Supervision and the Interpreting Profession: Support and AccountabilityThrough Reflective Practice

Ali Hetherington
Manchester University, ali_hetherington@tiscali.co.uk

Hetherington

Supervision and the Interpreting Profession: Support and Accountability Through Reflective Practice

Ali Hetherington[1]

Manchester University

Abstract

In this article, the author argues for the development of consultative supervision within the interpreting profession to reduce work-related stress, provide interpreters with opportunities for regular examination of their practice, and to protect those to whom interpreters provide a service. Supervision is a recognized means of accountability and support for many professions, yet it is largely absent from the training and continuing professional development of interpreters. Furthermore, the absence of literature into occupational stress for interpreters implies that such stress is unrecognized or considered unproblematic by the profession. The author draws on findings from a recent qualitative research study into occupational stress among signed language interpreters in the northwest of England to make an argument for the benefits of consultative supervision for the interpreting profession.

Keywords: supervision, reflective practice, occupational stress, emotional and psychological impact, signed language interpreter, interpretative phenomenological analysis, ethical practice

[1] *Correspondence to: ali_hetherington@tiscali.co.uk*

Supervision and the Interpreting Profession

Supervision and the Interpreting Profession: Support and Accountability Through Reflective Practice

1.   Introduction

In this article, I argue for the development of consultative supervision for interpreters. The argument emerges from, and is substantiated by, a qualitative research study I conducted into the causes and management of occupational stress among a sample of signed language interpreters working in the northwest of England (Hetherington, 2011). I undertook the research because, as a practitioner, I was concerned about the lack of professional frameworks of support and accountability for signed language interpreters, and I was convinced of the need to understand and develop such frameworks within the profession. When I interpreted on a diploma in counselling course in 2002, I discovered the consultative model of supervision, which seemed to be a model of supervision that could benefit interpreters. I have since undertaken group, peer, and one-to-one supervision; due to the absence of signed language interpreters offering supervision, all my supervisors have been practitioners from outside the interpreting profession. My experience of supervision has strengthened my belief in the importance of supervision for interpreters and the need to increase the number of supervisors within the profession. In 2008, I undertook a Post Graduate Certificate in Supervision at Manchester University in the U.K.; qualifying in 2009, I progressed onto the MA research module, hoping to research the adaptation of existing models of supervision for the interpreting profession. I faced a problem of lack of evidence, however, due both to the absence of supervision in the profession and a lack of research, particularly with regard to occupational stress among interpreters. Preliminary, primary research was required, and my MA dissertation (*A Magical Profession? Causes and Management of Occupational Stress in the Sign Language Interpreting Profession;* Hetherington, 2011) was, therefore, research into the existence and causes of occupational stress and current strategies and support utilized by interpreters in the absence of supervision.

Two overriding themes arose from the MA study. First, interpreters believe that there is a continued assumption that they work as conduits in a purely linguistic capacity, which contrasts greatly with their own accounts of the complexity of their role and the responsibility they take to ensure effective communication. Second, interpreting can have considerable emotional and psychological impact on interpreters, particularly when they work with vulnerable client groups, for example, within child protection, social work, and mental health settings; furthermore, interpreters tend to work in isolation without organizational support. Based on these findings, this article puts forward an argument for consultative supervision as a beneficial means of ongoing reflective practice, support, and accountability for the interpreting profession.

Supervision is a recognized means of professional support and development in professions such as counseling and social work and other professions that take place in clinical settings (Carroll, 2007; Cutcliffe, Butterworth, & Proctor, 2001; Hawkins & Shohet, 2006; Inskipp & Proctor, 1995; Morton-Cooper & Palmer, 2000; Page & Wosket, 2001). Studies also indicate that supervision can reduce occupational stress and burnout (Begat, 2005; Edwards, 2006; Jones, 2009; Sterner, 2009), yet there has been limited discussion of supervision within the interpreting profession. This article explores why such an established and valued framework has not been developed for interpreters and considers how existing models of supervision can both support interpreters and protect those with whom they work. The following is a description of supervision, which, although it relates to clinical work, could be equally beneficial to the interpreting profession:

> Supervision is a formal process of professional support and learning which enables individual practitioners to develop knowledge and competence, assume responsibility for their own practice and enhance consumer protection and the safety of care in complex clinical situations. It is central to the process of learning and to the expansion of the scope of practice and should be seen as a

Hetherington

> means of encouraging self-assessment and analytical and reflective skills. (Department of Health, 1993, p. 3)

The professions for which supervision is integral to practice can be characterized as "practice professions," "where careful consideration and judgment regarding situational and human interaction factors are central to doing effective work" (Dean & Pollard, 2005, p. 259). My research study suggests that there is a continued perception of interpreting as a "technical profession," in which the technical aspects of the work (linguistic ability, in the case of interpreters) are sufficient for effective work practices (Hetherington, 2011). This may offer some explanation for the lack of development of supervision within the interpreting profession, yet it does not accurately reflect the work of interpreters (Berk-Seligson, 2002; Dean & Pollard, 2001, 2005; Dickinson & Turner, 2009; Dysart-Gale, 2005; Harrington & Turner, 2001; Hsieh, 2008; Lee, 2009; Roy, 2000; Wadensjo, 1998) and, furthermore, it is a significant cause of stress.

