

The Deaf Professional– Designated Interpreter Model

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SINCE THE advent of Public Law 94-142 (Education for All Handicapped Children Act), Public Law 101-336 (Americans With Disabilities Act of 1990), the emergence of sign language linguistic studies, and the Deaf President Now movement, more deaf people have moved into a relatively new frontier—that of receiving high levels of education and professional positions. This book consists of chapters written by deaf professionals and interpreters who work in a variety of settings such as medical, legal, and education. The purpose of this edited volume is to encourage and inform sign language interpreting students, practicing interpreters, and deaf professionals of current practices in this nontraditional interpreting situation in which the deaf professional is the person in power and the recipient of services is the hearing person.

This volume's chapters candidly explore the deaf professionals' and designated interpreters' experiences, advice, ideas, anecdotes, expectations, and resources to provide insight into the relationships between them in specific disciplines with respect to ethics and the interpreting processes. General themes that the chapters focus on include (a) how deaf professionals describe their interpreting needs; (b) what strategies teams of deaf professionals and their interpreters have developed to make the process work well within their discipline; (c) setting-specific (i.e., medical, legal, etc.) and situation-specific (i.e., social, meeting, etc.) demands; and (d) issues that arise (power, boundaries, ethics, etc.). This chapter summarizes the themes that are common across the other chapters and proposes the Deaf Professional–Designated Interpreter Model.

The Deaf Professional–Designated Interpreter Model presents a relatively new paradigm of interpreting. Any individual and interpreter who have worked together for a significant period of time have developed some specific interpreting techniques, most likely without realizing it. As evident in this volume of chapters written by deaf professionals and designated interpreters, there are deaf professionals working closely with designated interpreters in various countries and disciplines. The purpose of this chapter, as well as this volume, is to bring together a collection of stories, thoughts, and studies on deaf professional–designated interpreter relationships. This collection sheds light on the practices in this emerging paradigm.

The Deaf Professional–Designated Interpreter Model described here is broad because there is no “one size fits all” set of standards. Describing the deaf professional–designated interpreter working relationship is almost like describing the

concept of marriage with only a few couples to use as examples. Designated interpreting, here, represents the marriage between the field of interpreting and the deaf professional's discipline or work environment. In this chapter, we review and discuss existing literature on this topic to bring to the forefront the characteristics and practices of designated interpreters. It was necessary for us to rely heavily on the chapters in this volume because this collection is the first of such writings on this topic.

The number of deaf professionals appears to be growing worldwide. In this volume, the term *deaf professionals* refers to any deaf or hard of hearing employees, trainees, or interns who require interpreting services to access the level of communication needed for them to learn, perform their job responsibilities, or both. The principles and practices discussed here are often relevant regardless of the type of interpreting provided. There are common features in this new discipline that must have emerged as the result of two factors: (a) the advancement of the field of sign language interpreting and (b) more deaf individuals achieving professional positions where their contributions outweigh the cost of interpreting services. The situations discussed here are the ones in which a designated interpreter is a reasonable accommodation and is necessary for the deaf professional to perform his or her job duties.

Interpreting done through a traditional nondesignated means requires fluency in a sign language or a specific communication mode (e.g., cued speech). The many individuals hired as "interpreters" need to be *extremely* skilled and competent (Napier, McKee, and Goswell 2005) to provide fully accurate interpreting. Designated interpreting requires additional skills on top of excellent interpreting skills. Designated interpreting is not possible if an interpreter embraces the philosophy that he or she is a neutral conduit (see Metzger 1999). Many of the actions that designated interpreters need to perform are in conflict with the Neutral Conduit Model (Napier, Carmichael, and Wiltshire this volume). Some (Roy 1993; Metzger 1999) have argued that interpreters in almost any given situation cannot adequately perform their job if they wish to assume the position of a neutral conduit; however, this discussion is beyond the scope of this chapter. The differences between the Deaf Professional-Designated Interpreter Model and other interpreting models are discussed in depth in Campbell, Rohan, and Woodcock's chapter in this volume. Generally, existing models of sign language interpreting work inexactly for the situations in which designated interpreters find themselves because existing models are based on a different power distribution wherein the deaf person is the client and the hearing person is the professional.

Cook (2004) wrote about designated interpreting, which she termed "diplomatic interpreting," and described that "the highly technical nature of such work, the status of the Deaf individual and the daily interactions the Deaf professional has with hearing colleagues differentiates this form of interpreting from interpreting in the general public" (58). Cook believes that one of the key components of this form of interpreting is the mutual trust between the deaf professional and designated interpreter as well as the designated interpreter's "intense interest in and commitment to the work of the DP [deaf professional]" (58-59). Cook explains

that the "Deaf professional's goals become the interpreter's goals" (64) and that being impartial or neutral is not one of the designated interpreter's goals.

The designated interpreter is a dynamic and active participant in the deaf professional's environment, and his or her actions influence communication outcomes and the deaf professional's work performance. The designated interpreter has a thorough understanding of the deaf professional's role, the roles of others in the workplace and those who have a relationship with the workplace (contractors, customers, etc.), the work culture, and the jargon used. The knowledge and skills that designated interpreters need to learn depends on the deaf professional with whom they work and the environment in which they work. Hence, the designated interpreter for a specific deaf professional might not be the appropriate designated interpreter for another deaf professional, although common features and methods can be generalized to most deaf professional-designated interpreter relationships.

