UNIVERSITY OF NAIROBI

MA IN INTERPRETATION

INVESTIGATING EFFECTS OF SYNTACTIC INTERFERENCE IN INTERPRETATION: A CASE OF SIGHT TRANSLATION FROM ENGLISH TO FRENCH

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November 2018
DECLARATION

This research project is my original work and has not been submitted for any degree award in any other university.

Signature……………………………………… Date………………………………………………

Kader OUATTARA
Y62/8555/2017

APPROVAL

This research project has been submitted to the University of Nairobi with my approval as the University supervisor.

Signature……………………………………… Date………………………………………………

Prof. Jayne Mutiga

Signature……………………………………… Date………………………………………………

Mr Rufus Karani
DEDICATION

I dedicate this work to my beloved parents, my mother Salamata TRAORE Epse SEYDOU as well as to my deceased father Seydou OUATTARA for their unwavering support throughout my school career and for the love that they have shown me. May God bless them and grant them mercy.

To all my brothers and sisters for their love and support.

To all those who contributed to the success of this research work.
ACKNOWLEDGMENT

Thank you Allah (SWT) for all your favor upon me and for having facilitated the realization of this study.

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ABSTRACT

This project was set to investigate syntactic interference during sight translation of medical discharge instructions. The main objective was to analyze the effect of syntactic interference on the quality of the interpretation performed by inexperienced professional interpreters; those with less than one year of experience. The study also looked at sight translation and translation strategies applied during the interpretation. Through the analysis of the data collected from the participants, it was found that the quality of interpretation is negatively affected when the interpreters carried out word-for-word interpretations and failed to apply necessary change in grammatical categories during meaning transfer from English into French. However, it was highlighted that literal interpretation is sometimes a default strategy because of similarities between both languages. As for the coping strategies, interpreters resorted to strategies such as transposition, modulation of syntax, expansion of meaning and also equivalence in order to maintain the quality of interpretation, especially in cases where literal translation would have led to unclear and unnatural expressions.
### ABBREVIATIONS

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tr>
<td>Eng</td>
<td>English</td>
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<tr>
<td>Fr</td>
<td>French</td>
</tr>
<tr>
<td>HCIS</td>
<td>Health Care Interpreter Services</td>
</tr>
<tr>
<td>IMIA</td>
<td>International Medical Interpreters Association</td>
</tr>
<tr>
<td>NCIHC</td>
<td>National Council on Interpreting in Health Care</td>
</tr>
<tr>
<td>R1</td>
<td>Respondent one</td>
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<tr>
<td>R2</td>
<td>Respondent two</td>
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<td>R3</td>
<td>Respondent three</td>
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<tr>
<td>SL</td>
<td>Source Language</td>
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<td>TL</td>
<td>Target Language</td>
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<td>CTI</td>
<td>Center for Translation and Interpretation</td>
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CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Sight translation is an oral translation of a written text from a source language into a target language in the context of interpretation. Interpreters mostly use that technique with the aim of facilitating communication among people speaking different languages. In an academic perspective, sight translation technique is introduced in conference interpreting training to help students develop the necessary information processing skills before introducing the teaching of Consecutive and Simultaneous. This approach which consists of using sight translation as a training tool is because it shares some characteristics with simultaneous interpretation as held by Lambert (2004: 298). He argues that sight translation has a lot in common with simultaneous interpreting considering factors such as time constraints, anticipation and the fact that the output in both tasks is delivered orally.

Sight translation is therefore introduced in the course with the specific aim that these particular skills required to perform this task and that are commonly shared with simultaneous interpreting will be developed before students start (Marjorie: 2004). Thus, introduction to sight translation is seen as a way to build the necessary skills for Simultaneous and Consecutive Interpreting. Although the input is received orally in simultaneous interpretation and visually in sight translation, both modes of interpretation have a similar output; the verbal message. Today, sight translation is no longer limited in its role as a training tool used to develop simultaneous skills, but it is frequently used as
another mode of interpretation just like simultaneous and consecutive interpreting. Sight translation deserves a specific attention because it is commonly used in various contexts ranging from sight translating court documents, police reports or even medical records. In the medical field, interpreters are often asked to sight translate documents such as consent forms, basic nutritional guidelines, prescriptions, preparation for procedures, discharge instructions, and medical reports.

