

Certificate of Publication
YMER

Open Access | Peer reviewed | Scopus Active 2023 | Care UGC Group- II Journal | ISSN - 0044-0477



Title

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communicative and translational acts

Author

Khelifi Dalila

From

Translation Institute, University of Algiers 2, Algiers, Algeria

Has been published in

YMER: VOLUME 22, ISSUE 12, DECEMBER - 2023



Scopus



ज्ञान-विज्ञान विमुक्तये



Editor-in-chief


(James Gaskin)

Translation into Arabic in the health field between the requirements of the communicative and translational acts

Khelifi Dalila

Translation Institute, University of Algiers 2, Algiers, Algeria

dalila.khelifi@univ-alger2.dz

khelifi.dalila@yahoo.fr

Abstract

Communication is a civilizational act and an essential element in human life as life itself is an ongoing communication. Since people's languages are multiple, the need for translation has come, which is one of the most important tools for communication between peoples and civilizations. Translation in the health field, including medical translation, is a form of specialized translation that is the convergence point of language specialists and health professionals. Thus, medical translation, for instance, plays an important and a dangerous role in the lives of all human beings, whether they are doctors, patients, or even researchers, because it is about human health. In the light of the foregoing, this article demonstrates the relationship between translation in the health field and communication, and highlights their roles in building bridges of trust between the patient on the one hand and the doctor, nurse and even the pharmacist on the other hand by exploring the following problematic: To what extent can medical translation affect the quality of communication in the health field?

Keywords

translation into Arabic, health field, medical translation, communicative act, translational act

Introduction

Humankind is characterized by many skills and competencies, the most important of which is communication. The importance of this competence lies in understanding others and conveying ideas and feelings to them, and the stages of life that humankind has lived to this day are only links to his/her forms of communication with himself/herself and his/her surroundings, but his/her humanity has become governed by the standards of success and failure in effective and useful or negative and abusive communication.

Since people's languages are multiple, the need for translation has come, which is one of the most important tools for communication between peoples and civilizations. There are two types of translation: general translation and specialized translation. Medical translation is a form of specialized translation that is the convergence point of language specialists and specialists in medicine and related disciplines. Medical translation also plays an important and dangerous role in the lives of all human beings, whether they are doctors, patients or even researchers, because it is about human health.

In the light of the foregoing, this article demonstrates the relationship between translation in the health field and communication, and highlights their roles in building bridges of trust between the patient on the one hand and the doctor, nurse and even the pharmacist on the other hand by exploring the following problematic: To what extent can medical translation affect the quality of communication in the health field?

First and foremost, it is necessary to define some key concepts on which we base our study.

1. The Concept of Communication

Communication is a necessary civilizational act for peoples and societies, and it is an essential element in human life because life itself is an ongoing communication.

Jean Dubois defines the concept of communication as:

La communication est l'échange verbal entre un sujet parlant, qui produit un énoncé destiné à un autre sujet parlant, et un interlocuteur dont il sollicite l'écoute et/ou une réponse explicite ou implicite (selon le type d'énoncé).¹

Thus, communication is any verbal exchange between the speaker who produces an utterance or a statement directed towards another speaker who is expected to hear or to answer clearly or implicitly depending on the form of the utterance issued by the speaker.

2. Communication in modern studies

In modern studies, researchers have sought to determine the act of communication, how it occurs, and the strategies employed by the addresser to communicate with others, based on the fact that communication is a social activity between two or more parties, so they concluded that the addresser (speaker) and the addressee (listener), as the two basic elements in the communication process, exchange a message through a contact, which is the code i.e. the language in a given context. No verbal communication can be achieved without the availability of essential elements of any linguistic text in order to achieve the communication process. Perhaps, the most important of those who left their mark in this field is the Russian theorist and linguist Roman Jakobson, who defined the essence of linguistic communication with its six factors as follows:

2.1.Factors of communication according to Jacobson²:

There are six interrelated factors required for communication:

2.1.1. Addresser:

He/she is the person who plays a key role within the communication process, also known as the sender or the speaker. He/she is the one who sends a message or a set of information with meanings aiming at creating an impact on the addressee such as changing or modifying his/her idea, behaviour, direction, or attitude... The addresser can be an individual, two or more individuals, or a well-known electronic device that performs the function of sending. He/she is the source of the message, and his/her role is the process of coding messages in one of the linguistic systems taking into account a set of factors related to the addressee, such as his/her cultural and cognitive level, as well as the psychological aspect and the socioeconomic status.

2.1.2. Addressee:

He/she is also called the receiver or the audience, and he/she is everyone who receives the message, interacts with it, and is affected by it, which is the intended goal in the communication process, like the addresser, as he/she can be an individual, two or more individuals, or a well-known receiving electronic device, and he/she can respond to it or reject it, based on his tendencies, trends, and desires, and he/she may take an indifference attitude to the message and not interact with it. The addressee is required to have the ability to decode the encrypted information, otherwise the message cannot achieve its objectives.

