

## TRANSLATING FOR PUBLIC HEALTH ORGANIZATIONS

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Translation in the domain of medicine and public health is nowadays a large field of activity. Many international donor organizations are involved in the process of public health maintenance and, therefore, require professional translation of vitally important materials. Medical texts are usually highly technical and require special skills and knowledge. Moreover, these present great interest for both medical professionals and public as they provide new knowledge on health issues. Translation of medical text is a real challenge even for the experienced translators as there is no room for even slightest mistake for one simple reason – it can lead to terrible consequences for humans. Nevertheless, these pitfalls can be avoided by applying certain procedures and strategies in translation activity.

**Keywords:** *terminology, translation techniques, specialised language, abbreviations, false cognates.*

## ACTIVITATEA DE TRADUCERE ÎN CADRUL ORGANIZAȚIILOR DIN DOMENIUL SĂNĂȚĂȚII PUBLICE

În prezent traducerea în domeniul medical și al sănătății publice este o activitate ce ia amploare. Mai multe organizații internaționale donatoare sunt implicate în procesul de menținere a sănătății publice: Respectiv, traducerea profesionistă a materialelor de importanță majoră este foarte solicitată. Textele medicale, de obicei, se caracterizează printr-un nivel înalt de specializare și necesită competențe și cunoștințe speciale. Mai mult decât atât, acestea reprezintă un interes sporit pentru specialiști în medicină și publicul larg, deoarece oferă cunoștințe noi ce țin de soluționarea problemelor în sănătate publică. Traducerea textului medical este o adevărată provocare chiar și pentru traducătorii cu experiență, deoarece comiterea unei greșeli, chiar și a unei greșeli minore, poate avea consecințe grave pentru oameni. Totuși, aceste dificultăți pot fi evitate prin aplicarea în activitatea de traducere a strategiilor și procedeelelor bine definite.

**Cuvinte-cheie:** *terminologie, tehnici de traducere, limbaj specializat, abrevieri, prieteni falși ai traducătorului.*

Medicine and public health can be considered a domain of vital importance and the reasons for such an assumption are quite obvious. Nevertheless, there were made only few attempts to identify the role of translation activity in this domain and set forth some guidelines to be followed. Medical science and technology evolves at a high pace to respond to the challenges that humanity faces in this ongoing struggle for health and subsequently medical professionals need to update their knowledge in the domain very quickly. Usually it leads to the fact that they learn new terms in the original language and use them on a daily basis in their native language while communicating at congresses and conferences and only much later at the stage of knowledge transfer to laymen these terms become subjects of translation. But such a situation creates great difficulties for both medical professionals who already got used to the term learned in the original language and translators trying to transfer the meaning of it in the target language in a way comprehensible by large public that needs to be informed. One of the possible solutions might be application of double processing for such terms, i.e. provide their translation into target language from the very beginning of their use in another language and original form in brackets with the view to avoid misunderstanding. For example, the English term *screening* is nowadays widely used in medical practice, but still is not quite understandable by laymen. Moreover, it arouses fear in patients when they are offered to undergo screening procedure, as the word itself sounds strange and alien for them.

Another characteristic feature of both written and oral medical communication is the wide use of acronyms and abbreviations. There are many reasons for such a strategy: first of all names of the diseases can be long enough (e.g. extensively multidrug resistant tuberculosis – XDR-TB) as well as names of chemical substances and medical tests (Enzyme Linked Immuno Sorbent Assay – ELISA) and usually they do not appear in their full form for the sake of saving space and making communication more efficient. Still, it is worth mentioning that the great number of abbreviations that appear in the domain of medicine annually cannot be listed in the dictionary, moreover, in some cases one and the same abbreviation may stand for a number of terminological phrases. In such a case the translator has to identify the narrow domain of the research and taking into account larger context select the appropriate meaning. Another type of abbreviations that present extreme difficulties are personal shortenings used by medical professionals by means of which they codify the true meaning either for ethical or confidentiality reasons.

False cognates remain a very tricky category in translation activity and it requires careful approach in case of medical communication. Based on the idea mentioned above, i.e. the tendency to borrow medical terms into

target language, it can often happen that unduly attention of the translator can evoke confusion. For example, an English term *drug* according to Collins Dictionary can have two meanings – 1. *any synthetic, semisynthetic, or natural chemical substance used in the treatment, prevention, or diagnosis of disease, or for other medical reasons.* 2. *a chemical substance, esp a narcotic, taken for the pleasant effects it produces.*

In Romanian language the term *drog*, unlike *medicament*, has a clear negative meaning. Therefore, the recommendation by the doctor to a patient translated from English into Romanian as – “*a administra droguri hipotensive*” (‘narcotics’) instead of “*medicamente*” (‘medication’) for high blood pressure is at least confusing for the patients who seek medical counselling.

