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Book Review: Strategies for Interpreter Education and Practice in the Health Care Setting

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Swabey, L., & Malcolm, K. (Eds.). (2012). *In our hands: Educating healthcare interpreters*. Washington, DC: Gallaudet University Press. ISBN 13: 978-1-56368-521-7 (hardcover), ISBN 13: 978-1-56368-522-4 (e-book).

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Swabey and Malcolm's contribution to the Interpreter Education Series (edited by Cynthia Roy) has importance and relevance for educators and interpreters alike. The book collects chapters that offer a range of perspectives on an issue of common concern: the need for qualified and competent interpreters to work in health care settings. I appreciate the volume's multicountry focus; the editors have solicited chapters on developments from Australia, the United Kingdom, and other European countries, to offer a contrast with the North American perspective.

Building on the exceptional work of the CATIE Center (a center established by St. Catherine University in Minnesota that focuses on interpreting research), the volume begins with a discussion of health care competencies. Swabey and Craft Faber describe an effective health care symposium held in the U.S. that led to the documentation of domains and competencies. These domains and competencies can translate into curriculum development, making this chapter a useful resource for educators planning for specialized training in health care settings, and for interpreters looking to assess their own learning and build a plan for enhancement.

This is followed by a practical example of applying discourse analysis principles in the classroom. Major, Napier, and Stubbe share strategies to draw attention to linguistic features that are crucial in any interaction, while using material that is authentic to medical settings. The chapter is easy to follow, and mentors, study groups, and more traditional training programs could easily implement the approach.

Crump walks the reader through a model program in Alabama that prepares interpreters to work in mental health settings. The program planning drew on evidence from outside of interpreting in order to create a comprehensive model that speaks to the specialized skill sets required. This chapter is a compelling piece for practitioners to share with health care providers and interpreter referral services, specifically during discussions about the qualifications necessary to do the work effectively.

Dean and Pollard, both educators in the Alabama program, urge readers to consider the demand-control schema (DC-S) in the context of experiential learning. They offer examples that will enhance an educator's understanding of ways to use DC-S as an effective tool for group and individual learning.

I especially enjoyed the Bontempo and Malcolm chapter for its focus on strategies to educate interpreters to avoid or manage vicarious trauma. Bontempo and Malcom do much to help interpreters recognize how much they are impacted through the meaning making of interpreting and the narratives that emerge in health care settings.

Bowen Bailey is known for his creative application of technology in interpreting, and his chapter furthers his reputation. In his contribution, he inspires readers to reconsider designing environments for optimal adult learning in an online format.

The book then shifts its attention to broader issues related to health care interpreting. Moreland and Agan offer insight on educating interpreters to work with deaf health professionals. This chapter has relevance beyond health care professionals and is rich fodder for discussions of curriculum and the training required by designated interpreters working in highly specialized areas.

Hedding and Kaufmann raise some of the complicated matters of health literacy and the diversity of deaf consumers accessing health care; however, the recommendations at the end of the chapter indicate the authors are unaware of some of the exceptional training that is available. As well, the emphasis on formulaic language as part of translation process when dealing with a signed language and a spoken language is not in keeping with what those in the field know must happen: a shift to understanding interpreting as co-construction of meaning.

Morgan and Adam provide insight from deaf interpreters, deaf interpreting being an essential component of effective service delivery, and argue for increased training opportunities for them. The content of this chapter is somewhat familiar, but it is a good reminder to construct learning environments that are welcoming to both deaf and hearing colleagues.

Downing and Ruschke bring us valuable insights about the nature of spoken-language interpreter education in health care settings and set a historical context. De Wit, Salami, and Hema describe the state of health care interpreting in the Netherlands, the U.K., and Italy.

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In Our Hands offers readers both something new and something familiar, across a range of topics. The chapters, well edited and easy to read, provide educators, mentors, and interpreters a host of tangible ideas to apply in the classroom and in practice. Missing, however, are recommendations for future research: As interpreters work to define specialization in the crucial area of medical and mental health interpreting, what research directions will enhance this development? Additions to the literature that follow Swabey and Malcolm's worthy contribution will help to answer this question.