Designated interpreting involves specialized knowledge of content, vocabulary, and social roles (Campbell, Rohan, and Woodcock this volume). The designated interpreter needs to function on an equal footing with the deaf professional's colleagues and be able to communicate with them with ease (Kurlander this volume) because this ability enables the designated interpreter to deal with urgent issues immediately. An assigned interpreter who does not know the names, roles, and workplace practices of the deaf professional's colleagues would not be able to jump into the assignment and work effectively and seamlessly as a member of the work team or work culture. In most settings, the designated interpreter needs to be available at all times and is always on call, even during down time.

The deaf individual who works with a designated interpreter needs to spend a portion of his or her work hours training and continuously updating the designated interpreter. In the beginning of a deaf professional-designated interpreter relationship, the deaf professional needs to take a significant amount of time to train the designated interpreter. The deaf professional needs to have patience with the designated interpreter's limitations and learning curve. Gold Brunson, Molner, and Lerner illustrate this process in one chapter of this volume. They discuss how the insertion of a third person in a psychotherapist-patient relationship causes some dynamic issues that hearing therapists do not have to face. Before hearing psychotherapists can practice on their own, they receive at least several years of training and supervision on how to use their voice and carefully select what to say when working with mentally ill patients. There is no way to provide an interpreter with all of this information fifteen minutes or even one hour before a therapy session. The process of becoming a designated interpreter can be a challenge for some interpreters because it requires them to acknowledge that they do not initially have the skills or knowledge necessary for optimal performance. It also can be a challenge for deaf professionals, especially those who are new to working with a designated interpreter.

The adjustment into the role of a designated interpreter often requires avoiding the use of some techniques that worked elsewhere but that are now not applicable. For example, interpreters who have experience interpreting for deaf college

students might assume that deaf professors have the same needs as students, which is far from the truth (see Campbell, Rohan, and Woodcock this volume). New designated interpreters need to learn the deaf professional's job position, work environment, and how to behave and perform their own duties within that environment. Designated interpreters need to become fully integrated into the deaf professional's workplace and become an efficient member of the deaf professional's work team.

THE DESIGNATED INTERPRETER AS A MEMBER OF THE WORK ENVIRONMENT

The primary factor that differentiates a designated interpreter from a non-designated interpreter is that the former is a member of a professional team, not an outsider. The designated interpreter's membership on the professional team is not independent of the deaf professional. The deaf professional and designated interpreter work together as a microteam within the larger macroteam of the deaf professional's work environment. The designated interpreter has to learn how to "talk the talk and walk the walk" to blend in and to successfully facilitate communication so the deaf professional can work without any more challenges than the deaf professional's colleagues may experience. When the deaf professional-designated interpreter team works effectively, the deaf professional is able to focus on his or her career and not worry about interpreting issues. The goal is to achieve seamlessness.

The adaptation into the work environment takes time. At first, it is a game of catching up, and then it becomes a game of constantly keeping up because workplaces evolve, new individuals are hired, and new terms and concepts are introduced. New designated interpreters need to observe the environment carefully to learn how to fit in. Optimally, new designated interpreters would first observe existing designated interpreters (with other deaf professionals if necessary) and the deaf professional's hearing colleagues performing their duties. For example, a deaf obstetrician and gynecologist (OB/GYN) who works with a team of designated interpreters has the advantage of providing new designated interpreters observational opportunities and time for her designated interpreters to train new designated interpreters (Earhart and Hauser this volume).

Regardless of the new designated interpreter's skill or prior experience as a designated interpreter, he or she would need to learn the deaf professional's role, others' roles, and the purpose of the occupation. The learning of roles and occupational practices is another game of catching up and keeping up with the situation. Kurlander (this volume) explains that this effort involves understanding the corporate culture as well as how to behave, dress, and communicate within it. This task is a complicated one (see Gold Brunson, Molner, and Lerner in this volume for discussion) that requires active learning that is not typically required in nondesignated interpreting situations. The designated interpreter needs to have a good sense of the deaf professional's role to understand the type of professional relationships that the deaf professional has with others. Goswell, Carmichael, and

Gollan (this volume), describe the deaf professional-designated interpreter process and relationship in a situation where a deaf professional directs a film production. The designated interpreters needed an intuitive sense of the deaf director's perception, goals, and role, which also required them to have a solid understanding of the roles of all of the individuals one would see in the credits of a movie. The importance of the designated interpreter's understanding of the roles of team members is discussed in a number of chapters in this volume. For example, Earhart and Hauser's chapter discusses in depth the different roles of the members of a medical team.

A new designated interpreter would need to be open to the idea of becoming a member of the professional team. This membership on the team can be a challenge for interpreters who wish to remain impartial and outside of the professional team. The designated interpreter must learn how to respect the needs of the professional team, which requires a willingness to learn the culture and organizational practices of a deaf professional's discipline. Meanwhile, the deaf professional needs to be willing to let the designated interpreters into his or her inner circle, which often encompasses more than the deaf professional's work circle. This level of familiarity is a challenge for any designated interpreter because the socialization has to be neutral, and neutrality can cause problems. Pouliot and Stern (this volume) explain that there is a fine line between being too involved and not being involved enough. Too much neutrality can cause tension between the deaf professional and those with whom the deaf professional interacts frequently. However, not enough neutrality could shift the spotlight off the deaf professional and onto the designated interpreter.

The designated interpreter often acts as the deaf professional's ears when the deaf professional is not in the room or is not attending to background conversations. A lot of incidental learning is not directly available to deaf professionals but is available to their hearing peers. The designated interpreter is the holder of this information for the deaf professional and needs to share what information the designated interpreter judges to be important to the deaf professional (Cook 2004). In the case of the deaf director (Goswell, Carmichael, and Gollan this volume), her designated interpreters had to pass on seemingly incidental information such as gossip and banter floating around for her to get an ongoing sense of the mood and morale of the crew she was leading. The lack of this information could have a negative effect on her ability to direct the film production and, ultimately, on the film itself. It is difficult for the deaf professional to do the job if the designated interpreter is out of the loop of what is going on at the workplace (Goswell, Carmichael, and Gollan this volume). As a result, the deaf professional needs to keep the designated interpreter updated, and the designated interpreter needs to be involved in the work environment enough to remain in the loop. If the deaf professional has more than one designated interpreter, then the other designated interpreters need to help one another stay in the loop and share their tactics, signs, and habits (Earhart and Hauser this volume; Goswell, Carmichael, and Gollan this volume).

