



What's in a Word?

An Overview to Understanding Interpreting and Translation in Health Care¹

As patient populations become increasingly diverse, hospitals and health care providers often rely on interpreters and translators to ensure the provision of high-quality patient-centered care to individuals with limited English proficiency (LEP). However, as the acknowledgement of the importance of language access grows, there is widespread misunderstanding of the differences between interpreting and translation. The media often use the terms interchangeably, and contribute to the perception of the general public that translators and interpreters are simply parrots, copiers, or walking dictionaries. But competent interpreters and translators must possess a specialized set of skills. Both are agents in creating understanding between people, but they do so by different means.

To frame the differences between interpreting and translation, an analogy may be helpful, keeping the end products for each in mind: An interpreter is hired and paid for the time delivering a service (that is, for the time spent interpreting between two people). This is analogous to hiring a pianist and paying for his or her time. What is not paid for, however, are the years of piano lessons, the composition of the music, the manufacture of the piano, and other factors that result in the rendition of the tune. In the case of translations, the focus is on the end product (a translated document), similar to buying a cake rather than buying the baker or the kitchen staff.

This difference is why we have deliberately used the terms “interpreting” and “translation”. While the alternate terms “interpretation and translation” or “interpreting and translating” are parallel to one another, “interpreting” underscores the emphasis on the process involved in interpreting, and “translation” emphasizes the final product.

What is Interpreting?

Interpreting is the process of understanding and analyzing a spoken or signed message, and re-expressing that message faithfully, accurately and objectively in another language, taking the cultural and social context into account.² The purpose of interpreting is to enable oral communication between two or more individuals who do not speak each other's languages.³

What is Translation?

Translation is the conversion of a written text into a corresponding written text in a different language.⁴



In other words, interpreting refers to communication that is spoken, or signed, while translation refers to written communication.

A Side-by-Side Look at Interpreting and Translation

Figure 1 displays characteristics of Interpreting and Translation which demonstrate that while both share many common denominators, there are, issues unique to each.

Figure 1		
A Side-By-Side Look at Interpreting and Translation		
Interpreting	Both	Translation
Both overcome language barriers to make communication possible.		
Both require an advanced level of proficiency in both the source and target languages.		
Both reflect the cultural terms, expressions and idioms that bear on the meaning of the content. Both must capture any expression or nuance in meaning to maintain the impact of the original.		
Both require special aptitudes in the language of health care terminology and health care systems.		
Interpreting is a process of understanding and analyzing a spoken or signed message, and re-expressing that message faithfully, accurately and objectively in another language, taking the cultural and social context into account.		Translation is a process that requires analysis, text conversion, proof-reading, and editing.
Interpreters work “in the moment” or “live” and are compelled by the mode of interpretation. Interpreters may consult dictionaries or utilize other resources, but the time between each language exchange is only a matter of seconds and minutes.		Translators work in a different timeframe. They must read an entire text for comprehension before starting the translation and consult dictionaries and other resources for correct grammar and terminology.
Interpreters mostly work in public (in a hospital or clinic, for example).		Translators work in private, including at home.
Interpreters must be present at a specific location, i.e. onsite at a hospital or clinic, or at a location that has an individual line for telephonic or video interpreting.		Translators research the material and language to be translated; this may be done in many different locations.
Interpreters must rely on exceptional memory and note-taking skills for accuracy in verbal expression.		Translators must rely on exceptional research skills to assure accuracy in written work.

Requisite Skills and Qualifications of an Interpreter and Translator

As you can see from Figure 1, bilingualism alone is not sufficient to be an interpreter or a translator, and the same bilingual person can not necessarily do both. Looking for certification as a means to ensure quality in the selection of an interpreter and/or translator is not helpful: certification for health care interpreters is being developed although certification for health care translators is not available.

Fortunately, other resources do exist, and have contributed significantly to the advancement of this specialized field. These include assessment tools developed by private companies, training programs that award “Certificates of Completion” or “Certificates of Attendance” to successful participants, and a general certification from the American Translators Association (ATA) for translators.

In addition, the National Council on Interpreting in Health Care (NCIHC) has developed a National Code of Ethics for Interpreters in Health Care and National Standards of Practice for Interpreters in Health Care. The ATA has developed a Code of Conduct and Business Practices for translators. These tools have proven to be vital in the development of assessment and training programs.

Given the skills required to skillfully work as either an interpreter or translator, hiring each can be challenging. Knowing which skill sets to look for as well as how to measure skills beyond language proficiency will assist human resources professionals in properly evaluating candidates for each position. In either case, having a quality control plan in place to ensure the quality of services is important for managers of language services.

Interpreting and translation are unique tasks best undertaken by trained, qualified professionals. To ensure the provision of high-quality patient-centered care to LEP individuals, hospitals and health care systems should employ proper selection, training, and ongoing assessment protocols. While some individuals may be skilled in both tasks, some are better suited to one over the other. Understanding the differences and commonalities between interpreting and translation will give administrators insight into the often “misinterpreted” field of language services.

1 This publication was made possible with the generous support of The California Endowment. For more information on the differences between interpreting and translation, see NHeLP, NCIHC & ATA, *What's in a Word: A Guide to Understanding Interpreting and Translation in Health Care*, available at www.healthlaw.org. © 2010 by the National Health Law Program.

2 ASTM, *Standard Guide for Language Interpretation Services* (F 2089-01 (reapproved 2007)).

3 NCIHC, *The Terminology of Healthcare Interpreting – A Glossary of Terms* (October 2001, revised August 2008).

4 NCIHC, *The Terminology of Healthcare Interpreting – A Glossary of Terms* (October 2001, revised August 2008).