# Community Interpreting as a Human Right: Professional Practice

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**Introduction**

Community interpreting, which is also called public service interpreting in some parts of the world, has evolved into a profession, building on its early roots of bilingual family or friends providing services. For our spoken language colleagues, the landscape has often been focused on supporting immigrants settling into a new country, in terms of accessing community services available to all citizens of the country, such as health care settings, education, employment, legal and business services. For signed language interpreters, the work involves serving our most diverse Deaf communities, which may mean Deaf people fluent in the national signed language(s) and Deaf people immigrating to the country. As the services have grown, so too have the standards that shape the training of interpreters for such settings and the working conditions. However, the standards are far from consistent, and the geopolitical contexts continue to influence how and where such interpreting services are offered. For signed language interpreters in most countries, our path to becoming a profession arose from community interpreting, whereas our spoken language colleagues found their professional recognition in conference interpreting.

Community interpreting, uniting under this umbrella term interpreting in health care, legal and other public settings, is mostly defined by the circumstances of interpreting (GARBER, 2000, p. 14; GENTILE, 1997, p. 110; PÖCHHACKER, 2000, p. 49), meaning public sector, medical and court interpreting (ROBERTS, 1997, p. 9). Community interpreting today is a consequence of increasingly multicultural and multilingual societies

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(GENTILE, 1997, p. 112). For the purposes of this conference paper, I will focus largely on signed language interpreting, however I recognize that increasingly we see shared research and scholarship between spoken and signed language interpreters, educators, and researchers (GILE; NAPIER, 2020).

**Human Rights Frameworks**

As a profession, community interpreting blends issues of language and culture to concepts of social justice and equity (BANCROFT, 2015). For countries with more consistent models of community interpreting services, we often see that International Treaties that support human rights also shape access to services. For example, the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) is a tool that has been ratified by 82 countries. However, ratifying does not always equate to providing public service interpreting, despite there being several specific tenets that require signatories to provide such interpreting access. In contrast, for other countries such as Finland and Australia, the UNCRPD has provided a path for national Deaf associations to hold their governments to account and have access to interpreting services in a broad range of settings. In addition to the UNCRPD, there are other United Nations treaties that have been used by Deaf organizations to advance their rights to access services, including the UN Declaration of Human Rights, the UN Rights of the Child, and the UN Rights of Indigenous Peoples.

The World Federation of the Deaf (WFD) was founded on principles of advancing human rights for all Deaf people, and over the years it has served its national members by bridging knowledge of these treaties with education for Deaf communities about how to leverage these treaties in countries that have ratified them. In turn, the lobbying and leverage can lead to increased access to interpreting services in the realm of community interpreting.  The WFD, in collaboration with the World Association of Sign Language Interpreters (WASLI), produced a guiding position paper on communication access for Deaf citizens during natural disasters, and this paper has served as a lobbying document for countries that are not meeting their UNCRPD obligations to provide interpreting to the broader

community during natural disasters such as earthquakes, tsunamis, and more recently COVID-19 government updates.

Although the most frequent issues of fundamental human rights deal with human dignity, freedom, justice, and peace, it is also important to raise awareness of the unequal treatment of individuals based on language, when fundamental human rights as stated in the declarations are indirectly violated because individuals or groups of individuals are linguistically underprivileged. When individuals or groups are pushed into situations in certain environments, and lack the language knowledge in those contexts, their fundamental human rights are violated on the grounds of language, such as the freedom of speech, the right to a fair hearing by an independent and impartial tribunal, the right to political participation, the possibility to enter the education system, and so on (PHILLIPSON; SKUTNABB-KANGAS, 1995, p. 2).

In countries such as Canada, there are specific legislative tools that have been utilized by the Deaf community to support the realization of linguistic human rights and access to services. The Canadian Charter of Rights and Freedoms enshrines the principles of no discrimination based on disability, and it specifically includes the provision of sign language interpreting in court settings (Article 14). However, the Canadian Charter does not address interpreting access in other settings, and this has led to legal challenges and human rights complaints lodged with provincial human rights commissions. In 1997 an important Supreme Court of Canada decision ruled in favour of three Deaf plaintiffs that sued the Government of British Columbia for the lack of medical interpreting services. That decision, given that it came from the highest court in the country, resulted in every province and territory being mandated to create processes to provide medical interpreting services for Deaf patients accessing hospital services, and in some provinces the services have extended to other healthcare providers outside of hospital environments. The decision led to both the Hospital Insurance Act and the Medicare Protection Act being updated to reflect the requirement to provide an interpreter for medical services for Deaf and hard-of-hearing persons (RUSSELL, 2019, p. 48). The Eldridge decision has had a positive impact on the Canadian Deaf community; however, given that the delivery of health care services is a

provincial/territorial government responsibility, this has led to twelve different models of service delivery.