Designated interpreters interpret not only the deaf professional's work conversations but also social conversations in informal and formal social settings. The

importance of social interpreting (see Clark and Finch this volume for discussion) as a part of the designated interpreter's role cannot be minimized. Campbell, Rohan, and Woodcock (this volume) further explain why gossip is important in the academic setting and why this incidental information must be passed to the deaf professional. Consider, for example, that a new academic professor's work performance over a period of up to seven years or more, is evaluated by his or her peers when that professor is up for tenure. Thus, for a deaf professional in this position, his or her peers decide whether they want to recommend that the deaf professional stay employed based on whether the deaf professional contributes appropriately and fits well into the department. Campbell, Rohan, and Woodcock (this volume) discuss the peer assessment process, the importance of social interpreting, and how the designated interpreter can easily harm the deaf professional's ability to achieve tenure.

A good deaf professional-designated interpreter relationship allows the deaf professional to socialize fully in the workplace. Having a designated interpreter around helps others to become comfortable with the interpreting process (Pouliot and Stern this volume). The designated interpreter must remain in the role of an interpreter in social situations, which can pose a challenge (see Clark and Finch this volume). One designated interpreter described that "the trick was to accept his role and preserve the position yet develop a sense of how little of oneself should be spread into the outcomes, implications, and dynamics of the situation" (Pouliot and Stern this volume, p. 138). Another designated interpreter suggested that it is necessary to stay unobtrusively in the background as much as possible (Gold Brunson, Molner, and Lerner this volume). The designated interpreter must make decisions that would maximize, and not harm, the deaf professional-designated interpreter relationship and would maximize the deaf professional's ability to immerse him- or herself into the workplace.

The level of personal involvement the designated interpreter has in social situations depends on not only a lot of external factors but also the designated interpreter's ability to handle having two or more roles with the same individuals. Those who know they do not do well in dual relationships might prefer to stay in the background whereas those who are comfortable and skilled at dual relationships could be more involved while protecting the boundaries of their role. Many hearing individuals in the deaf professional's work environment may wish to socialize with the designated interpreter. The designated interpreter needs to remember the he or she is always on duty (see Earhart and Hauser this volume for discussion). Kurlander (this volume) suggests that "interpreters who have a need to be seen and heard, to prove themselves . . . , or to overshadow the deaf professional are not suitable for [a designated interpreter position]" (Kurlander this volume, p. 110).

The designated interpreter must be conscious of the representation of the deaf professional at all times (Kurlander this volume). He or she needs to socialize with others to become recognized as a member of the deaf professional's work team. As Kurlander explains, "the more comfortable the coworkers are with the interpreter, the easier it is for the deaf professional to assimilate into the workplace"

(p. 121). Initially, hearing individuals will most likely ask a lot of role-, language-, and deafness-related questions when the deaf professional is not around. Some deaf professionals believe that it is the designated interpreter's role to answer these questions (see Campbell, Rohan, and Woodcock this volume for discussion) to get past that level of social interaction and to satisfy the curiosity of the deaf professional's coworkers. The more people who know the answers, the more people who will be available to answer those types of questions. When the designated interpreter's role is clear and the deaf professional's coworkers work with the deaf professional-designated interpreter team, such questions will occur less frequently and, often, the coworkers can even answer similar questions for the deaf professional and designated interpreter when asked by others. There are possible negative consequences if the deaf professional's colleagues do not understand the boundaries of the designated interpreter's role or feel uncomfortable around the designated interpreter. Kurlander (this volume) explains that this misunderstanding of role can cause tension between the designated interpreter and coworkers. In some situations, this kind of misunderstanding could mean that the designated interpreter is causing tension at the workplace in which case the deaf professional may need to put forth more social effort in establishing and maintaining relationships with coworkers. Thus, it is clear that the designated interpreter must walk a very fine line between being an integral, natural part of the environment and not being the deaf professional's representative but, rather, realizing that it is the deaf professional's position to represent herself or himself.

THE DEAF PROFESSIONAL- DESIGNATED INTERPRETER RELATIONSHIP

The deaf professional-designated interpreter relationship is one that involves teamwork, mutual respect, and trust. The importance for interpreters and deaf professionals to develop working relationships has been recognized in the past (Cokely 2005; Liedel and Brodie 1996). The deaf professional-designated interpreter relationship is not established immediately; it develops over time and needs to be maintained. The deaf professional and designated interpreter need to see each other as equal partners in a team. This relationship can be harmed by egos and neglect. If the relationship is neglected, it may become difficult for the deaf professional and designated interpreter to trust each other. The deaf professional needs to trust the designated interpreter's judgment as to what and how to interpret. The designated interpreter needs to trust that the deaf professional will provide feedback when necessary so the designated interpreter's judgment and skills will continuously improve. The designated interpreter must also trust and respect the deaf professional's professional position and knowledge.

