207). Holly (1995: p. 342) also argues that the large audience will make the interpreter’s decision-making process complex since it’s hard for the interpreter to provide an informative and comprehensible interpretation for different audiences at the same time. Based on what has been mentioned above, we can draw the first difference between sports and medical interpreting. Compared with medical interpreting, which is always on private occasions, sports interpreting entails a much bigger exposure in case of failure. Therefore, sports interpreters face much more stress than medical interpreters.

O’Keefe (2006) states that the dyadic speaker-hearer model is prevalent in medical interpreting. However, the sports interpreting model is far more complicated. The main reason for its inadequacy is its “inability to account for the different types of hearers of media” (Ghignoli & Diaz, 2015: p. 197). Goffman’s participation framework could further explain it. Specifically speaking, Goffman categorizes listeners into ratified and unratified listeners and further divides ratified listeners into addressed and unaddressed listeners (Goffman, 1979: pp. 8-9). Ratified listeners mean the hearers get official status in the communication process. Therefore, in this case, the interviewee and the audience are both ratified listeners. The addressed listener is the one “to whom the speaker expects to turn over the speaking role”, meaning that only the interviewee can be counted as the addressed listener since journalists are interviewing him or her at that moment (Goffman, 1979: p. 9). From what has been mentioned above, we can see sports interpreters need to interpret for the interviewer and interviewee on the one hand and take into the audience’s feelings on the other hand. But communication with audiences is single direction only, and interpreters cannot know whether the information is understood. Therefore, the complicated models in sports interpreting make it more difficult than medical interpreting.

Last but not least, the quality of sports interpreting performed by journalists can be affected by the background noise and the on-site atmosphere, which is rarely the case in medical interpreting. Challenges in medical interpreting lie that bilingual medical staff may challenge their colleague’s authority and control the turn-taking rules (Hsieh, 2015). But on the other hand, using bilingual medical staff can naturally enhance patients’ trust, which is hard to achieve for professional interpreters.

## 5. Conclusion

This essay analyzes the similarities between sports and medical interpreting performed by professionals of other fields, from interpretation strategies to identify roles and challenges. It explores the differences between these two interpreting contexts from interpreting categories, interpreting modes, and influencing factors. Although this essay mainly compares non-professionals’ performance between sports interpreting and medical interpreting, it also covers the comparison

between non-professional and professional interpreters. Downie (2021) suggests that there is not much difference in performance between non-professional and professional interpreters, and non-professionals can perform better than professional interpreters in certain situations affected by their professional characteristics. This is a warning for interpreters, interpreting students, and even for the teaching mode of interpreting. Society's demand for the comprehensive quality of interpreters and the high level of expertise in specific fields force us to reflect on whether the current single and general interpreting teaching mode is far too old. Therefore, professional terminologies and theories in related fields can be integrated into interpreting teaching. Another suggestion is to gradually expand the content of the interpreter qualification exam (like CATTI) from diplomatic to public service interpretation.

### Conflicts of Interest

The author declares no conflicts of interest regarding the publication of this paper.

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