Yet not all medical documents are appropriate for sight translation. The National Council on Interpreting in Health Care (NCIHC, 2009: 7) recommends that “Documents with specific instructions are appropriate for sight translation, with the provider present, so that the patient’s questions can be answered by the provider, not the interpreter.” Bearing this in mind, this study focuses on sight translation of medical discharge instructions. Discharge instructions are short and specific documents which give instructions on patients care following their release from hospital. When the physician and the patient do not speak the same language, interpreters are often called to sight translate discharge instructions and to convey the message to the patient ensuring quality and safe care after being discharged from hospital. Because the patient may ask questions, this calls for clarity and accuracy from the interpreter. In this case as in any other mode of interpretation, sight translation “is a mode in which we must be proficient” as expressed by Setton & Dawrant (1984: 205). The required proficiency is achievable when the interpreter can cope with the difficulties related to linguistic interference, especially the syntactic structure of the source language because each language has its own structure.
According to Weinreich, (1953: 1) interferences are “instances of deviation from the norms of either language which occur in the speech of bilinguals as a result of familiarity with more than one language, i.e. as a result of contact”. Interference is generally considered as an involuntary transfer of the features of a given language into another while speaking. Mutual relations between the French and the English have existed for years. Speakers of these languages have come into contact in the past and continue to influence each other to date. As we can see in the above definition given by Weinreich, interference occurs when a bilingual is influenced by the source language and transfers the features of the source language system involuntarily into another language in which he/she speaks or writes. And this situation can make the message sound unnatural, unclear and even confusing for the audience (in this case the patient). Since interpreters are bilingual or even multilingual, it is evident that they are confronted with this phenomenon by the simple fact that they have to convey a message from a source language into a target language in a certain way.

The similarities between English and French represent sometimes a trap that increases the risk of syntactic interference because the interpreter tends to replicate the features of the source language into the expression of the target language. So, interference occurs when the interpreter fails to consider that despite those similarities, there are instances where it becomes necessary to conform to the syntactic and grammatical rules which dictate the correctness of the target language. Therefore, ignoring them during interpretation leads to interference. Health-care interpreting plays an important role in medical-care and interpreters need to be accurate and deliver a clear message to the patient.
Rocio (2009: 2) highlights the importance of sight translation and presents it as a relevant way to transfer the meaning of a document into the target language especially when time is of the essence. As such, interpreters’ participation is crucial to ensure the quality of the ongoing treatment of the patient.

This study aims to go beyond the pedagogical aspect of sight translation and explore its application during the interpretation of medical discharge instructions. It will analyze how sight translation is used by interpreters to achieve this specific task by overcoming syntactic interference. It is also important to explore the different challenges related to medical terminology, expressions and common difficulties in the practice of sight translation of medical records.

1.2. The Statement of the Problem

The primary objective of any interpreting process regardless of the mode is the accurate transfer of meaning from the source language into the target language. In the context of healthcare interpreting, the interpreter realizes an oral translation of the discharge instructions when the patient and the physician do not speak the same language. Hence the need of an interpreter to break language barriers. During this process, there is a higher risk of syntactic interference from the source language into the target language. That interference can negatively affect the quality of interpretation. The issue of syntactic interference is raised because both languages (English and French) have their own syntactic form and idiomatic expressions which the interpreter must consider during meaning transfer. Indeed, the variations of the syntactic features between English and
French call for the consideration of the syntactic and grammatical rules while interpreting into the target language. Failure to take these rules into consideration can lead to unclear or unnatural expressions that affects the accuracy and comprehension of the message delivered. Therefore, adapting to the syntactic rules of the target language is necessary to avoid such failure. But this remains challenging in any mode of Interpretation.