2.   The Research Study: Methodology

The aim of the MA research study was to gain a deeper understanding of how participants make sense of their experiences as interpreters and the meanings these experiences hold for them. Interpretative phenomenological analysis (IPA) was the chosen methodology, as the primary concern was to gain an understanding of psychological processes and individual perception, rather than producing an objective "truth." This is particularly important as such accounts are underrepresented in literature. Furthermore, my role as the researcher within a range of possible methodologies was an important consideration in my selection of a method of inquiry. The core principle of IPA is that "the analyst explicitly enters into the research process" (Reid, Flowers, & Larkin, 2005, p. 20); I was aware that participants would relate to me as a fellow practitioner and I anticipated that our shared experience as interpreters would shape the interview process.

This study uses qualitative methodology in the form of semistructured interviews to allow participants to give detailed, first-person accounts of their experience of working as signed language interpreters. A loose structure gave some direction to the interview while simultaneously allowing for flexibility within the process, by allowing "the researcher and participant to engage in a dialogue whereby initial questions are modified in the light of participants' responses" (Smith, Larkin, & Flowers, 2009, p. 57). I made an effort to design open, nonleading questions and follow-up prompts to make sure that I would not influence the participants or make assumptions about their concerns. The interview schedule aimed to encourage participants to reflect on their work experiences, and I invited their narratives by asking sufficiently open questions such as, "What do you like about being an interpreter?" and "Describe the main differences between a 'good' day and a 'bad' day.'" I anticipated that participants would not necessarily have supervision and wanted to gain an understanding of their reasons why. Mentoring is the framework currently offered by the signed language interpreting profession in the U.K.; for this reason, participants were asked, "Have you ever considered professional support such as supervision or mentoring?" and "What do you see as the difference between supervision and mentoring?" The interview schedule was consciously left flexible in order to ensure opportunities for participants to raise their own concerns that I had not considered. The aim was to obtain rich, detailed accounts from the participants of what they, as experienced practitioners, considered significant.

IPA uses purposive sampling to find a homogenous group for whom the research question will be significant, which then allows for in-depth analysis of the phenomenon. Six interpreters participated in the study; all were women between the ages of 29 and 58 years and had been (fully qualified) Members of the Register of Sign Language Interpreters (MRSLI) in the U.K. from 18 months to 10 years. All of the participants either worked solely as community interpreters or spent a significant percentage of their working time in community interpreting situations. I informed participants that the information they provided would remain confidential and asked them to try to avoid naming other interpreters or clients in order to protect their confidentiality. I assured them that in the event of this happening I would use pseudonyms to replace any identifying information. I obtained permission to use direct quotes, all of which have been made anonymous, and participants are identified with pseudonyms.

3.   Causes of Occupational Stress for Interpreters

There is a dearth of literature into occupational stress in the interpreting profession, which implies that such stress is either absent from or unrecognized by the profession. Recent research challenges this view (Dean,

Supervision and the Interpreting Profession

Pollard, & Samar, 2010; Hetherington, 2011), and I draw on accounts from participants in my study to provide a context for a discussion on the benefits of supervision for interpreters. (I am concerned with the psychological rather than physical causes of stress, although I acknowledge that stress can also manifest itself physically [Dean et al., 2010; Delisle, Durand, Imbeau, & Larivière, 2007; Freeman & Rogers, 2010; Qin, Marshall, Mozrall, & Marschark, 2008]).

3.1. Conflicting Views of the Role of the Interpreter

Participants in the study noted that a significant cause of job-related stress is the assumption that interpreters work solely from source to target language, without an understanding of how they manage instances of nonequivalence between two languages and the complexities of human interaction. Chris, one of the participants, described how she thought hearing professionals perceived her:

> They think I'm a magician's assistant, I wave my hands and the deaf person understands and they have no cognition around how I get from A to B or how things are being conveyed, or the amount of work that I need to do to enable this dialogue to happen. They can't pick up on gaps in deaf people's knowledge themselves; it's often the interpreter who will pick up on that, so they don't get a true sense of the deaf person. They maybe just go through this procedure; a procedure that they have designed for the majority community, which is hearing—one size fits all.

Other participants related similar accounts of how they supplement gaps in "fund of information" (Pollard, 1998, pp. 182–183), by providing explanations or background information to facilitate understanding. They expressed a belief that a lack of understanding of what the role actually entails can lead to a lack of respect for the profession, which echoes findings in other studies (Angelelli, 2006; Dysart-Gale, 2005; Hsieh, 2008); Chris described this as feeling like she is "an accessory they can pick up and drop at any point." All participants described a marked contrast between this expectation that they work as conduits and what they believe is necessary to ensure effective communication. This led some participants to express concern that they may "step out of role," an anxiety similar to that raised by interpreters in a study by Harrington and Turner (2001).

