
Reviewed by Haoda Feng (Bohai University)

This practical handbook grows out of the very popular previous international publication *Introduction to Healthcare for Interpreters and Translators* (Crezee 2013), and narrows down its intended readership to practising interpreters and translators, terminologists, translation educators, as well as language researchers, who specialize in translation/interpreting with the English-Japanese language pair in healthcare related settings and who attempt to update their translation memory system by adding medical jargon. Compared with the previous publication (2013), this updated version takes account of intercultural issues by adding exceptionally useful Japan-related context-specific contents and naturally incorporating a wide range of English-Japanese glossaries into certain relevant sections. The added contents would familiarize Japanese-speaking interpreters/translators with frequently used medical terms in English and help readers outside the Japanese culture gain a better understanding regarding the Japanese healthcare system.

For translators and interpreters, bilingual competence and extra-linguistic competence are complementary and are equally important when they intend to construct a solid translation competence system. According to PACTE (2003), this sort of extra-linguistic knowledge is referred to as “declarative knowledge”, that is, the knowledge “about the world in general and special areas” (p. 59). However, as PACTE’s model indicates, chances are that translators and interpreters may be faced with the difficulty in using appropriate technical terms when they are dealing with a task in a particular work area or setting and their declarative knowledge system about this area is not yet well formed. In such a situation, translators/interpreters may either go for advice from subject-matter experts (although such advice is not always available) (Feng and Shi 2016), or refer to relevant guide books which aim to associate bilingual and extra-linguistic knowledge for interpreters/translators in a particular special area. In addition, interpreters and translators would need to consider intercultural factors in that the work rationale for the same special area may vary across different cultures and the terminology management skills they use may also differ in intercultural communication. With respect to this, a handbook concentrating on context-specific discourse, like *Introduction to*...
**Healthcare for Japanese-speaking Interpreters and Translators**, would appear to be a great help for interpreters and translators to fill ‘gaps’ between the source culture and the target culture, and effectively build up their declarative knowledge with jargon and skills to reduce the impact of intercultural misunderstandings to a minimum.

This book is composed of 29 chapters that are organized into three major parts. Part I (Chapter 1 to Chapter 4) starts with an introduction to healthcare interpreting, particularly healthcare settings in Japan, covering a broad spectrum of the subjects in the development of the translation profession. Crezee and Asano emphasize the importance of theoretical knowledge of healthcare settings and terminology, and summarize three important strategies involved in interpreter training: (a) allowing trainee interpreters to paraphrase complicate Latin-language-oriented medical jargon with plain language, and vice versa; (b) providing immediate assessment and feedback on interpreters’ performance; (c) familiarizing trainee interpreters with work ethics in the translation profession. The authors’ viewpoints largely correspond to Gonzalez Davies’ (2004) proposal that interpreter training should focus on “theoretical and practical knowledge of the professional code and conduct” and “providing semi-authentic simulated opportunities for interpreting practice” (p. 8). Chapter 3 “The culture of Japanese medicine”, by Michelle Henault Morrone, demonstrates Japan’s shifting social structure and the hierarchies which exist within its medical system by providing specific examples of patient expectations for hospital stays and physician visits. This case study indicates that interpreters act as mediators between different cultures, and that they would need to be aware of cultural issues and know how to respect patients’ cultural beliefs and render accurate interpretation to both doctors and their patients. With respect to this, the authors introduce to readers the criteria of managing medical terminology and provide examples frequently used in healthcare settings. Generally speaking, Part I gives rise to many new areas regarding what we can expect of interpreters as far as a particular culture is concerned (e.g. Japanese culture), thus widening the boundaries to accommodate Translation Studies.

Part II (Chapter 5 to Chapter 17) covers nearly all the topics that interpreters/translators would come across in health care settings, ranging from primary physicians and general practitioners to mental health and oncology. Each topic is wisely designed by the authors, in which readers are provided with a clear picture of healthcare system and can easily recognize and understand the features and idiosyncratic signs of language used in healthcare settings. In addition, the authors provide a great number of questions that doctors may ask and the potential corresponding answers that patients may give in each context, with which interpreters can strengthen their understanding about healthcare settings and get mentally prepared before they attempt a healthcare interpreting task. Noteworthy
is that, compared with the previous publication (2013), this version also includes a special chapter (Chapter 8 “Characteristics of the Japanese healthcare system”), in which Asano and Murai provide readers with a comprehensive introduction of the Japanese insurance system and related regulations, and discuss the standards of third party accreditation. In particular, they share with readers their experience in establishing and developing the Aichi Medical Interpretation System under the joint efforts of local municipal communities, healthcare organisations and universities in the Aichi Prefecture. This system is the first of its kind in Japan and can provide customized services based on interpreters’ expertise. Asano and Murai’s study indicates that the rationale of situated learning can be wisely designed and used in healthcare settings when intercultural issues are concerned. In other words, if this book is used as a guide book, this part will not only help trainee interpreters to quickly familiarize themselves with the general procedure of medical consultation in Japan, but also allow translation educators to notice the difference between the medical systems of different countries, and provide effective strategies to help trainee interpreters develop their empathy and insight into cultural differences.

Compared with the previous publication (2013), this book (Chapter 18 to Chapter 29) does not show much obvious change in Part III, and it is carried out in terms of healthcare specialties, specifically including neurology, cardiology, the respiratory system, haematology, orthopaedics, muscles and the motor system, the sensory system, the immune and lymphatic system, the endocrine system, the digestive system, urology and nephrology, and the reproductive system. Nevertheless, I notice that this part is particularly useful because these chapters involve a large number of glossary pairs relating to organs as well as names of diseases and symptoms. As Crezee and Asano point out, the key to recognizing and memorizing the seemingly difficult terms lies in interpreters’ (and translators’) understanding of roots and affixes that derive from the Latin language family. The authors also emphasize the importance of categorizing terms involving the same affix. For instance, myoelectricity, myoelectrometer, electromyogram, electromyography and myohemoglobin contain the same affix (-)myo-(meaning “muscle”), and they can fall under the category in relation to the notion “muscle”. The logical categorization of these rarely seen medical terms may help interpreters and translators depict a ‘mental map’ regarding the rationale of biology and pathobiology, and enable them to build up step by step a large well-organized terminology database in various healthcare settings. For translators using a software tool (e.g. SDL Trados and Déjà vu) for translating Japanese into English (or English into Japanese), this terminology management approach also demonstrates its validity because translators can directly align glossary pairs mentioned in this book with the translation memory system. This would save translators time and effort collecting and
processing medical terms from a large number of healthcare-related dictionaries and reference books.

Generally speaking, the fact that this updated version keeps a number of contents from its previous publication, does not detract from this book’s value, however. This culture-oriented expansion of context-specific interpreting and translation will remain an important contribution to Translation Studies. In terms of what this book can offer us as interpreters, translators, terminologists and translation educators, it appears that many points mentioned above may be applied to interpreting practice and in-class translation teaching wherever the English-Japanese language pair is concerned. This book features precise and concise language, and is very easy to follow. Therefore, it is warmly recommended to the terminologists who specialize in terminology study in healthcare settings and anyone who shows an interest in medical interpreting and translation.

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References


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