The challenge of performing sight translation from English into French resides in the fact that there are necessary syntactic and grammatical changes that must be implemented during the transition from the source language into the target language. The interpreter must therefore consider the fact that during the process of syntax formation in French, the alignment of the English grammatical categories cannot always be replicate because of the differences between both languages. In English the adjective comes before the noun whereas in French it is the opposite. For instance, we can see that change in the following sentence: “The medical prescription must be fully adhered to” translated into French as “la prescription medicale doit être scrupuleusement respectée”. Moreover it appears sometimes that a grammatical category such as an adverb cannot be replaced with an adverb in French but rather a verb as presented in this example “the nurse nearly got infected” translated by “l’infirmière a failli être infectée”.

Unlike a normal translation task, sight translation is performed under pressure. This increases the difficulty of the task because the interpreter does not have time to apply those necessary changes due to time constraints. For those reasons, the interpreter might not achieve the required proficiency and quality of interpretation. This can lead to
misunderstanding or even misinterpretation. So, any misinterpretation may negatively affect not only the quality of the ongoing medical treatment but also the safety of the patient.

### 1.3. Objectives of the Study

The overall objective of this study is to investigate source language interference mainly during the performance of sight translation of medical discharge instructions.

The specific objectives of this study are:

1. To investigate how syntactic interference affects the quality of interpretation during sight translation of medical discharge instructions from English into French

2. To examine sight translation and translation strategies that are relevant to help overcome syntactic interference during sight translation.

### 1.4. Hypotheses

1. There are significant syntactic differences between English and French that are factors affecting the quality of interpretation during sight translation of medical discharge instructions.

2. There are cases of successful sight translation due to the application of appropriate reformulation during meaning transfer from English into French.
1.5. Scope and Limitations

Linguistic interference is a wide area of study that comprises various types of interferences ranging from syntactic, lexical, and grammatical to phonetic. For more precision in this study, we decided to narrow down the scope to syntactic interference because it is a specific type of linguistic interference that represents a big challenge during sight translation due to the nature of the task. So the analysis of the data collected will only dwell on syntactic interference features for establishing our findings.

We focused specifically on recently graduated students in conference interpreting with less than one year of experience as professionally trained interpreters because the feature of interference is more prominent among inexperienced than experienced translators/interpreters (Malkiel 2006: 338); (Baker 2009: 307). Our study will be limited to the investigation of syntactic interference based on English-French language combinations. So, the sight translation will be done in one direction: from (English) toward an A language (French).

1.6. The rationale of the study.

The choice of Sight translation performed with hospital discharge instructions as a case study has been made for many reasons. The first one is related to the recommendation of the National Council on Interpreting in Health Care (NCIHC, 2009: 7), setting that “Documents with specific instructions are appropriate for sight translation”. Because unlike legal and financial documents, they are less time consuming for the interpreter and the patient. Therefore we selected hospital discharge instructions not only because it falls
into this category, but also because it is one of the medical documents used in healthcare interpreting for sight translation. Secondly, due to the importance of discharge instructions in the process of patient treatment, it is important to critically analyze how syntactic interferences could negatively affect the quality of sight translation of such a medical document. Thirdly, the study will provide a set of practical solutions that will contribute to help students in their learning process and also professional interpreters operating in the medical field.

The area of health-care interpreting also deserves particular attention due to the importance of the role played by interpreters in this field. The intervention of interpreters is crucial to ensure the success the ongoing medical treatment. Thus the findings will represent a source of information for trainees in conference interpreting and also professional interpreters as a reference for further research.

The interest in this study has been prompted by the desire to add to the body of knowledge and promote interest to carry out further research in this field. It will serve as a source of information not only for students but also for professional interpreters and contribute to the development of health-care interpreting.