Dean et al. (2010, p. 42) identified "a problematic, stress-inducing gap between interpreting practice rhetoric versus the de facto practice experiences and behaviors of sign language interpreters." The implication is that, in addition to other professions misunderstanding the interpreter role, the rhetoric of the interpreting profession may also not accurately reflect de facto practice. Numerous studies have claimed that codes of conduct for signed language interpreters can lead to uncertainty about what is permitted within the role (Angelelli, 2006; Atherton, et al., 2002; Bahadir, 2001; Dean & Pollard, 2005; Dysart-Gale, 2005; Tate & Turner, 1997; Turner, 2005). For example, the statement that interpreters "should be impartial" (National Registers of Communication Professionals Working with Deaf and Deafblind Peoples [NRCPD], 2010) may lead interpreters to believe that there is an expectation that they *feel* impartial as well as behave impartially. Participants in the study described the code of conduct as too prescriptive and preferred to apply the ethical principle of "do no harm" to their own practice. The principle of "do no harm" has been one of the ethical principles guiding interpreting practice; however, the current code of conduct for interpreters working in the U.K. no longer contains ethical principles (NRCPD, 2010).

In addition to illuminating how interpreters manage complex communication dynamics without a feeling of recognition or respect of other professionals, my study also found evidence of the psychological and emotional impact of the work on interpreters. Dean et al. identified that "sign language interpreters on the whole reported significantly more psychological distress, depression and physical exertion than either the practice profession or the technical profession norms" (2010, p. 41). That interpreters experience "significantly more psychological distress and depression" should be of great concern for the profession.

3.2. The Psychological and Emotional Impact of Working as an Interpreter

Interpreting assignments can be highly emotional, and witnessing the distress of others can be distressing for interpreters. Interpreters may also witness discrimination and poor service provision, which can result in conflicting emotions; interpreters may feel a sense of responsibility to "act" while simultaneously experiencing a sense of powerlessness. Amy, a participant in my study, described the effect interpreting for a deaf patient receiving upsetting news at a hospital appointment had on her:

49

Hetherington

> I got in my car and I cried just because of what had happened; it just didn't go the way it should have gone and I was just, I think I was just so angry with this doctor that it came out in emotion. I wouldn't put up with it and I know she did challenge it, so that was great she did that.

Harvey (2003) highlighted the risk of signed language interpreters empathically "drowning" and emphasized the importance of maintaining a sense of self as distinct from another to avoid this (p. 211). Figley (1995, p. xiv) used the term "compassion stress" to describe how professional caregivers, therapists in particular, experience "the natural behaviors and emotions that arise from knowing about a traumatizing event experienced by a significant other—the stress resulting from helping or wanting to help a traumatized person." However, interpreters do not only witness or "know about" events; they are also required to convey the content and affect of any interaction, often through use of the first person. Jenny described how she sometimes feels like she is "channelling someone." This raises the question of what interpreters do with their feelings while interpreting, and indeed how they prevent these feelings from surfacing. Furthermore, Amy's account suggests that because interpreters are not active participants and do not have an opportunity to have direct communication during the interpreted event, they may be left with unwanted feelings on completion of an assignment. Chris described her feelings being "pushed out" in the course of her work, which indicates that she was unable to prevent them from surfacing:

> Historically [the work] would trigger lots of feelings and emotions in me that I wasn't really prepared to let come out. That's why I went to go and do my own counselling and stuff, because those feelings and emotions did need to come out, but they were being pushed out through the type of work I was doing.

The emotional and psychological impact of interpreting has received some acknowledgment (Angelelli, 2003; Baistow, 1999; Bontempo & Van Loggerenberg, 2010; Dean & Pollard, 2001; Johnson, Thompson, & Downs, 2009; Malcolm, 2010; Tribe, 1999; Weibel, 2009), yet it requires further attention to equip interpreters with the relevant strategies to manage their responses. Without this, interpreters may not be aware of, nor prepared for, the effect the work might have on them and may believe their responses are due to personal weakness. Equally important is how interpreters' responses, including any negative reactions they may have toward clients, can affect others and inadvertently influence their interactions. This is particularly important as frequently no one else bears witness to their work; interpreters are often the only people present with access to both languages during interpreted events.

4.   The Benefits of Supervision for the Interpreting Profession

Entering into supervision can be a cause of anxiety for interpreters, who may fear being "found out" or judged, particularly if we consider concerns they may have of "stepping out of role." To mitigate this, a model of supervision referred to as "consultative" or "professional" supervision, in which "the essence of effective supervision lies in the quality and character of the relationship between supervisor and supervisee" (Feasey, 2005, p. 41) emphasizes the importance of the supervisee choosing their supervisor. A positive supervisory relationship is regarded as paramount for supervisees to feel able to discuss difficult assignments or ethical decisions; without this, they may be reluctant to raise issues where they perceive they may be judged and supervision would be less effective. Val described what she would want from such a relationship:

> I would hope you could build up a rapport, a relationship with somebody that was strong enough to be able to accept positive criticism and know that it's not going to be shared with other people. I think it needs to be at that level where you trust somebody enough. I think you want that professionalism, that confidence, to be able to discuss with them things you might go home and think you could have done better, but you wouldn't tell another interpreter that because they might criticize you.