One factor that influences the beginning of the relationship is what stereotypes the deaf professional and designated interpreter bring to the partnership. Deaf professionals might have experienced working with many interpreters throughout a long period of their deaf lives. Some deaf professionals might be initially doubtful of a new designated interpreter's skills. Interpreters new to the designated

interpreter role have most likely interpreted for hearing professionals but not regularly for deaf professionals. The shift in the power from hearing professional–deaf consumer to deaf professional–hearing customer is a paradigm change for many (see Cook 2004 for discussion). Interpreters who usually work with deaf individuals who are not typically in a position of power might have developed a paternalistic or “helping” attitude. Kushalnagar and Rashid (this volume) discuss the attitudes and stereotypes that the deaf professional and designated interpreter bring to the situation and the possible negative consequences those perspectives have on the interpreting process. They explain that when deaf professionals define and control the interpreting situation, some interpreters experience a cognitive dissonance—a sense of tension from conflicting thoughts such as “this is not the way I work” and “this is the way a deaf professional wants me to work.” Cognitive dissonance causes people to create new beliefs or modify existing ones to reduce the tension.

It is sometimes a challenge for experienced interpreters to become a designated interpreter because it involves a mind-set different from that found in other interpreting situations (see Kushalnagar and Rashid this volume for discussion). Some interpreters are overly confident in their abilities. They may believe that their performance is perfectly satisfactory and appropriate, and they have difficulty understanding why the deaf professional is providing constructive feedback. They might interpret that feedback as an indication that the deaf professional does not know how to work with skilled interpreters or is not familiar with the interpreting process and may not recognize that it is necessary for any designated interpreter to adapt his or her performance to match the needs of the deaf professional.

The deaf professional and designated interpreter need to first explicitly discuss how they want to work together. Most deaf professionals have their own idiosyncratic way to retain authority and establish rapport with others (see, for example, Rohan 2006). The deaf professional and designated interpreter need to continuously negotiate how to work together (Beaton and Hauser this volume; Campbell, Rohan, and Woodcock this volume; Kurlander this volume). This negotiating requires the deaf professional and designated interpreter to be comfortable raising issues with each other. Problems with the relationship, with communication, or with the interpreting process need to be discussed on the spot or as soon as possible. It is important for the deaf professional and designated interpreter to structure time to allow these conversations to take place easily (Campbell, Rohan, and Woodcock this volume; Kurlander this volume) and for employers to realize that this process is necessary.

The deaf professional and designated interpreter need to spend enough time together to be able to develop some “mind-reading” skills, which are really prediction skills (see Cook 2004 for discussion). These prediction skills are possible because of the designated interpreter’s knowledge of the deaf professional and his or her role with the deaf professional. A successful deaf professional–designated interpreter relationship would be one where the designated interpreter can predict what the deaf professional would say and the deaf professional realizes it. This level of teamwork involves the deaf professional and designated interpreter being

able to sense what the other is thinking and to know the limits of each other. When necessary, the deaf professional will be able to alter language choices to match the designated interpreter’s knowledge and skills. The designated interpreter will also alter language choices depending on the situation and who is interacting with the deaf professional.

Deaf professional–designated interpreter communication in the midst of an interpreted conversation is another necessary component of this relationship (see Napier, Carmichael, and Wiltshire this volume for discussion). This type of communication between deaf professionals and interpreters is not a new one (Hodek and Radatz 1996; Hurwitz 1986). Napier, Carmichael, and Wiltshire (this volume) conducted a discourse analysis of the use of pauses, nods, and eye contact between two designated interpreters and a deaf professional. The setting was a formal presentation by the deaf professional, and the designated interpreters primarily performed sign-to-voice interpreting for an audience. The authors found that these communication markers were used deliberately and strategically by the deaf professional and designated interpreter for signaling comprehension, marking episodes, making clarifications, and controlling the pace of presentation. Napier, Carmichael, and Wiltshire suggested that this communication empowers the deaf professional to be in control of the situation.

Much of the deaf professional–designated interpreter relationship develops outside of the interpreting situation such as between interpreting assignments and at other times when the deaf professional and designated interpreter have an opportunity to talk. Information obtained during those casual conversations can be used later by the designated interpreter for reference and clarity of interpretation. Goswell, Carmichael, and Gollan (this volume) explain that the deaf director’s ability to be friends with the designated interpreters outside of work was an interpersonal resource that assisted trust and communication at work. It helped them develop a deeper understanding of one another’s tastes and preferences, which led to a strong working relationship (also see Cook 2004).

The deaf professional has a large role in the deaf professional–designated interpreter relationship. The deaf professional needs to have an understanding of the interpreting process, interpreter’s ethics, and standards of practice and trends in the field of interpreting. Without this knowledge and understanding, the deaf professional might assume that any assigned interpreter would naturally know what to be aware of and might assume that the interpreter would unconditionally adapt to the setting appropriately. This assumption could easily cause problems and disable the deaf professional from being able to perform job duties optimally.

Deaf professionals also need to realize that the designated interpreter is not a neutral conduit. It is not possible for interpreters to be wholly impartial in some situations (Cook 2004). For example, Gold Brunson, Molner, and Lerner (this volume) share that the designated interpreter working with the deaf therapist sometimes would be affected by sensitive stories and issues brought up in psychotherapy sessions. The content sometimes could raise the interpreter’s emotions, especially if the interpreter could relate with the patient. At other times, mentally ill patients might use the interpreter to displace or project emotions, which

can put the interpreter in an awkward position. The deaf therapist in the chapter mentioned above had to take time to debrief with the interpreter after such sessions. This debriefing enabled the interpreter to process the session and any emotions it might have raised. Psychotherapists, especially those in training, need to do the same with colleagues. If the deaf therapist did not take this responsibility for taking care of her designated interpreter, then the designated interpreter would become burned out and might not be able to perform optimally.