1.7. Theoretical Framework

The interpretation of the data collected in this research has been carried out on the basis of the Theory of Sense or ‘Interpretive Theory of Translation’ (ITT). The Theory of Sense or ‘Interpretive Theory of Translation’ (ITT) was developed by Seleskovitch and
Lederer in the late 1960s in Paris. Also referred to as the theory of the school of Paris, it is based on the principle that translation is not a work on language or words, it is instead a work on message and sense. (Seleskovitch and Lederer, 1984: 256) explain the concept of sense as the intention of the speaker and what the listener has understood. Therefore, a successful translation or interpretation conveys the meaning intended by the speaker even if the linguistic forms used in the target language does not match with the one employed in the source language. In other words, what matters most is that the listener/reader understands the meaning intended by the author/speaker. The theory describes the fact that languages have different ways of formulating similar content. It focuses mainly on the explanation of interpretation and written translation activities. Lederer (1997: 11-18) describes the process of translation as a combination of correspondence and equivalence. According to her, the aim is to produce a translation that will raise the same “cognitive and emotional” effect in the target language as it appears in the source language.

According to (Setton & Dawrant, 1984):

“The Theory of Sense holds that to produce a translation that is faithful, naturally expressed and makes sense, the translator’s (or interpreter’s) fundamental focus must be on understanding the speaker’s meaning in the context, and reformulating it naturally in the target language, rather than stringing together linguistic equivalents for the words and phrases he uses”.

According to the proponents of this theory, the process of translation follows three main steps for a better rendition. These steps as explained by (Lederer, 1997) are:

- Comprehension of the meaning which comes with the understanding of the words, idiomatic expressions used in context by the speaker in the source language. The
utterances formulated by the interpreter are the projection of his/her comprehension of the units of meaning combined by the speaker.

- Deverbalization which consists for the translator or interpreter to detach from the words of the source language and retain the idea they carry and the meaning intended by the authors or speaker in a specific context. The implementation of this mental process has the advantage of helping the interpreter to remember only the essence of the message so that he/she can then re-express it with his/her own words in the target language. This means that during the speech given by the speaker, the interpreter will not focus on the form of the message expressed but instead consider the meaning that emerges beyond the words and expressions used to re-express them in the target language using equivalences. It is a useful method that permits to avoid syntactic interference since the interpreter breaks away from the encoding of the source language to produce a natural and acceptable expression according to the norms of grammar.

- Reformulation or re-expression of the meaning in the Target language. Thus the main focus of the interpreter is to convey the meaning expressed by the speaker in the target language using his/her own words naturally and accurately. Once the message has been well understood and Deverbalized, the expression of the interpreter becomes free of interference and conform to the norms of the target language. It means that the expression is reformulated in such a way that it sounds natural to a native speaker because it respects the lexicon and the rules of grammar of that language. Moreover, the theory of sense highlights two strategies
coexisting in any translation/interpretation process: Correspondence and equivalences.

- **Correspondence**

The implementation of correspondence in the process of translation/interpretation implies the fact that the translator/interpreter uses the corresponding terms used in the source language during meaning transfer in the target language. It is a process which involves the replacement of the words in the source text by their direct equivalent meaning in the target language with the aim of maintaining the meaning intended. There is a wide range of corresponding words between English and French. These words are not influenced by the context i.e. they keep the same meaning regardless of the contexts in which they are used. These include proper names, figures, and technical terms. In regard to this study dealing with health-care interpreting, the concept of correspondence will be used to analyze the interpretation of technical terms such as names of infections, conditions, names of medicines, and abbreviations. For example, the term “Heart attack” in English corresponds to “Crise cardiaque / infarctus in French. Another example is the term “Head injury” which is translated by “Traumatisme crânien” or “blessure à la tête”. Some technical terms are sometimes abbreviated and used to express conditions or diseases as in the cases of “[AIDS (Acquired Immune Deficiency Syndrome)] which corresponds to [SIDA (syndrome immuno-déficitaire acquis)] or [HIV-Aid] replaced by [VIH-SIDA]. In those cases the translator or interpreter can only give the direct corresponding word or expressions describing the same idea because each language uses different forms to express similar meaning.
• **Equivalence.**