In 2018, Canada passed federal legislation known as the Accessible Canada Act (Bill C-81), with the aim of a barrier-free Canada, for all Canadians, including those with disabilities. The Act recognizes the three signed languages that are used in the country as the primary languages of the Deaf communities, namely American Sign Language (ASL), *la langue des signes québécoise* (LSQ), and Indigenous Sign Language (ISL); however, it did not officially and fully recognize the languages. The Government of Canada sees the act as building on the existing frameworks of the UNCRPD, the Canadian Human Rights Act and the Canadian Charter of Rights and Freedoms, through a proactive and systemic approach to identify, remove, and prevent barriers to accessibility[1]. The Act applies to Federal responsibilities such as transportation, banks, broadcasting sectors, the Canadian Forces and the Royal Canadian Mounted Police, and Parliamentary entities such as the House of Commons, Senate, and the Library of Parliament. At the time of this writing, the Act has had little impact on the provision of community interpreting, except in the area of broadcasting. Canada now consistently provides ASL and LSQ interpreting services for COVID-19 updates given by the Federal government, and most provinces have followed suit. We are also starting to see some additional Federal government announcements and press conferences that do not pertain to the pandemic also providing simultaneous ASL and LSQ interpretation.

Across many countries we see a mix of community interpreting services embedded in disability rights such as the 1991 Americans with Disabilities Act. While the ADA is often touted throughout the world as an example of legislation that has provided access, one shortcoming of the act is that it does not define nor require professional or qualified interpreters to be provided. This has led to numerous formal complaints when companies

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[1] For further description of the Act, see https://www.canada.ca/en/employment-social-development/programs/accessible-people-disabilities/act-summary.html

and/or organizations have met the spirit of the ADA, but the *quality* of interpreting has not met the needs of the Deaf consumers.

Many countries have a convergence of rights shaping community interpreting, with a blend of disability rights, linguistic rights, human rights, and health rights supporting models of services delivery. When countries support civic engagement, citizenship rights and multiculturalism at the policy and/or legislative level, we see access to community interpreting services increase. Particularly due to the growing need of expanding multilingual and multicultural environments, community interpreting today is rising in importance and quantity among different types of interpreting; it is professionalising and gaining more equal ground in university curricula (PRUNČ, 2012). Since the first Critical Link conference in 1995 in Canada (CARR *et al*., 1997), the field has immensely developed building on a foundation of some fifty years of research and practice about community interpreting (BERK-SELIGSON, 1990; HARRIS, 1977; HALE, 2007; HERTOG; VAN DER VEER, 2006; MIKKELSON, 1996; NAPIER, 2004; PÖCHHACKER, 2008; ROBERTS, 1997; RUSSELL, 2002). Across the research topics we see interpreting explored through a convergence of disability rights, linguistic rights, human rights, and health rights. The result of the research has been the push for the overarching goal of interpreting services that allows for civic engagement, and active citizenship from a multicultural lens.

**How is Community Interpreting Different than Conference Interpreting?**
Community interpreting (CI) refers to interpreting in public service institutions and differs from other types of interpreting in several aspects (e.g., mode of delivery - consecutive or simultaneous, interaction situation, level of formality/informality present, level of interpreter involvement in interaction management, status and roles of the participants, level of professionalization, and power asymmetries) (HALE, 2007, p. 31). Compared to conference interpreting, which has achieved the highest level of professionalization within the interpreting world since the 1950s (PÖCHHACKER, 2004, p. 29), CI is sometimes described as "the poor relation" (MASON, 2001, p. I), a phrase that reflects the historical status CI has had in the interpreting community. Despite its low prestige, CI can be

said to be one of the most common and oldest types of interpreting (ROBERTS, 2002, p. 157). Through the centuries, interpreters have had to bridge communication barriers between speakers of different languages and cultures.

**Discourse and Interaction Challenges of Community Interpreting**

Community interpreting occurs across a range of settings, be they centered on government or public service provision, to medical interactions, to legal settings, and increasingly we are seeing the provision of services expand from face-to-face interpreting delivered on the site, to remote or distance service provision. The discourse that frames a CI interaction is also impacted by factors such as the level of intimacy and emotional overlay (PÖLLABAUER, 2013; SETTON, 2007), in that the interpreter is often faced with interpreting content about medical conditions, immigration rules, education access, housing, medical conditions, and narratives that involve conflict, violence and/or trauma. The exchange may involve two parties, or it can involve a small number of participants, where there is usually a power imbalance between the participants. In these situations, the interpreter may find themselves as "gatekeepers" controlling turn-taking and identifying cross-cultural misunderstandings. While interpreters are generally seen to be impartial and not actively involved in the interpretation, the reality is that the interpreter will intervene to ensure the interpreting can take place in an effective manner, and they will, if well trained, seek preparation materials to understand the potential content and context that they will be interpreting.