Also there are certain restrictions implied by the form of the medical text itself. Based on practical experience in translation within the framework of international public health organizations we can distinguish several types of texts that are subjects to translation: leaflets, guidelines for medical staff, reports and survey materials. Each type has its own features and, therefore, requires different translation strategies and decisions to be applied. Before applying a certain procedure it is important to identify the communicative purpose of the text, the audience design and the author’s intention.

We can assume that leaflets contain general information for the public and should not be highly-technical, otherwise their communicative effect can be distorted. Usually they do not present much difficulty in translation as they are written in a simple language, contain illustrations and short sentences. Nevertheless, sometimes there is an issue of space limit as due to the structural and other linguistic characteristics the target text can be longer, therefore, requiring an additional effort of the translator aimed at compliance with available space, which implies paraphrasing and creative approach. The same can be said with reference to Power Point Presentations for medical conferences and other events, where certain parameters like font size should not be decreased in order to keep the text readable for the audience, otherwise the most successful presentation may be a failure, as the viewers will not be able to follow the speaker pointing to certain lines in the presentation.

Guidelines for medical staff are usually highly-technical and designed for specialists in the domain, therefore they require good knowledge of terminology and detailed understanding of the subject matter. Usually these are lengthy documents, written by experts in a specific scientific style that has to be preserved in translation. This type of medical text is the most difficult in terms of translation; it contains specialised terminology and abbreviations, detailed descriptions of certain procedures used in medicine, Latin words, professionalisms and many other linguistic features that present difficulties. Depending on each type of difficulty the translator has to make appropriate decisions and apply necessary strategies.

Another category of documents that is frequently used in the domain of activity of public health organisations includes reports and survey materials written by local experts and providing results of the research or outcomes of certain activities. Such documents usually contain names of different institutions that require Internet search of their official name in English (if any). They also contain a number of figures and tables that are time-consuming elements for translation as their formatting can be a complex one and sometimes even require special software for editing. Survey materials have one more peculiar feature; they may contain opinions of ordinary people that are sometimes not quite literate and contain culture-bound references. These, of course, are of ultimate difficulty as they involve not only specialised knowledge related to medicine, but also general background knowledge and even sociolinguistic context. The following examples are taken from a survey regarding the quality of medical services in the Republic of Moldova carried out in different areas of the republic, including rural areas. It is worth mentioning that the quality of source text was also influenced by the fact that initially the interviews with respondents were recorded and afterwards transcribed, therefore, spelling and punctuation rules were not always observed. It can be noticed that the language of the respondents is full of borrowings or rather hybrid words created under the influence of Russian language and regionalisms. It is very difficult to render such “creations” into English, moreover, their communicative function consists in providing regional and, to some extent, emotional colouring to the respondents’ speech and, therefore, plays a minor role for the experts, whose primary objective is to get information about the quality of medical services. So the general approach of the translator in such a situation would be to render the message and, if possible, emotional colouring, which is still important for understanding the attitude of the population towards medical services provided. Let us consider some of the examples and their possible translations.

Moderator’s question: *Dar există diferență între atitudinea medicilor din sat, din raioane sau din Chișinău?*

Respondent’s answer: *Doamnă, vedeți că la raion ei lucrează mai “culturna” acolo, în Chișinău îi drept că lecuiesc mai “normal” dar “abrașenia savsem” altfel. Problema la noi în Sîngerei așa era sora medicală*

își "dădea smena" la soră medicală, "uborșița la uborșiță", da aici la "gorad" s-au îngrămădit la ora nouă toate o dată, merg toate saloanele toate "șcafurile" ridicate.

Moderator's question: *Is there any difference in the attitude of the doctors from the village, district or Chisinau?*

Respondent's answer: *You see, in the district hospital they show better attitude. In Chisinau, that's right, they provide better medical treatment, but the attitude is quite different. The problem in our hospital in Singerei was the following: the nurses were turning over their shifts like a cleaner to a cleaner, here in the city at nine o'clock they all gather together and go checking all rooms and turn upside down all cabinets.*

We can observe that there is a considerable difference in the emotional colouring of the translated text – it is preserved only partially. Still, for the experts, who haven't visited the country and are not aware of some cultural peculiarities, i.e. that the cleaners are considered not serious and quite irresponsible persons, the opinion of the respondent and his words may seem very strange. In this particular case the translator had to solve a number of problems: decoding the meaning of hybrid words, cultural connotation of some expressions and finding appropriate means for expressing the main message.

In conclusion we can state that the main causes of translation quality problems with reference to medical texts are terminological incompetence of translator, shortcomings of the source text, including formatting, illegible handwriting and deviations from literary language, polysemantic abbreviations and luxury borrowings from other languages. Nevertheless, all these obstacles have appropriate solutions that can be applied depending on certain criteria and communicative function of the original text that should be always preserved.

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