The use of equivalencies refers to the fact that the translation or interpretation of the words and expressions during the transition from the source language to the target language is done by taking into account the context in which they are used. In other words, the interpreter/translator must make the choice of the words considering their polysemous characters. Therefore equivalence is implemented by taking into consideration the contextual meanings of every word to convey accurately and faithfully the overall meaning intended by the speaker. Lederer (1997: 11) points out the fact that the aim is to find the right semantic equivalence of the phrase or sentence in the target language. In this context, the translation is not limited to a simple transfer of corresponding words in the target language but goes beyond by taking into consideration factors such context and involves the background knowledge of the translator about the subject, the author’s intention, style, and the period when the text was written.

The description of Equivalences given by Vinay and Darbelnet (1995: 38) goes in the same line with the one described by the theory of sense. It highlights that a similar event can be expressed with two utterances employing entirely different structural methods and stylistic. They argue that equivalence can be seen as pertaining to a wide range a phraseological repository of idioms, nominals or adjectival phrases, clichés, proverbs. Therefore it consists of providing the corresponding idiomatic expression in the target language.
1.8. Literature Review

In this section we will review theoretical literature, empirical literature and literature on medical interpreting.

1.8.1. Review on Theoretical Literature

Sight translation is a process of meaning transfer which consists of reading aloud the meaning contained in a source text into the expression of a target language. According to Gile (1995: 179), the performance of sight translation is needed when delegates in a meeting ask for an instantly oral translation of a text they have been given or sometimes when a part of a speech was read out from a text and then given to the interpreter to operate a verbal translation of the content. During this task, the aim of an interpreter is to make the necessary transpositions in word order to make the message understandable and consistent with the grammar rules of the target language. In other words, his/her objective is to avoid any syntactic interference so that the quality of the message delivered is not negatively affected. The issue of word order was addressed by Vinay and Darbelnet (1958: 211) who compared the stylistics of French and English and proposed a set of methodologies for translation. They argue that one utterance in a given language is made up of lexical elements arranged in a specific sequence prescribed by the grammar rules concerning word order. But these rules contained in the grammar of each language offer some flexibility that allows the translator or interpreter to make changes in the order of the grammatical categories. These changes are achievable by means of transposition which consists in delivering the message from the source language into the target
language by using different word class. It means that the interpreter will have sometimes to change a noun by an adjective or replace a verb by an adverb. (See 4.1.3.3)

Setton and Dawrant (2016: 211) explained the issue of word order during the implementation of sight translation. They consider that most of the challenges related to this aspect can be solved by the application of techniques such as “Analysis-driven, meaning-based interpretation, looking ahead, and concentrating on formulating naturally in the target language”. Through this information processing, the interpreter will be able to cope with the difficulty of the task.

1.8.2. Review of empirical literature.

Empirical studies have been conducted in the area of sight translation to explore this new mode of interpretation. Agrifoglio (2004: 46) highlights the influence of syntactic interference during sight translation as a challenge for interpreters performing this task as by saying that “ST also poses a greater risk of source-language interference, as words and phrases remain before the Sight translator’s eye”. In her study, she presented some characteristics of syntactic interferences as a manifestation of inadequacy between the subject and the predicate, pronouns, and substantive they referred to, contrasts between gender, number, and person, compatibility of tenses of the source and the target languages. (2004: 52-53). She focused, particularly on English-Spanish language pair. Even if the language pair studied in her research is not the same as ours (English-French), it helps us to understand how syntactic interference appears and its characteristics.
As a possible solution to this challenge, Setton and Dawrant (1984) propose that sight translation is perhaps the most appropriate exercise that can be used to draw the attention on the effects of linguistic interference and encourage deverbalization. Sight translation is therefore viewed as a useful and powerful tool to get rid of language structure and to give the main message to the audience.