Wadensjö (1998) addressed the complexity of community interpreting interactions by describing the tension that can occur as both parties are using the interpreting services, with the potential of having two different perceptions and expectations of the interpreter to "help" the parties, leading to mistrust of interpreters, and/or situations where the interpreter intervenes in ways that are outside of the scope of competence and role. Pöllabauer (2013) identified that frequently the goals of participants differ; for example, a person seeking landed immigrant status and a government official tasked with determining the appropriateness of an applicant. Amidst the interactions we see language uses that can reflect

attitudes of discrimination, ableism, audism, racism, and so on, and these can have a very real impact on the quality of interpreting and the long-term well-being of the interpreter.

**Training and Standards for Community Interpreters**

Over the years signed language interpreters have often experienced more formal pathways to training and education than spoken language community interpreters have. The level of formal training of signed language interpreters has benefitted the profession in addressing some of the complex challenges associated with community interpreters. In countries such as Canada and the US, interpreters are required to complete full-time programs, ranging from two to four years in length, prior to being allowed to practice as interpreters and hold active membership in the professional associations that represent signed language interpreters. However, there have been frequent calls to enhance the training to incorporate discourse-based training methods (ROY, 1999; GRBIC, 2008) and to revamp curriculum standards to reflect current research and practice (WINSTON 2005; ROY; METZGER, 2014). A discourse-based approach would enhance the foundational skills required for community interpreting, with the focus on how people use language in each setting and/or interaction, and the discourse goals of the participants in those events, while understanding the system and processes that are overlaid on the assignment. For example, interpreters need to understand what conventional language use can look like in an immigration interview versus parents meeting with teachers, and what stage of a process or event that the interpreter is entering. Is it the first time the parties have met or is this an immigration process that is nearing the final steps? Each setting has formal processes to be observed that will be coded in the ways people use language to achieve their goals. In addition, each participant typically has an overarching purpose to be attained within interaction, and this blend of discourse requirements requires interpreters to have superior cognitive processing skills, coupled with language fluency and interpreting proficiency, interpersonal and intercultural skills, and ethical decision-making schemas.

In 2019, the Commission on Collegiate Interpreter Education (CCIE) reviewed and updated the standards used to accredit ASL-English interpreter education programs. The 10 standards provide a common set of expectations about what basic knowledge and competencies interpreting students should acquire and serve as a reference for those designing interpreter education programs in the US and Canada. The standards have been verified and supported by North American educators, however it is not known if these same standards would apply to other countries developing community interpreting training programs, as each country has their own contextual and developmental factors.

At the international level, the International Standards Organization (ISO) has a committee of experts reviewing the Community Interpreting Standards. First published in 2014, ISO standard 13611:2014 – Interpreting - Guidelines for Community Interpreting was accepted as a guideline for the training and practices that were globally accepted to reflect the stage of community interpreting at that time. The current working group, established in 2020 with experts from over 30 countries, is developing the next standard as a "requirements" document, which reflects both the positive developments within the field of community interpreting, and the changes occurring at the international level for more consistent training of community interpreters. The standard applies to both spoken and signed language interpreters, and it is expected to be published in 2023. It should be noted that this is not the only ISO standard on interpreting that affects CI – we also have four other standards that shape our work, including ISO 18841 – General Requirements and Recommendations for Interpreting Services, ISO 20228:2019 – Legal Interpreting Requirements, ISO 21998:2020 – Healthcare Interpreting and ISO/CD 5060 – Translation Services.

What is useful within the ISO standards is the articulation of interpreter qualifications, including language proficiency, intercultural and interpersonal competence, communicative competence, which addresses discourse knowledge, interpreting competence including note-taking, consecutive and simultaneous interpreting and sight translation, technical competence, including distance interpreting skills, assignment preparation and specialized knowledge for distinct settings. By identifying the competences, organizations and post-secondary institutions can design

training that meets the standard, thereby addressing the historical lack of recognition for the need for training. For countries that are just beginning to develop community interpreting, the standards can serve to pave a pathway upon which to build a competent community of interpreters.