Participants in my study expressed a sense of loneliness when working alone. They valued opportunities for reflection and reported relying on informal support. Only one participant had formal supervision; the other participants reflected on their practice either alone or with trusted colleagues. Informal networks are a vital source of support; however, if the colleagues whom interpreters approach are friends, they may be reluctant to

Supervision and the Interpreting Profession

challenge each other, which may limit opportunities for development and change. Supervision provides an opportunity for a trusting relationship to develop outside of a friendship network. Challenge and accountability, as well as support, are built into this relationship through the supervisor's professional role. The supervisory relationship acknowledges the power difference; the supervisee brings his or her work for discussion with the supervisor, for which the supervisor is paid by the supervisee. Dual roles are not recommended; for example, supervising a friend or close colleague may affect what the supervisee feels able to bring to supervision and, equally important, may restrict responses by the supervisor. Emphasis is therefore placed on maintaining the boundary between the supervisor and supervisee (Feasey, 2005; Hawkins & Shohet, 2006; Inskipp & Proctor, 1995; Page & Wosket, 2001).

There are three main functions of supervision, which vary slightly among the differing models. Hawkins and Shohet (2006) described the functions as "developmental," "resourcing," and "qualitative," and suggested that "combining the multiple functions is at the heart of good practice" (2006, p. 57). Below is a brief outline of these functions and how they can be applied to the supervision of interpreters.

4.1. Developmental Function

The *developmental function* provides supervisees with an opportunity to develop their skills, understanding, and capabilities through reflection and exploration of their work practice with their supervisor. Supervisees enter into supervision at various stages of their development, and supervision can be tailored to meet their specific needs. For example, an inexperienced practitioner may require more support than a more experienced colleague who might prefer a more challenging experience. Although the supervisor may be more experienced than the supervisee, both recognize that the supervisee may bring a wealth of experience and knowledge to the supervision session. This awareness redresses the power imbalance described above, to some extent. Feasey (2005) refers to this as "relational supervision."

Through the process of supervision, the supervisee also develops an "internal supervisor" as skills in self-reflection develop. Self-reflection complements rather than replaces supervision, because the opportunity to discuss work with a supervisor allows for the identification of issues the supervisee may not recognize, nor, indeed, wish to acknowledge. Val described the potential limitations of self-reflection: "You can do it yourself, but you can also fool yourself sometimes because you don't want to hear the bad stuff." The opportunity to receive feedback and guidance from an experienced colleague can be beneficial for interpreters at all stages of their development, enabling them to expand upon their existing knowledge and expertise.

4.2. Resourcing Function

The *resourcing function* of supervision develops supervisees' awareness of their emotional responses to their work and helps them develop resources to manage their reactions. In Section 2.2 I described the emotional and psychological impact the work can have on interpreters and raised the question of whether it is possible for them to bracket their feelings while they are working and, if so, what effect does this have on them, and what do they do with these feelings on completion of an assignment? The work of an interpreter can extend across either side of an interpreting assignment; for example, most hospital assignments include time spent in hospital waiting rooms. Interpreters develop trusting relationships with clients while continuing to maintain ethical boundaries (Angelelli, 2006; Davidson, 2000; Hetherington, 2011; Hsieh, 2008), judging how much self-disclosure is appropriate to enable a client to feel comfortable discussing personal information with a clinician in the presence of the interpreter. Consider this in the context of a definition of "therapeutic listening," described as an "imperceptible activity that can be viewed as relaxing and chatting" (Jones, 2009, p. 353). Although interpreters may not describe such conversations as therapeutic, how they conduct themselves while "chatting" can have a significant impact on the client. Furthermore, minimal access to those with whom they can communicate with may lead some deaf people to share personal information with an interpreter, who in some situations may be unsure whether to act on such information. This is an instance in which the qualitative and resourcing functions overlap; supervisees may wish to explore their feelings as well as strategies for managing such situations.

Supervision can provide supervisees with an opportunity to recognize their personal and professional limits and gain a better understanding of how they work. A supervisor will be able to pick out "themes" that arise in sessions to facilitate an awareness of personal triggers and blind spots. Chris explained how through supervision she has developed an awareness of herself and what she brings to assignments: "You are the interpreter but you are also a person and sometimes your own personality can affect your practice," she continued. "I understand my own vulnerability, I take that in the room with me wherever I go; if it's part of me, it's part of the whole thing." By recognizing the impact certain types of assignments have on them, interpreters can make informed choices about the work they undertake.

Hetherington

4.3. Qualitative Function

Recognition of the emotional and psychological impact of the work on interpreters is an important factor when exploring the benefits of supervision; however, of equal importance is the consideration of what safeguards are in place to protect consumers of services. The *qualitative function* of supervision ensures that interpreters monitor their practice, explore ethical decisions, and consider options for future action outside of the event itself, protecting interpreters and safeguarding those with whom they work. This is of particular importance when we consider that, in contrast to other practice professions, interpreters primarily work as freelance practitioners, outside of organizational structures. In most community settings—medical, social services and legal domains—interpreters work as sole practitioners, and bad practice can go unnoticed. The consequences of decisions made by interpreters can be considerable and require careful, considered ethical reflection. Supervision can provide a framework that can both inform and support ethical decision making.