The features of linguistic interference as we know them today have been defined mainly by the work of several experts whose research allows us to understand this phenomenon appearing in the expressions of bilingual people as a result of contact between languages. Linguistic interference as we defined it previously according to Uriel Weinreich (1953: 1), is largely shared among linguist. Mackey’s (1976: 397) conception of this linguistic phenomenon goes in the same line. According to him, interference is manifested when someone uses components belonging to another language while expressing himself either in a written or oral form. It shows that language interference is triggered by the contact of different languages whereby a speaker of a second language uses the feature of his/her first language into a target language as a result of lack of knowledge of the right expression or term. These features can take the form of a syntactic and grammatical interference as presented by Marjorie Agrifoglio working on sight translation English-Spanish pair (2004: 52-53).

In the context of studies realized on the impact of source language interference in interpretation, we can mention the work conducted on language interference by Gao (2013). His study focused on source language interference in interpretation (SLI) by
analyzing the structural and nonstructural causes that affect the interpretation process. The test was realized using a language combination from English into Chinese and vice versa. He evoked the aspect of structural causes which refers to cross-linguistic differences in language structure considering the fact that English and Chinese have entirely different ways of expression. Therefore, since both languages have different syntactic structures, interpreters tend sometimes, to transfer the format of the source language into the delivery of the target language ignoring the specificities and appropriate expressions of that language. On the other hand, non-structural causes refers to the differences that go beyond the language structure.

Linguistic interference is usually described as a phenomenon which results from the influence of the first language over the acquisition of the second language whereby the learner tends to transfer the feature of the mother tongue in the expression of the target language. This feature is described in the study conducted by Jeanne VAN DYK (2007). She was implementing sight translation as a strategy to improve the communication skills of the second language learners. The Sight translation was therefore performed from English into French. The aim was to encourage them not to let their first language influences their expression in the target language (French). The study was conducted at the University of Pretoria and involved forty-four students who were learning French as a second language. The conclusion showed that sight translation is a useful tool which helps second language learners to improve their communication skills by avoiding direct transfer of the patterns of their first language. Our study will focus on syntactic
interference during sight translation from English into French. It is an area where linguistic interference deserves significant attention.

1.8.3. Review of Literature on Medical Interpreting

Health-care is one of the fields where community interpreters are more solicited and work as intermediaries between the doctors, orderlies, and patients to help overcome language barriers. They aim at facilitating communication with actors operating in this sectors, and they play a key role in the success of the ongoing medical care. Tribe (2004, 130) published an article in which she highlights the importance of the role played by interpreters in the emotional support and assistance of people displaced because of armed conflict. The study points out that when patient and healthcare provider speak the same language or when an interpreter is involved in the process of communication, it contributes to improve the quality of communication with less emergency visit. Leanza (2005: 170) described the typology of the role played by interpreters in health interpreting based on the proposition of Jalbert (1998). This typology presents various roles attributed to the interpreter such as translator, cultural informant, cultural mediator, advocate, and bilingual professional. The role of the interpreter as explained is merely the one of a facilitator of communication by transmitting the message as accurately as possible in the same way it was expressed by the parties (physician/patient). As a cultural informant, the interpreter makes use of his/her background knowledge of the cultural norms and values to facilitate communication among the parties. In the role of bilingual professional, the interpreter uses his/her background knowledge such as training or experience in the medical field to lead the interview in the patient’s language and then
reports to the physician. Therefore in this context his/her role goes beyond the one of a simple translator as explained in this typology. It is not merely limited to the transmission of the message as received but also ask questions about the patient’s condition.