There is a fine balance between the deaf professional's dependence on the designated interpreter and his or her independence. The deaf professional and designated interpreter need to discover and maintain the line with a healthy balance that would maximize both partners' ability to work efficiently. Because it is any interpreter's role to empower deaf individuals (McIntire and Sanderson 1993), the designated interpreter must empower the deaf professional. The reverse is true where the deaf professional must also empower the designated interpreter (Napier, Carmichael, and Wiltshire this volume). This joint responsibility, commitment, and tolerance is necessary for a successful deaf professional-designated interpreter relationship.

WHO MAKES A GOOD DESIGNATED INTERPRETER?

Designated interpreting is an interdisciplinary field because it represents the marriage between the discipline of interpreting and the deaf professional's discipline. Individuals choose their disciplines based on their interests and skills. No individual who realized his or her passion for the field of interpreting has an equal passion for every other possible discipline. It is necessary for the designated interpreter to be passionate not only about interpreting but also about the subject matter and the deaf professional's field (Pouliot and Stern this volume). However, passion is only one factor that makes an interpreter the appropriate designated interpreter for a deaf professional. This section describes the attributes of a designated interpreter.

Commitment to teamwork and collegiality is a requirement of the position of a designated interpreter (Gold Brunson, Molner, and Lerner this volume). Others have stated that the ability to quickly adapt to changing situations and to handle jargon are also required (Beaton and Hauser this volume; Earhart and Hauser this volume). The willingness to be open and honest, including the willingness to provide and accept feedback from the deaf professional, is a part of the position (Gold Brunson, Molner, and Lerner this volume). The interpreter's presentation, dress code, and demeanor are particularly important because they reflect on the deaf professional (Goswell, Carmichael, and Gollan this volume; Kurlander this volume). The designated interpreter needs to be able to balance invisibility and participation as a part of the professional team (Pouliot and Stern this volume).

Often, the interpreter's language and interpreting skills are not the foremost priority in the selection of a designated interpreter. For example, a deaf artist, who recognizes that language skill is important, explains how she selects her designated interpreter: "It has everything to do with the need to feel unburdened with the interpreter's securities and emotional needs" (Pouliot and Stern this vol-

ume). Campbell, Rohan, and Woodcock (this volume) point out that deaf professionals often prefer to choose designated interpreters who have "the most adaptable attitude and willingness to work as a team over more highly qualified interpreters who have a more business-like approach and strict nonnegotiable beliefs" (p. 103).

Interpreters need to inquire about the designated interpreter position and discipline before considering the role. Some deaf professionals have very specific requirements. For example, the deaf director needs designated interpreters who (a) are familiar with filmmaking, (b) have at least a working knowledge of the field's jargon, (c) have good physical and mental stamina, (d) tolerate stress well, (e) are team players, (f) are punctual and reliable, (g) have fast linguistic processing skills, and (h) are discreet and make appropriate judgments. The requirements of deaf professionals vary from professional to professional. For example, the deaf OB/GYN considered the top characteristics of a designated interpreter would be the abilities to tolerate the work pace as well as exposure to sickness and surgery. In addition, the deaf OB/GYN needs designated interpreters who are team players and who are reliable, timely, and skillful (Earhart and Hauser this volume).

Deaf professionals have different types of schedules. Some deaf professionals have open-ended schedules, and in these cases, it is important for the designated interpreter to be flexible with time (Campbell, Rohan, and Woodcock this volume; Goswell, Carmichael, and Gollan this volume; Earhart and Hauser, this volume). There will be changes in the schedule midday and situations where the interpreter might have to cancel plans, arrive extremely early, or stay very late. In other situations, deaf professionals might have a fixed schedule (Kurlander this volume), which also could be a challenge for those who are not used to working in that way. Often, those environments require that workers focus their time exclusively on work during specific fixed hours, and some interpreters are not used to that culture. For example, freelance interpreters are often used to the excitement of traveling to new places and working with new people each day and not having to deal with the dynamics of organizations' infrastructure (Kurlander this volume).

In some situations, the gender of the designated interpreter is relevant. The deaf OB/GYN and deaf psychotherapist mention the advantage of having designated interpreters who are of the same gender as the deaf professional (Earhart and Hauser this volume; Gold Brunson, Molner, and Lerner this volume). If there is a gender mismatch or if the deaf professional and designated interpreter have very different "voices" in discourse, then the designated interpreter might need to use additional effort to ensure that the language and personality of the deaf professional is appropriately revealed in all interpretations. Morgan (this volume) discusses a situation where a female designated interpreter often voiced for a male deaf professional who had a management role with many hearing employees in a relatively all-male work environment. The designated interpreter had to consciously make language choices that she believed a hearing male in the deaf professional's position would make to show authority.

Regardless, one must realize that designated interpreters are not completely fulfilling their role in the beginning of the relationship. It takes time. But, those

who have the aforementioned skills will most likely adapt faster and achieve optimal performance. Otherwise, the interpreter's less-than-optimal performance will have a negative effect on the deaf individual's work performance. Trying to work with an incompatible designated interpreter may cause the deaf professional to experience some anxiety. The interpreter's possible anxiety in that type of situation probably does not help either. The deaf professional and designated interpreter have to accept what they bring to the situation and must negotiate how to maneuver through the occupation to achieve optimal or even outstanding performance compared with their hearing colleagues.