Interpreters report that the majority of their education occurs after they complete their training and is learned "on the job" (Dean & Pollard, 2001). In other practice professions, newly qualified practitioners work under the guidance of senior colleagues and are "rarely the only individuals in the work environment with the specialized knowledge needed to conduct the work, and they rarely perform their duties unsupervised" (Dean & Pollard, 2001, p. 10). This is in marked contrast to the interpreting profession, in which not only do newly qualified practitioners work alone, but those in training do as well. Tort law requires practitioners to provide a standard of care whereby "the inexperienced professional is negligent if he does not achieve the standards of a reasonably competent and experienced person exercising the particular skill of his/her profession" (Pannet, 1992; cited in Jenkins, 1997, p. 42). This study provides further evidence that interpreters are required to make ethical decisions beyond the purely "technical" aspects of the work; without regular examination of their practice; interpreters, particularly those in training and those newly qualified, may be working beyond their personal and professional limits. Supervision can provide a "pragmatic, defensible framework for ethical decision making" (James & Elizabeth, 2006). Working collaboratively, supervisors and supervisees can develop a trusting working relationship to allow for an open discussion of work-related issues, allowing for a "reflective and creative" process rather than one that is "reactive and mechanistic" (Beddoe, 2010, p. 1284). Constructivists would argue that the very act of supervision can produce ethical practice as "the stories we tell of our practices and the ethics of those practices do not merely *reflect* our work, they produce us as practitioners and produce our practices" (Crocket, 2004).

In the U.K., supervisors are not responsible for their supervisees' practice. Supervisees alone have a duty of care to their clients, known as the *Bolam test* (Jenkins, 2006), to work according to the standards of care expected of a practitioner. The supervisor does, however, have an ethical and professional duty to protect clients from poor practice and, as a last resort, may inform a supervisee's registering body of unprofessional practice if this is unresolved within supervision. Supervisors ensure their own accountability by undertaking supervision of their supervision practice.

Overall, supervision provides an opportunity for supervisees to reflect on their practice, gain a different perspective on their work, and receive feedback and guidance where appropriate. The process of supervision helps supervisees develop an understanding of how they work, including their blind spots, prejudices, and limitations, which in turn informs the work they undertake.

5.   The Absence of Supervision in the Interpreting Profession

There has been limited discussion of supervision within the interpreting profession, and practitioners I have spoken to from other professions have also expressed surprise at the notion that interpreters might have supervision, assuming that this would be purely to discuss lexical choices—a further indication that interpreting may be regarded as a technical profession. Within spoken language interpreting there has been some mention of supervision groups (Sande, 1998; Tribe, 1997), and more recently Dean and Pollard (2005, 2009) have emphasised the importance of supervision within the practice professional model. The following are reasons why I suggest that supervision has not been developed within the sign language interpreting profession in the U.K.

5.1. Perceptions of Supervision

Supervision and the Interpreting Profession

A discussion thread in response to my paper on supervision for the Supporting Deaf People Conference (2010) suggested confusion and misunderstanding within the signed language interpreting profession regarding the purpose and function of supervision. Supervision was generally regarded as part of a hierarchical line management relationship, a perception reflected in accounts given by participants of my study. Morton-Cooper and Palmer (2000) make a similar observation of health care professionals, who, they suggest, viewed supervision with suspicion as it was perceived as "top-down," a view also shared by midwives (McDaid & Stewart-Moore, 2006). This does not accurately reflect the model of supervision I present in this article; the supervisor is chosen by the supervisee and is often only aware of the supervisee's work through what the supervisee chooses to discuss in supervision. Line managers, on the other hand, have a responsibility to the organization they work within; as such, they are expected to monitor standards of practice and may raise issues with supervisees regarding their performance. Furthermore, they are responsible for staff appraisals, all of which may result in a guarded supervisory relationship. The perception of supervision as solely relating to line management could offer one explanation why mentoring, rather than supervision, has been developed for sign language interpreters in the U.K.

5.2. The Development of Mentoring Programs

The Association of Sign language Interpreters (ASLI) in the U.K. has introduced formalized interpreter support through a mentoring program. Its policy document states:

> ASLI wish to stress that mentoring is about working on specific objectives. An interpreter may choose to have 6 sessions one year to focus on a specific aspect of their work; 2 sessions another year just to monitor progress on something else; or 0 sessions because they are developing themselves in other ways or have not identified anything specific to work on yet. (Association of Sign Language Interpreters, 2003, p. 3)

The implication is that mentoring is not intended for ongoing reflective practice, as the frequency of meetings depends on whether the mentee has "something specific to work on." My own experience of supervision suggests that topics for discussion can evolve from discussion within supervision and are not always formulated in advance. In supervision groups, an issue raised by one member may trigger something for another, which then becomes their issue for the session. The process of supervision itself may also identify issues that may otherwise go unrecognised by the supervisee. The suggested infrequency of mentoring sessions would potentially leave some issues unidentified.