Many organizations of professional interpreters working in health-care interpreting have also defined the role of interpreters operating in this field. They have put in a lot of effort to regulate and establish standards related to the practice of interpretation in the health-care setting by providing guidelines to explain the role and assignment performed by interpreters in helping to overcome linguistic barriers. One of those roles is to sight translate medical records such as letters related to the patients’ medical history, medical discharge instructions, consent forms, financial agreements. Rocio (2009: 2) argues that sight translation is a valuable or helpful way to convey orally the message contained in a document, especially in emergencies. But the National Council on Interpreting in Health Care (NCIHC 2009: 7) set a guideline in which it puts some restrictions with regard to the length of documents that are appropriate for sight translation. Because documents such consent forms or financial agreements are long and technical. So they are time-consuming and appear irrelevant because the patient might not be able to remember what have been interpreted. In this regard, it recommends that medical records that contain short and precise instructions are more suitable for sight translation. The council (2008: 9) also published a set of standards of good practice and asserts that interpreters should not perform sight translation of complex vital records such surgery consent forms. In this context, the recommended attitude from the interpreter is to ask the health-care provider to explain the technical terms and then proceed with the interpretation of the given
explanation. In general practice, either face-to-face or telephone interpreting, it is recommended that the interpreter receives a briefing on the ongoing medical treatment before the meeting in order to understand the context and ensure more accuracy during the interpretation.

Although our study focuses on sight translation applied in the interpretation of medical records, it is worth mentioning that in their role of facilitators of communication, interpreters perform other interpreting mode such as consecutive, simultaneous and telephone interpreting. The Australian organization NSW Health Care Interpreter Services (NSW HCIS, 2014: 18) describes the modes of interpreting applied in the medical field. According to this organization consecutive interpreting is the most predominant mode of interpreting, followed by simultaneous. In consecutive mode, the interpreter takes note of the explanation given by the physician and also the patient to interpret in the target language. It can happen in a face-to-face meeting or over the phone. Indeed phone interpreting is frequently used in medical health-care when the physician and the patient are not in the same location. They, therefore, resort to phone interpreting to communicate. Simultaneous interpreting, on the other hand, is practiced in some specifics health-care area such as speech pathology, mental health, and neuropsychology.

1.9. Research Methodology

This section of our research presents the method used to carry out the study. In the context of our research, the methodology describes the research design, sampling method, the participants, data collection tools and the process of data analysis.
1.9.1. Research Design.

Kothari (1990: 14) defines research design as the formulation of the conceptual structure on which the realization of the research is based. Our study is based on a descriptive purpose because it aimed at describing how syntactic interference affects the quality of interpretation and the strategies the participants used to achieve that quality. To accomplish that goal we used secondary and primary sources of data. The secondary source of data came from published papers on theoretical literatures and empirical studies conducted in the area of sight translation, linguistic interference as well as healthcare interpreting. We collected the primary source of data from the respondents by using different instruments of data collection such as observation and questionnaire.

The interviews were conducted at the end of September at the PAMCIT headquarters where the respondents were doing their internship. This research aimed at investigating how trainee interpreters handle the challenges of syntactic interference during sight translation of medical documents. All the respondents with French A were selected due to the fact that the research aimed at investigating how trainee interpreters handle the challenges of syntactic interference during sight translation of a medical document from English into French. They were individually interviewed for about 10 minutes starting from the sight translation of the medical discharge instructions; meanwhile, we were observing and taking notes. The interview ended with the administration of the questionnaire. The respondents received the same text in the frame of this research. The document given for the sight translation is a leaflet serving as discharge instructions for
patients released after a head injury. It was issued by the Emergency Department of the Oxford University Hospitals NHS Trust and is based upon guidance from the National Institute of Clinical Excellence (NICE 2014). It is a text of 478 words, and they were supposed to render the sight translation within 5 minutes. They were given 5 minutes to read the document before starting in order to familiarize themselves with the content. This process is the same used during the training process and also because in health-care interpreting, interpreters are briefed for preparation before starting.