THE PRACTICE OF DESIGNATED INTERPRETING

In many ways, the deaf professional and designated interpreter need to be a good match (Pouliot and Stern this volume). Some deaf professionals test potential designated interpreters before selecting the one (or ones) to work with them (Goswell forthcoming). The style of interpreting that the designated interpreter uses needs to be the one that works best for the deaf professional. The designated interpreter's language choices also need to match the situation (Napier, Carmichael, and Wiltshire this volume; Pouliot and Stern this volume). There are some interpreting procedures unique to each occupation. For example, the deaf psychotherapist's designated interpreter needs to interpret for patients with schizophrenia when they talk to the deaf professional, even when the patient's language does not make sense (Gold Brunson, Molner, and Lerner this volume). The authors explain that there is a natural tendency to stop interpreting when the language is not making sense. However, hearing therapists listen to the patients' language, and this information provides insight on how to work with the patient. Deaf psychotherapists need access to this information; therefore, the deaf professional and designated interpreter needed to develop ways to have this information successfully interpreted.

Designated interpreters need to include the deaf professional's personality in their sign-to-voice interpretations and the personalities of others in their voice-to-sign interpretations. Deaf professionals are in a position of power and authority; therefore, designated interpreters must accurately gauge the persuasiveness and level of confidence the deaf person truly possesses (Morgan this volume). Other factors that designated interpreters need to take into consideration during the interpreting process include the register and variation they use, how they filter information, where they have to position themselves, and the procedures they have to follow. Each of these factors is discussed in the following subsections.

Language Register and Variation

The words people choose to use, the complexity of their sentences, and the concepts they attempt to express depend on the category of person (such as doctors, patients, or young children) to whom they are directing the information. For example, when clinical neuropsychologists work with patients, they change the way they talk depending on the patient's cognitive abilities and developmental age.

In the field of linguistics, these language changes are known as changes in the language register such as from informal to formal. The same applies when the deaf neuropsychologist is called to provide a consultation to a medical doctor; the interpreter needs to use a register that a hearing neuropsychologist would use when conversing with a medical doctor. Similar to how community interpreters assess their deaf consumers' language skills, designated interpreters have to change language registers for the hearing consumers who are working with the deaf professional.

One of the authors of this volume (P. Hauser) is a deaf clinical neuropsychologist who works with designated interpreters and has evaluated hearing patients in various levels of consciousness, ranging from being in a coma to being fully alert and oriented to all spheres (person, time, place). This type of situation also places a demand on the type of register the interpreter needs to use, especially with patients in altered levels of consciousness. Delirium is the state of confusion that is often experienced by a patient who recently had a head trauma or recently had surgery. For patients with delirium, the use of an interpreter can be extremely confusing. It is necessary for the deaf professional-designated interpreter team to figure out a way to minimize the effect of the interpreting process on the evaluation of the patient to maximize the deaf neuropsychologist's ability to assess the patient. Interpreters are trained to use the first person voice and to follow what the deaf individual says, but in this situation, it might be necessary to use third person. For example, if the deaf professional signs to the patient, "follow my fingers," the interpreter should not say "follow *my* fingers"; instead, the interpreter should say "follow *his* fingers."

In formal presentations and conferences, designated interpreters often have a challenge incorporating all of the information in a voice-to-sign situation because of the nature of the terminology and the register used by presenters. The designated interpreter needs to interpret as much as possible, even when unsure how terms are spelled or what they mean (Campbell, Rohan, and Woodcock this volume; Earhart and Hauser this volume). In those situations, the deaf professional often can figure out what is being discussed, even when the interpreter has no idea. The deaf professional needs to tell the designated interpreter that it is okay to make semantically incorrect choices and to fingerspell some terms phonemically even though they are not sure what was said. It is important for the designated interpreter to trust the deaf professional's request to continue interpreting topics that the designated interpreter does not understand. The deaf professional realizes that in those situations, there are two choices: (a) partial information or (b) no information at all. If the designated interpreter were to leave out information that he or she does not understand, then it would be additionally difficult for the deaf professional to fill in the gaps. Often, a lot of the terms, abbreviations, and concepts that are used at the deaf professional's workplace are unfamiliar to the designated interpreter. The deaf professional has the benefit of prior knowledge and expertise in the field and often is able to fill in gaps and figure out what is being said when the designated interpreter chooses semantically incorrect signs or misspells terms.

In addition to the language register, the language variation needs to be taken into consideration. Language variation includes cultural, dialectal, and gender variations in the language (Kushalnagar and Rashid this volume; Morgan this volume). The skill to match the demands of different language environments comes with the experience of being in the work environment among the individuals with whom the deaf professional interacts on a regular basis. The deaf professional might not be fluent in these language variations but most likely would be able to provide some assistance or advice because he or she has observed others performing similar tasks. The deaf professional and designated interpreter need to discuss how variations are handled and seek advice from others when necessary.

Filtering Information

In hospitals and clinics, the medical team is continuously conversing with one another about patient care. Hearing doctors have the advantage of monitoring background conversations for any information that might be relevant to their own patient's care while they are doing other tasks such as writing in patient charts. When a deaf doctor is writing in charts, the ability to attend to background conversations is not an option. A nondesignated interpreter might think he or she has an opportunity to go "off duty" when the deaf doctor is writing, which is untrue. During this time, the interpreter needs to monitor the background conversations and avoid getting into nonrelevant conversations (e.g., talking to nurses about their weekend). When the interpreter hears information that he or she believes the deaf professional needs to know, the interpreter either tells the deaf professional after the deaf professional is done writing or gets the deaf professional's attention if the interpreter thinks the deaf professional needs to be involved in a conversation that is going on nearby (Earhart and Hauser this volume).

The designated interpreter will frequently be in situations where there is too much information to interpret. The designated interpreter needs to decide who to attend to, what needs to be interpreted, and what information might need to be retained when the deaf professional is not attending to the designated interpreter. The designated interpreter has to filter information, and the ability to appropriately filter takes professional judgment, knowledge about the deaf professional and the work situation, and experience. The Earhart and Hauser chapter and Pouliot and Stern chapter in this volume discuss filtering in depth, although it is mentioned in almost every chapter. The designated interpreter has to be willing to learn, often in an ongoing learning process requiring feedback from the deaf professional as to what is and is not important.