Goal setting and models of problem solving feature strongly in literature on mentoring (Connor & Pokora, 2007; Morton-Cooper & Palmer, 2000; Parsloe & Wray, 2005; Young, 2005). The stress the ASLI mentoring program places on having "specific objectives" reflects goal-oriented support; plans and reports are also features of the program. Furthermore, the terminology associated with mentorship, such as *protégé* and *apprentice,* implies that mentoring has a more developmental function—that it represents the teaching, education, and coaching of less-experienced practitioners. This is reflected in the nursing profession, where mentoring is provided for those in training and supervision is offered to qualified practitioners (Morton-Cooper & Palmer, 2000). I argue that there remains a gap in opportunities for ongoing reflective practice for sign language interpreters and that the formation of supervision groups throughout the U.K., despite the absence of supervision being promoted within the profession, suggests there is a need for such provision. A review of the mentoring program would provide interesting information regarding whether, in the absence of supervision, there is a demand for ongoing reflective practice by mentees, although this is not the intended purpose of the ASLI program.

5.3. Transferability of Existing Models of Supervision.

The absence of supervision in the interpreting profession could be due to the perceived limitation of the transferability and efficacy of existing models of supervision. However, models are not intended to be prescriptive; their purpose is to "identify central functions, philosophy and principles and act as a framework to guide, rather than dictate practice" (Mullarkey, Keeley, & Playle, 2001). Models do tend to be specific to a particular professional context; nevertheless, I suggest these could be adapted and applied to the interpreting profession. Hawkins and Shohet (2006) have, for example, developed their model to encompass all "helping"

International Journal of Interpreter Education, 4(1), 46–57. © 2012 Conference of Interpreter Trainers   53

Hetherington

professions, particularly those using counselling skills within their work. Applying their model would require consideration of just three issues: the term *helping profession,* the assumption that practitioners use counselling skills in their work, and the notion of a "client."

The term *helping profession* is problematic for the sign language interpreting profession due to the historical context in which the profession developed. In the U.K., communication was historically performed by family members, missioners, and, later, social workers for deaf people, who would perform the role of both interpreter and advocate. The development of the interpreting profession saw the introduction of the conduit model, where interpreters were regarded solely as transmitters of information as a means of distancing the profession from the "helper" role described above. It is for this reason I prefer to use the term *practice profession* rather than *helping profession* to describe this wider professional context. Hawkins and Shohet's (2006) model also refers to professions that primarily use counselling skills in individual work with clients. Neither is the notion of a "client" straightforward for the sign language interpreting profession, as interpreters facilitate communication between two or more interlocutors. However, for the purposes of supervision, a distinction can be drawn between clients of services and professionals with whom interpreters work, a psychiatrist seeing a patient, for example. As interpreters work as part of a triad, they may regard their fellow professional as a "coworker" and the individual the professional is seeing as the client. The work of an interpreter can also extend beyond the interpreted event, as I described in Section 3.2, as interpreters use their interpersonal skills to develop a trusting relationship with a deaf client. This is also true of ongoing assignments, such as child protection, where interpreters may work with a family over several years. I would argue for interpreter training to include basic counselling skills, such as the core conditions (Rogers, 1957) in recognition of this aspect of the work. The issues interpreters bring to supervision may, therefore, relate to a variety of people and organizations they work with, including fellow professionals, clients, and interpreters as coworkers. Feasey (2005, p. 33) describes supervision that encompasses the full context of the work of a practitioner as supervising the "whole practice."

6. Conclusion

My own research findings and the work of Dean and Pollard (2005) support the argument that interpreting should be recognized as a practice profession requiring the support framework of supervision. The accounts of sign language interpreters in this study strongly indicate that the role and responsibilities of interpreters extend beyond the purely linguistic, as they work—with careful consideration of work practice—to facilitate and ensure effective communication and ethical practice. The responsibilities of community interpreters clearly extend beyond those expected of interpreters working purely as conduits, yet the interpreters in this study report an assumption, both within and outside the profession, that they make decisions pertaining only to the linguistic aspects of their work. This is a significant cause of work-related stress for interpreters. Existing models of consultative supervision can be adapted, and new ones developed, to combat this stress by providing interpreters with regular, protected time to receive support, guidance, and feedback on their work. Supervision offers an additional benefit in that it acknowledges the impact interactions and interpersonal dynamics may have on interpreters, as well as the impact interpreters may also have on their clients. This study makes one contribution to the scant specific research material in this area; much more research into areas of occupational stress among interpreters and into supervisory frameworks of support and accountability is needed. Such research will elucidate both the causes of stress and the development of frameworks to meet the specific needs of the interpreting profession.

7. References

Angelelli, C. V. (2003). The visible colaborator: Interpreter intervention in doctor-patient encounters. In M. Metzger, S. Collins, V. Dively, & R. Shaw (Eds.), *From topic boundaries to omission: New research on interpretation* (pp. 3–25). Washington, DC: Gallaudet University Press.

Angelelli, C. V. (2006). Validating professional standards and codes: Challenges and opportunities. *Interpreting, 8*, 175–193.

Association of Sign Language Interpreters. (2003). *The ASLI mentoring and mentor training programme.* Retrieved from www.asli.org.uk/asli-s-policies-p35.aspx

Atherton, M., Gregg, A., Harrington, F., Laugesen, C., Quinn, G., Traynor, N., & Turner, G. H. (2002). *Addressing communication disadvantage: D/deaf people with minimal language skills.* Lancashire, UK: Univeristy of Central Lancashire.

Supervision and the Interpreting Profession

Bahadir, S. (2001, May). *The empowerment of the (community) interpreter:The right to speak with a voice of one's own*. Paper presented at the International Conference of Critical Link, Montreal, Quebec, Canada.