Thus, the addresser and the addressee are essential factors of the communicative act, and both are equally responsible for the success or failure of the communicative process. If they share a linguistic, cognitive and cultural frame of reference or what some term *experience*, the communication is complete or almost complete, but if this condition is distorted to some degree, the addressee is unable to grasp the information or most of it contained in the message, and the addresser is unable to achieve the effect as the ultimate goal he seeks.

2.1.3. Context:

The context is the theme around which the message is revolved, i.e., what the two parties to the communication are talking about .It is usually linked to the time, the place and the status of the addressee, his/her number and type.

2.1.4. Message:

It represents the content of the transmission ,i.e. the meaning, the idea or the content that the addresser transmits to the addressee, and includes the meanings, the ideas and the opinions pertaining to certain topics and transmits them to the addressee in accordance with the agreed rules and laws.

That is, it embodies the ideas of the addresser in aurally images in the oral discourse, or written signs in the written discourse, or many signs and movements if the message falls within non-verbal communication .The information transmitted by the addresser through the message refers to the common public reference between the addresser and the addressee.

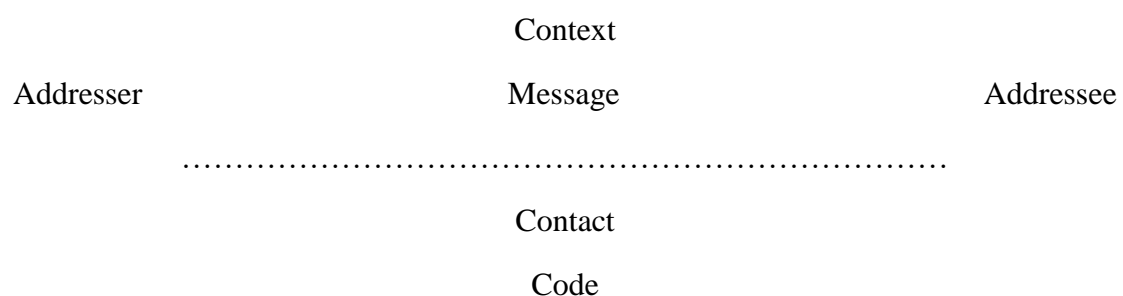
2.1.5. Code:

It is a set of signs and rules consisting of those signs used by the addresser to form his/her message, and the addressee works to identify the form of those signs. There are many linguistic terms on this factor, some of them used the term *langue*(such as de Saussure),while others used the term *competence* (such as Chomsky). Despite their differences, they have a single meaning that refers to a coding system fully, or partially, common between the addresser and addressee.

2.1.6. Contact:

It is also known as the channel or the communication channel, and it is the tool through which the message is transmitted from the addresser to the addressee. The means varies according to the levels of communication and the means used by the addresser and the addressee, for instance: the light forms the channel of visual communication, while air forms the channel of verbal communication face to face, while electricity and chemistry are channels of automated communication. In mass communication, it is the newspaper, the magazine, the radio, or the television .Thus, each communication process has an appropriate and specific channel. The channel may be subject to some obstructions and distortions as a result of the imbalance that may affect it, such as unclear writing, inappropriate climate conditions and external sounds that parties involved in communication cannot control.

We present below the diagram developed by Jacobson to summarize the communication process according to the six basic factors mentioned above:



3. Communication in the medical field

It is a triangular communication, usually between medical staff (doctors, nurses...) and the patient, who is in need of medical care and the pharmacist. Therapeutic communication takes place in the hospitals or the medical centres. The goal of this communication is to provide medical and nursing care to the patient to recover. In this type of communication, both the patient and the medical staff, with all its different members, interact to solve the patient's medical problems in order to provide the best services required for him, using a language that he understands³.

3.1. Doctor-Patient Communication

The doctor-patient relationship is an essential component of the ethical principles of medicine⁴, developed when a doctor meets a patient's medical needs through examination, diagnosis, and treatment. Therefore, he needs some skills, the most important of which is the skill of communicating with patients because he deals with different age groups in the society. He deals with a child, a young people and the elderly according to their different genders and diseases, which requires changing the way of communication every time. Studies conducted in the United States during the 1970s demonstrated that a lack of positive doctor-patient communication may lead to misdiagnosis and therefore treatment failure. The experts who carried out this study noted that most doctors do not listen to their patients well, as they interrupt patients during their conversation, and they use language that patients do not understand and do not try to popularize the discourse, in addition to doing some actions that make the patients feel that they are indifferent to them, especially when they check their records and books, as well as arranging medical tools during the conversation that precedes the examination⁵. This makes the patient lose confidence in the doctor and does not respond to the treatment because in many cases the causes of the disease are psychological and social rather than organic. While, in the case of effective communication, specialists have observed that patients respond better with treatment after their psychological state has improved.