Positioning and Procedures

There are certain procedures that designated interpreters need to learn, including how to position themselves in different situations. For example, the designated interpreters working with the deaf director need to be (a) in the deaf professional's eyesight, (b) connected to headphones for team communication, (c) out of the cam-

era shot and not casting any unwanted shadows, (d) out of the actors' sightlines, and (e) not making any noise when cameras are rolling (Goswell, Carmichael, and Gollan this volume). The deaf OB/GYN's designated interpreters need to learn where to stand for different exams and medical procedures both for communication and for patient comfort (Earhart and Hauser this volume). Earhart and Hauser describe the procedures involved for interpreting in an operating room, which requires the designated interpreters to know when to move, how to scrub in, and the rules of the operating room such as what their hands can touch, either in the operating room or on their own face, in order not to contaminate sterilized areas and objects. The positioning and procedures the designated interpreter needs to know are usually too challenging to describe in a short period of time to nondesignated interpreters who are occasionally assigned to work with deaf professionals. And, it would be difficult for deaf professionals to work effectively with nondesignated interpreters in many of those situations.

ETHICS OF DESIGNATED INTERPRETING

There are many aspects of the deaf professional-designated interpreter process that might appear unethical to those who are just learning the RID codes of ethics or to those who view ethics as black-and-white rules rather than guidelines. The interpreters must understand that the RID codes of ethics are guidelines for what to do when one is in "gray areas." The designated interpreter needs to determine the best ethical judgment to make given the situation. Some decisions might appear unethical if one does not know the situation. Several situations are discussed in this section although this topic is raised in the majority of the chapters (also see Cook 2004 for discussion on designated interpreter ethics).

Designated interpreters are a part of the deaf professional's team; therefore, they sometimes have the license to share their observations and opinions on professional matters. The designated interpreters working with the deaf director were encouraged to comment on discussions or performance of other cast and crew. The deaf director wrote the script for the film she was directing. One of the hearing actors used an accent that was not in the script and, in the designated interpreter's opinion, might not have sounded appropriate for the character. The designated interpreter made this judgment based on what the designated interpreter believed the deaf director was trying to achieve in her film. Additionally, when working with sounds, the designated interpreters had to give subjective descriptions and opinions of their quality (Goswell, Carmichael, and Gollan this volume). Similarly, the deaf OB/GYN needed her designated interpreters to provide their subjective descriptions and opinions of patient sounds such as difficulty breathing, wheezing, speech abilities, and emotional intonation (Earhart and Hauser this volume). Interpreters who are not willing to share subjective descriptions or their opinions, within their professional role, might be hindering the deaf professional's job success, which is considered unethical.

Designated interpreters often find themselves in situations where the deaf professional's colleagues might ask for a favor that is outside of the designated

interpreter's role. The deaf professional's superiors sometimes make these requests. Designated interpreters need to avoid stepping out of their designated interpreter role, but they have to maintain a positive relationship with the deaf professional's coworkers. This matter is complicated further when designated interpreters actually have dual roles in the workplace. Although this arrangement has worked successfully for some, it can be a challenge to achieve because there will be times when the two roles place demands on the designated interpreter at the same time. However, designated interpreters who are not hired for dual roles should remain in the designated interpreter position and avoid falling into a dual role among the deaf professional's coworkers (Kurlander this volume; Gold Brunson, Molner, and Lerner this volume). These situations require the designated interpreter to politely educate others about the boundaries of the designated interpreter role. In contrast, there are times when the designated interpreter actually needs to get into a dual role to be able to interpret. For example, the designated interpreters working with the deaf OB/GYN might have to hold an instrument or even the patient's hands while interpreting (Earhart and Hauser this volume); otherwise, the designated interpreter would not be able to stand in the optimal position.

Designated interpreters often find themselves in situations where they must protect the deaf professional's confidentiality. The designated interpreter will see the deaf professional frequently and will be privy to personal and professional information. The designated interpreter also will interact with the deaf professional's colleagues and others who interact in the deaf professional's workplace. To blend in, the designated interpreter needs to develop appropriate relationships with the deaf professional's coworkers. The designated interpreter might get questions from the deaf professional's coworkers about the deaf professional. The designated interpreter has to be skilled at maintaining confidentiality and at demonstrating the boundaries of the role of the designated interpreter as well as be fluent at not making others uncomfortable when asked a question that cannot be answered. Often, others might ask about the deaf professional; therefore, in deaf professional-designated interpreter relationships, confidentiality has to be consciously and creatively maintained.

TEAMING WITH NONDESIGNATED INTERPRETERS

Designated interpreters often are required to work alone because the actual interpreting is scattered throughout the workday with significant breaks in between, although this condition is not always the case. The designated interpreter must have the experience, skills, and confidence to work without the constant support of a team interpreter. However, the designated interpreter must also acknowledge when a team interpreter is necessary such as in situations when the content is dense, during long meetings or discussions, or in any situations where the designated interpreter needs to interpret for more than one hour nonstop. If the designated interpreter has too much pride to request a team interpreter, the designated interpreter could find him- or herself in a situation where fatigue is interfering with the interpreting process. Consequentially, the interpreter's fatigue would have an effect on the deaf professional's communication access.