Baistow, K. (1999). *The emotional and psychological impact of community interpreting*. Paper presented at the 1st BABELEA Conference on Community Interpreting, Vienna, Austria.

Beddoe, L. (2010). Surveillance or reflection: Professional supervision in "the risk society." *British Journal of Social Work, 40*, 1279–1296.

Bégat I., Ellefsen, B., & Severinsson, E. (2005). Nurses' satisfaction with their work environment and the outcomes of clinical nursing supervision on nurses' experiences of well-being: A Norwegian study. *Journal of Nursing Management, 13*, 221–230.

Berk-Seligson, S. (2002). *The bilingual courtroom: Court interpreters in the judicial process*. Chicago, IL: University of Chicago Press.

Bontempo, K., & Van Loggerenberg, V. (2010, February). *Managing occupational stress: Coping strategies for interpreters*. Paper presented at the Supporting Deaf People Online Conference.

Carroll, M. (2006). *Counselling supervision: Theory, skills and practice*. London, UK: Sage.

Connor, M., & Pokora, J. (2007). *Coaching and mentoring at work: Developing effective practice*. Maidenhead, UK: Open University Press.

Crocket, K. (2004). Storying counselors: Producing professional selves in supervision. In D. A. Paré & G. Larner (Eds.), *Collaborative practice in psychology and therapy*. Binghamton, England: Howarth Clinical Practice Press.

Cutcliffe, J. R., Butterworth, T., & Proctor, B. (2001). *Fundamental themes in clinical supervision*. London, UK: Routledge.

Davidson, B. (2000). The interpreter as institutional gatekeeper: The socio-linguistic role of interrpeters in Spanish-English medical discourse. *Journal of Sociolinguistics, 4*, 379–405.

Dean, R., & Pollard, R. (2001). Application of demand-control theory to sign language interpreting: Implications for stress and interpreter training. *Journal of Deaf Studies and Deaf Education, 6*, 1–14.

Dean, R., & Pollard, R. (2005). *Consumers and service effectiveness in interpreting work: A practice profession perspective.* In M. Marschark, R. Peterson, & E. Winston (Eds.), *Interpreting and interpreter education: Directions for research and practice* (pp. 259–282). New York, NY: Oxford University Press.

Dean, R., & Pollard, R. (2009). "I don't think we're supposed to be taling about this": Case conferencing and supervision for interpreters. *Views, Fall,* 2–30.

Dean, R., Pollard, R., & Samar, V. J. (2010). RID research grant underscores occupational health risks: VRS and K–12 settings most concerning. *Views, Winter,* 41–43.

Delisle, A., Durand, M.-J., Imbeau, D., & Larivière, C. (2007). The effects of two interventions on persistent pain: A multiple single-case study among sign language interpreters. *International Journal of Industrial Ergonomics, 37*, 111–123.

Department of Health. (1993). Vision for the Future Report of the Chief Nursing Officer. London: HMSO.

Dickinson, J., & Turner, G. H. (2009). Forging alliances: The role of the interpreter in workplace discourse. In D. P. Ricoy, P. Isabelle, & W. Christine (Eds.), *Interpreting and translating in public service settings: Policy, practice, pedagogy* (pp. 171–183). Manchester, UK: St Jerome Publishing.

Dysart-Gale, D. (2005). Communication models, professionalization, and the work of medical interpreters. *Health Communication, 17,* 91–103.

Edwards. (2006). Clinical supervision and burnout: The influence of clinical supervision for community mental health nurses. *Journal of Clinical Nursing, 15,* 1007–1015.

Feasey, D. (2005). *Good practice in supervision with psychotherapists and counsellors*. London, UK: Whurr.

Figley, C. R. (1995). Compassion fatigue: Towards a new understanding of the cost of caring. In B. H. Stamm (Ed.), *Secondary traumatic stress* (pp. xiv). Lutherville, MD: Sidrann Press.

Freeman, J. K., & Rogers, J. L. (2010). Identifying movement patterns and severity of associated pain in sign language interpreters. *College Student Journal, 44,* 325–339.

Harrington, F. J., & Turner, G. (2001). *Interpreting interpreting: Studies and reflections on sign language interpreting*. Coleford, UK: Douglas McLean.

Hetherington

Harvey, M. A. (2003). Shielding yourself from the perils of empathy: The case of sign language interpreters. *Journal of Deaf Studies and Deaf Education, 8,* 207–213.

Hawkins, P., & Shohet, R. (2006). *Supervision in the helping professions* (3rd ed.). Maidenhead, UK: Open University Press.

Hetherington, A. (2010, February) *Stress, burnout and vicarious trauma: The benefits of supervision for interpreters.* Paper presented at the Supporting Deaf People Online Conference.

Hetherington, A. (2011). A magical profession? Causes and management of occupational stress in the signed language interpreting profession. In L. Leeson, S. Wurm, & M. Vermeerbergen (Eds.), *The sign language translator and interpreter: Preparation, practice and performance.* Manchester, UK: St Jerome.

Hsieh, E. (2008). "I am not a robot!" Interpreters' views of their roles in health care settings. *Qualitative Health Research, 18,* 1367–1383.