**New Challenges Ahead**

*Pandemic Challenges: Deaf interpreters, discourse, & the public face of signed languages*

In Canada, the pandemic has led to the increased use of interpreters who are Deaf on public broadcasts. This has raised questions of the quality of training offered to Deaf interpreters in the country, and potentially the need for a parallel pathway for Deaf interpreters to acquire the competences needed for professional practice. Russell, Nicholson & Howard (submitted for publication) conducted a study of Canadian interpreters who provided ASL or LSQ interpreting services for government COVID-19 press conferences. Their findings reveal that some provinces delivered services that met or exceeded the expectations of the Deaf community, while amplifying the work of Deaf interpreters as the public face of ASL or LSQ. However, in some other provinces, the interpreters, both Deaf and non-deaf, lacked the skills needed for the difficult press conferences, which then impacted the level of satisfaction with the quality of interpreting services provided to the Deaf community. The study also revealed that some non-deaf interpreters acted as gatekeepers, discouraging the use of Deaf interpreters, suggesting it was not a suitable setting for a Deaf interpreter to work in. The discord or tension among the interpreters has spilled into public conversations with the Deaf community about the role, training and use of Deaf interpreters. It has also showcased the significant differences in access to training in a country as large as Canada.

Across the data set, the interpreters identified the challenges of working with the medical/legal/political discourse, which was often read at a pace that did not lend itself to effective interpreting, and how little preparation some of them had prior to the pandemic in this context. As well, the government officials varied in their willingness to offer pre-

reading material to the interpreters prior to broadcasts which also impacted the quality of the interpretation. Finally, the interpreters varied in their ability to cope with the ethical demands of the work, while being seen as "stars" or "television celebrities". Some interpreters chose to grant interviews about the nature of their work, which added to their "star power" while other interpreters avoided the limelight, and instead tried to shift the attention to Deaf organizations being interviewed about their key priorities.

*Distance Interpreting: Double-Edged Sword?*
A different challenge arose during the pandemic that related to the area of competing rights, where some interpreters chose to decline hospital and medical assignments during the active stages of COVID-19 outbreaks in their local communities, while the Deaf community emphasized their right to have an interpreter for those appointments. This led to the WFD and WASLI issuing a joint statement identifying these rights and addressing the complexity of CI during a pandemic. In many countries, this also led to solutions and perhaps additional challenges, as hospitals and organizations moved to distance interpreting options.

The distance interpreting technology has been a double-edged sword in Canada, in that it has allowed for services to continue to be delivered for parties, especially during times of "lock down" where people were advised to work from home wherever possible[2]. However, in Canada, the health care system in several provinces has contracted a Video Remote Interpreting option provided by a company from outside of the country, providing both spoken and signed language interpreters. This has led to several challenges, in that the interpreters providing distance interpreting may be unfamiliar with Canadian insurance processes, medical systems, locations and cultural references, let alone familiar with local Indigenous spoken languages or local dialects of ASL. This has resulted in some Indigenous families using other family members to interpret, moving CI back towards a model of untrained volunteers. As well, using distance interpreting in older hospitals where the firewalls prevent a smooth

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[2] Roxanne Whiting, personal communication, November 30, 2021.

transmission of signals has also impacted the quality of interpretation. While hospitals and medical systems attempt to save public funds by paying a VRI service by the minute, the use of this model can lead to the "appearance of access" (RUSSELL; MCLEOD, 2009; DE MEULDER; HAUALAND, 2021), in that the doctor sees and hears an interpreter, but it may not meet the needs of the Deaf consumer at all and can lead to increased medical errors and misdiagnosis. An additional area of challenges for signed language interpreters is that the complexity of using a visual-spatial language in a two-dimensional format is an area that has very little attention in the training of interpreters and this also impacts the quality of service.

The other major concern raised is that traditionally, CI has been provided by signed language interpreters *of* the community, meaning that they are known to the community, and trusted to work in these intimate CI spaces that may have a medical, psychological, or legal overlay. By using a distance interpreting service from outside of Canada, Deaf community members are now having interpreters that are unknown to them provide services, which then also can alter the dynamics of the interaction. These are some of the complexities we are facing with the distance interpreting provision, and yet there are success stories emerging, where interpreting services can be offered on demand, as opposed to waiting for an interpreter to arrive, or having to arrange interpreting services in advance.