Team interpreting is sometimes confused with relief interpreting. The idea of relief interpreting is that interpreters need breaks to avoid fatigue; therefore, they take turns being "off." When they are "off," they do not need to stay in the room or pay attention to the interpreting situation. However, in team interpreting, the interpreters are never "off," even though they still take turns interpreting. The interpreter who is actively interpreting depends on the other interpreter to monitor the situation as well as provide support and corrections as necessary. Behaviors related to team interpreting such as body leans, tapping, head tilts, and eye gaze are discussed elsewhere (Cokely and Hawkins 2003; Fischer 1993; Mitchell 2002) and are beyond the scope of this chapter. Nevertheless, the importance for the designated interpreter and nondesignated interpreter working together with the deaf professional as an efficient team cannot be stressed enough.

The deaf professional-designated interpreter relationship might cause a nondesignated interpreter to feel like an outsider, therefore causing some tension or difficulty working with the deaf professional-designated interpreter team. Campbell, Rohan, and Woodcock (this volume) recommend that the designated interpreter be proactive and quickly establish a rapport with the nondesignated interpreter. Both the deaf professional and designated interpreter need to be aware of stereotypical perceptions that the nondesignated interpreter might bring to the situation. Deaf professionals and designated interpreters need to handle negative stereotypes in positive ways (Kushalnagar and Rashid this volume) to benefit most from the presence of a nondesignated interpreter on the team. The complexity of working with nondesignated interpreter as part of the team is discussed in depth in the Earhart and Hauser (medical interpreting) as well as the Beaton and Hauser (academic interpreting) chapters.

Nondesignated interpreters who are assigned to work with a deaf professional-designated interpreter team need to recognize that the deaf professional and designated interpreter have spent considerable amount of time and effort to develop an efficient team (Earhart and Hauser this volume). There has been so much negotiation already between the deaf professional and designated interpreter that it would take a nondesignated interpreter a significant period of time to "catch up" on how to perform the role of an designated interpreter. These negotiations are related to language choice, specialized vocabulary (e.g., signs for jargon and abbreviations), preference, skill, where to stand, sit, when to interrupt, what information to hold onto, what information to let go, when to voice, when not to voice, and how the roles and relationship are to be represented in different situations.

It is ideal for the designated interpreter to discuss in advance with the nondesignated interpreter how best to work together and what are preferred methods for prompts and support (Napier, Carmichael, and Wiltshire this volume). Nondesignated interpreters (and the deaf professional) need to realize that the designated interpreter is in a position of authority when it comes to discussing the specific needs of the deaf professional (Campbell, Rohan, and Woodcock this volume) as well as appropriate and inappropriate behaviors. The designated interpreter needs to be recognized as the lead interpreter who is responsible for briefing, debriefing, and on-site negotiations (Cokely and Hawkins 2003). The delegation

of this responsibility to the designated interpreter reduces the deaf professional's need to spend additional work time focusing on accommodations rather than actual occupational duties (Campbell, Rohan, and Woodcock this volume).

CONCLUSION

Many interpreters and deaf professionals are currently in deaf professional-designated interpreter relationships and do not realize it. Many will enter deaf professional-designated interpreter relationships in the future, especially now that we have entered an era in which more deaf individuals hold professional positions. These relationships and the techniques of designated interpreting need to be realized, analyzed, and taught. It would help deaf professionals and interpreters if there were resources that would prepare them to develop optimal deaf professional-designated interpreter relationships. Interpreter training programs need to teach their students, especially those interested in educational interpreting, how to prepare for assuming the role of a designated interpreter. Workshops need to be developed to train deaf professionals and interpreters how to work in a deaf professional-designated interpreter relationship.

Unfortunately, many interpreters, interpreting coordinators, and individuals who are experienced working with deaf people are not aware of the differences between nondesignated interpreters and designated interpreters. Deaf professionals often have to fight for designated interpreters when they are hired or promoted. Those who work with deaf individuals should advocate for the deaf professional, but often, those individuals are the ones who tell the organization that they have never heard of designated interpreters and that the field of interpreting does not work that way. As discussed by Kushalnagar and Rashid (this volume), many professionals are used to working with deaf people who are not in a position of power or authority. Those individuals could perceive the expectations of deaf professionals as arrogant or demanding. Those professionals are not used to deaf individuals knowing what their specific needs are and are not used to being told by deaf individuals how the interpreting process works best for them. Deaf professionals who fight for designated interpreters do it because they know what they need to satisfactorily perform their job duties. Those who prevent deaf professionals from getting their needs met are not empowering deaf individuals but disabling them.

Some deaf professionals might not need full-time designated interpreters but might need to have the same interpreter (or interpreter team) assigned when necessary. Each time a new interpreter is introduced, it causes more work for the deaf professional (and designated interpreter). The deaf professional has to deal with less-than-adequate accommodations and the burden of spending additional time to prepare the interpreter as much as possible for the assignment. The preparation often is inadequate because so little can be provided within a day or two of working together. Napier, Carmichael, and Wiltshire (this volume) recommends that deaf professionals be assigned a small team of interpreters.

Organizations that hire deaf professionals and designated interpreters need to recognize that the deaf professional has to allocate additional work time for the

orientation process with the interpreter on top of the regular assigned duties. This effort is worthwhile because it eases the deaf professional's integration into the workplace (Kurlander this volume) and because the presence of the deaf professional-designated interpreter team often has a positive effect on the workplace and work team (Goswell, Carmichael, and Gollan this volume; Pouliot and Stern, this volume). Ultimately, the designated interpreter needs to learn the deaf professional's way of working with him or her, and deaf professionals and designated interpreters need to be comfortable working with each other. Once the dyad achieves a mutual comfort zone and the relationship is established, the focus is on the deaf professional's work rather than on the interpreting process the deaf professional will use (Pouliot and Stern this volume).

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