Inskipp, F., & Proctor, B. (1995). *The art, craft and tasks of counselling supervision: Part 2. Becoming a supervisor: Professional development for counsellors, psychotherapists, supervisors and trainers.* Twickenham, UK: CASCADE.

James, J. C., & Elizabeth, L. C. (2006). Ethics and accountability in supervision of child psychotherapy. In T. K. Neill (Ed.), *Helping others help children: Clinical supervision of child psychotherapy* (pp. 51–71). Washington DC: American Psychological Association.

Jenkins, P. (1997). *Counselling, psychotherapy and the law.* London, UK: Sage.

Jenkins, P. (2006). Supervising workplace counsellors: Accountability and duty of care. *Counselling at Work, Winter,* 8–10.

Johnson, H., Thompson, A., & Downs, M. (2009). Non-western interpreters' experiences of trauma: The protective role of culture following exposure to oppression. *Ethnicity and Health, 14,* 407–418.

Jones, A. C. (2009). Listening as a method of addressing psychological distress. *Journal of Nursing Management, 17,* 352–358.

Lee, J. (2009). Conflicting views on court interpreting examined through surveys of legal professionals and court interpreters. *Interpreting, 11,* 35–56.

Malcolm, K. (2010, February). *Vicarious trauma: Implications for interpreters.* Paper presented at the Supporting Deaf People Online Conference.

McDaid, S., & Stewart-Moore, J. (2006). Supervision: How can the gap be bridged? *Midwives, 9*(5), 180–183.

Morton-Cooper, A., & Palmer, A. (2000). *Mentoring, preceptorship and clinical supervision: A guide to professional roles in clinical practice* (2nd ed.). Oxford, UK: Blackwell Science.

Mullarkey, K., Keeley, P., & Playle, J. (2001). Multiprofessional clinical supervision: Challenges for mental health nurses. *Journal of Psychiatric and Mental Health Nursing, 8,* 205 –211.

National Registers of Communication Professionals Working with Deaf and Deafblind People (NRCPD). (2010). *Code of Conduct for Communication Professionals.* Retrieved from www.nrcpd.org.uk/documents/code_of_conduct/NRCPD_Code_of_Conduct.pdf

Page, S., & Wosket, V. (2001). *Supervising the counsellor: A cyclical model* (2nd ed.). Hove, UK: Brunner-Routledge.

Parsloe, E., & Wray, M. J. (2005). *Coaching and mentoring: Practical methods to improve learning.* London, UK: Kogan Page.

Pollard, R. (1998). Psychopathology. In M. Marschark & M. D. Clark (Eds.), *Psychological perspectives on deafness* (pp. 171–197). Hillsdale, NJ: Erlbaum.

Qin, J., Marshall, M., Mozrall, J., & Marschark, M. (2008). Effects of pace and stress on upper extremity kinematic responses in sign language interpreters. *Ergonomics, 51,* 274–289.

Reid, K., Flowers, P., & Larkin, M. (2005). Exploring lived experience. *The Psychologist, 18,* 20–23.

Rogers, C. R. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology, 21,* 95–103.

Roy, C. B. (2000). Training interpreters: Past, present and future. In C. B. Roy (Ed.), *Innovative practices for teaching sign language interpreters.* Washington, DC: Gallaudet University Press.

Sande, H. (1998). Supervision of refugee interpreters: 5 years of experience from northern Norway. *Nordic Journal of Psychiatry, 52,* 403–409.

Supervision and the Interpreting Profession

Smith, J. A., Larkin, M. H., & Flowers, P. (2009). *Interpretative phenomenological analysis: Theory, method and research*. Los Angeles, CA: Sage.

Sterner, W. R. (2009). Influence of the supervisory working alliance on supervisee work satisfaction and work-related Stress. *Journal of Mental Health Counseling, 31,* 249–263.

Tate, G., & Turner, H. (1997). The code and the culture: Sign language interpreting—In search of the new breed's ethics. *Deaf Worlds, 13*(3), 27–34.

Tribe, R. (1997). A critical analysis of a support and clinical supervision group for interpreters working with refugees located in Britain. *GROUPWORK, 10*(3), 196–214.

Tribe, R. (1999). Bridging the gap or damming the flow? Some observations on using interpreters/bicultural workers when working with regugee clients, many of whom have been tortured. *British Journal of Medical Pychology, 72,* 567–576.

Turner, G. H. (2005). Toward real interpreting. In M. Marschark, P. Rico, & E. A. Winston, (Eds.), *Sign language interpreting and interpreter education: Directions for research and practice* (pp. 29–56). New York, NY: Oxford University Press.

Wadensjo, C. (1998). *Interpreting in interaction*. London, UK: Longman.

Weibel, R. (2009, September). *Keep the balance: Holistic stress prevention*. Paper presented at the Sound Minds in Sound Hands EFSLI Conference , Tallinn, Estonia.

Young, A. M. (2005). Stress and well-being in the context of mentoring processes: New perspectives and direction for future research. In P. Perrewe & D. C. Ganster (Eds.), *Exploring interpersonal dynamics*. Oxford, UK: Elsevier JAI.

57