3.2. Pharmacist-Patient Communication

The relationship between the pharmacist and the patient is not very different from that between the patient and the doctor. In both cases, positive interaction is required. The pharmacist's duty is not only to read the prescription and sell medicines to the patient, but he is also required to listen to him to gain his confidence and the communication between them becomes positive and effective, which is required for the effectiveness of the medicine. The pharmacist who ignores the patient and does not explain to him the right way of taking medicines carefully, makes the patient alienate from him and from treatment, so he does not use medicines in a correct way, which increases his illness and sometimes loses his life when he misses doses or because of side effects that he did not pay attention to⁶. Therefore, positive communication between the patient, the medical staff and the pharmacist, based on active listening and popularized language, is one of the basic and crucial factors in the success of treatment in general.

3.3.Communication and language barrier in the medical sector

The radical change in the composition of global societies, as a result of wars and political and military coups in our time, has led to the emergence of what is known as multilingual societies, which have become a global phenomenon, especially in some States of Europe and America, such as France, Switzerland, Canada and the United States of America, which daily receive huge numbers of asylum seekers, clandestine migrants and displaced persons. This new formula generated many problems and obstacles in all vital fields, but the medical sector was the most affected, due to its sensitivity, as it is closely related to the individual. The problem of communicating with the patient due to the difference in languages is one of the most important obstacles faced by medical staff with all its different members. According to a study⁷ carried out by a group of doctors in a medical centre in a hospital in Geneva on a sample of 638 patients of different nationalities, it became clear to them that more than a third of the patients received treatment without understanding the doctor's discourse or even the kind of their disease. That is, 406 patients (64%) were fluent in French and therefore had no problems communicating with the medical staff, while the other patients (202, representing 36%) did not speak French and therefore the communication with the medical staff was either through interpreters affiliated with the Red Cross (91 patients), either by relatives who speak French (33 patients) or by direct communication, usually through sign language (108 patients). The study demonstrated that those who benefited from the services of interpreters were more accommodating to the kind of their disease, because interpreters usually use a more popularized discourse than that of the doctor, and this is what is required. Since, medical discourse usually needs specialists in the field to understand its complex terminology, including the need for specialized translators.

4. Medical translation

There is no doubt that medical translation plays a serious role in the lives of all human beings, whether doctors or patients, because it is mainly about human health. This type of translation does not need a general translator, but rather a translator specialized in this field, due to the nature of the medical text or discourse, which contains difficult medical terms that need special treatment and specialized dictionaries.

The medical researches that are conducted every day are too numerous, whether in the field of medicine or medicines, or the development of the pharmaceutical and cosmetic industry. For instance, if a doctor conducts research that clarifies a treatment for a specific disease, doctors around the world should know about this new treatment, and this will only be done by medical translation, which should be done by specialists who have been able to combine medical expertise with mastery of translation from a foreign language into their mother tongue (it is Arabic in this study). Without medical translation, the process of communicating with doctors across the world in different languages would not have succeeded, nor would the knowledge and study of the various diseases that appear from time to time. Hence, the medical translator must be fully familiar with the doctors' language, which is rich in complex and often ambiguous medical terms, in order to communicate with specialists and patients in a correct manner.

The danger of medical translation is that it does not tolerate any error, even if it is a small one. One error that may occur in the translation of any medical term may lead to the death of the patient, or cause a health problem that is difficult to solve. An example of these terms is the English word (Abortion), which literally means (the process of expulsion of the foetus from the uterus) and may be interpreted by a novice translator as (the process of birth), while a professional translator knows that this word means (the termination of a pregnancy followed by the death of the embryo or foetus⁸).

From this standpoint, we can say that the safety of translation is closely related to the safety of the patient.

It is also known that medical translation is not limited to the translation of medical research only, but includes the translation of medical reports and analyses, which are directly related to the patient's condition and accurately describe it, but some ambiguous foreign terms make the translation process difficult, because the ambiguity of the foreign term results in the ambiguity of the Arabic term.

As the field of medical translation is very dangerous and sensitive, it is not suitable for beginners, but should be addressed by those with extensive experience in the fields of medicine and translation alike. Therefore, assigning medical translation to experienced specialists is inevitable as long as it is related to maintaining human safety and health.

Conclusion

The language of communication is an essential pillar for the success of any treatment which doesn't rely on the effectiveness of the drug alone. Therefore, it is necessary to overcome the language barrier, which often imposes itself and is a barrier between the patient and the medical staff and even the pharmacist, through translation, which has become the bridge between the doctor who uses a language other than that used by the patient and the patient who finds himself/herself lost amid the large amount of medical terminology that decides his fate and mortgages the process of his recovery. Translation also helps to communicate between the patient on the one hand and the pharmacist and the doctor on the other, which reflects its impact on the patient's acceptance of treatment and psychological satisfaction, and of course contributes greatly to the success of various treatments.

Finally, we can only say that one of the most important reasons for the failure of some treatments is the loss of mutual trust between the patient and the doctor on the one hand and between the patient and the pharmacist on the other hand due to the lack of effective and positive communication that is based on dealing professionally and based on relying on competent translators who specialize in the medical field.

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