*What is the future of Community Interpreting in Canada?*
In our increasingly diverse communities, there is a need to address multicultural representation with our interpreter education programs. There are very few interpreters from racialized communities in Canada, and this has resulted in a lack of culturally appropriate interpreters for Black Lives Matter (BLM) or Indigenous events, for example. We will also need to carefully examine the ways in which curriculum and systemic practices of recruitment and retention may be marginalizing interpreting students from diverse identity backgrounds. The faculty within Canadian interpreting programs is also not a diverse group, and while there are Deaf and non-deaf faculty, most of them are white. This lack of diversity has also been flagged as an issue for students seeking to see themselves reflected in

the ethnicity of those teaching them. Another issue that is of concern across Canada is the ways in which CI training must be embedded in the Deaf community. While the professionalizing of CI is viewed as positive, there are educators and practitioners raising concerns that the academic programs and structures are pushing Deaf community ownership and investment in interpreters to the side, reducing the important partnerships that have existed between interpreter educators and Deaf community organizations and representatives.

Technology is also impacting how education is delivered and there may be greater options for diverse faculty to be teaching when programs are not tied to local educators; however, there can also be systemic barriers to hiring adjuncts and/or faculty who are only able to teach via distance formats. There are also questions about which content can be delivered via distance and/or blended options and how interpreting skill development can be facilitated outside of traditional face-to-face classes. On the positive side of the equation, technology may also allow for greater training opportunities in that students may not have to relocate to one of the six cities that currently host interpreter education programs, thus reducing the overall expense of completing the program. Some interpreter education programs have struggled to have sufficient applicants to operate on a cohort model, so allowing for distance education may increase enrolments in programs.

As identified earlier, Deaf interpreters are increasingly working in CI spaces. There are national conversations about the need for a Deaf interpreter educational track that may be different from non-deaf, L2 ASL learners, and that the learning structures need to be linguistically and culturally designed to support Deaf interpreters to acquire the competencies. There has also been little attention within interpreter education programs on the nature of working in teams of Deaf-non-deaf interpreters. For co-interpreting to work well, the strategies within a team need to be refined (STONE; RUSSELL, 2014) and this is an area of training that professional associations and interpreter educators must address. There are other contexts where Deaf interpreters are using technology such as speech-to-text apps in order to provide interpreting services; however,

there is no research evidence upon which to build best practices, and training protocols for this area as well.

While there are significant challenges ahead, the future of Canadian community interpreting appears to be firmly rooted in a foundation of both human rights legislation and accessibility principles, with services across a range of settings, provided by both Deaf and non-deaf interpreters.

**Conclusion**

This short paper has identified the need for community interpreting practices to be embedded in a human rights framework to allow for the broadest understanding of linguistic rights and access to services, versus framing CI as a disability right. Community interpreting, for both spoken and signed language interpreters, is on shifting ground, where the standards for training are rising and the complexity of how best to provide CI via distance interpreting platforms is increasing. There are political aspects to be addressed, from who should represent sign language in public broadcasts to how to manage the increased attention that interpreters are experiencing in such spaces. Training pathways for Deaf and non-deaf interpreters need to be addressed from a lens of diversity and inclusion and there are numerous ways for technology to enhance the access to training in a country as large as Canada.

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**Abstract**

Over the past thirty years the field of community interpreting has developed in many countries; however, the path to professionalization is not a consistent one. Community interpreting has been defined as providing access to services such as those offered by government agencies, private institutions like banks, educational settings, and in many countries health care and legal services have been included in the model of service delivery (ISO 13611:2014). This paper reviews community interpreting with signed language interpreters amidst a framework that positions it as a human and linguistic right, by exploring international practices that have shaped the practices used by community interpreters. In addition, we will examine the training opportunities that have emerged for community interpreters, both spoken and signed language interpreters, and the areas where there is room for development and growth to address the current challenges faced by community interpreters.

**Keywords**: Community interpreting; Human rights; Deaf interpreters; Gatekeeping

**Resumo**

Nos últimos trinta anos, a área de interpretação comunitária se desenvolveu em muitos países; no entanto, o caminho para a profissionalização não é consistente. A interpretação comunitária foi definida como o meio para fornecer o acesso a serviços como aqueles oferecidos por agências governamentais, instituições privadas como bancos, instituições educacionais e, em muitos países, serviços de saúde e jurídicos também foram incluídos no modelo de prestação de serviço (ISO 13611:2014). Este artigo analisa a interpretação comunitária com intérpretes de línguas de sinais numa perspectiva que a posiciona como um direito humano e linguístico, ao explorar práticas internacionais que moldaram as práticas utilizadas por intérpretes comunitários. Além disso, examinaremos as oportunidades de formação que emergiram para intérpretes comunitários, tanto de línguas faladas quanto sinalizadas, e as áreas em que há espaço para desenvolvimento e crescimento com vistas a lidar com os atuais desafios impostos aos intérpretes comunitários.

**Palavras-chave**: Interpretação comunitária; Direitos humanos; Intérpretes surdos; Controle de acesso