We recorded the respondents’ renditions in the process of data collection to help establish a comparison between the source text and their delivery in order to better assess not only their mistakes but also the successful strategies they used. Through this we were able to outline the different strategies used in various situations. The different audios have been transcribed and presented in a table in chapter three (3) dedicated to data presentation.

1.9.2. Sampling Method.

We opted for a purposive sampling which resulted in the selection of three respondents. They were selected based on certain criteria such as area of study, level of experience and language combinations. Two Respondents graduated from the Center for Translation and Interpretation (CTI) of the University of Nairobi (Kenya). One respondent is a graduate student from the University of Ghana. They were selected to participate in this study to investigate the way inexperienced interpreters handle the challenges of syntactic interference during sight translation of medical documents. We focused on recently graduated students in conference interpreting course with less than one year of experience
as professionally trained interpreters because the features of interference is more prominent among inexperienced than experienced translators or interpreters (Malkiel 2006: 338); (Baker 2009: 307).

Another criterion which determined their selection to participate in this study was their language combinations considering only those having French as first working language (French A) and English as second working language (English B) or passive language (English C). They all had different language combinations with French A in common. Two of them had English (B) and one had English (C).

1.9.3. Data Collection Instruments

The research has been conducted using two instruments of data collection which are observation, questionnaire.

- **Observation.**

  In the frame of our study, we adopted for a structured observation by looking at some defined units such as the respondents’ hesitations, repetitions, pauses and the way they influenced the comprehension of the message in order to judge the quality of the rendition. We used the same criteria for all of them. We also focused on Confidence, communicative attitude such as eye contact and intonation during the rendition. Confidence and communicative attitude are very important because they contribute to the believability of the message. If both elements lack in the interpretation, the patient will
lose faith in the interpreter and might not take seriously into consideration what the interpreter is saying. Their renditions were also recorded for further analysis of the hesitations and pauses.

- **Questionnaire.**

According to Mugenda and Mugenda (2003), questionnaires are generally used to collect information concerning a population under study. In the context of our research, it helped us to obtain primary source of data. It was devised using Google doc and sent to the respondents. They responded and submitted they answer online. We used questionnaire with the aim of getting information about their awareness of written translation and sight translation strategies as well as know whether they used these techniques consciously in their rendition. Besides, we wanted to know the respondents’ level of knowledge of syntactic interference. The questionnaire was divided into four sections. Section 1 was meant to get the background information about the respondents. As for section 2, we obtained information about their knowledge of syntactic interference from source text into the target language. Finally the last part of the questionnaire was set to collect information about sight translation and translation strategies applied during their renditions.

**1.9.4. Data Analysis**

Data analysis was done by narrating the content of the data collected from the respondents regarding the syntactic failures that led to syntactic interference. The recorded renditions helped to analyze the content of the interpretation by comparing it
with the content of the source text focusing on accuracy, faithfulness, clarity of the meaning. The results obtained have been examined using the notions of correspondence and equivalences of the theory of sense or ‘Interpretive Theory of Translation’ (ITT). The notion of correspondence was useful to determine whether the participants used the corresponding words such as proper names, names of conditions, diseases, medicines and other technical medical terms in the target language. The context does not influence those words. As for equivalence, it has helped us analyze whether the respondents were able to describe the same meaning presented in the source language by using a completely different expression or formulation in the target language taking into account the contextual meanings of the words. In the second part we have also analyzed some of the translation and sight translation strategies applied during their renditions.
CHAPTER TWO

SIGHT TRANSLATION AND SYNTACTIC INTERFERENCE

2.0 Introduction

Just like any other mode of interpretation, sight translation is performed when there is a need to transfer meaning from one language into another by doing an oral translation of a written text in one language into another. According to Setton & Dawrant (2016: 205) “Sight Translation (ST) is the oral translation of a written text, either ‘cold’, or after it has been read out, in which case the original version may be handed to the interpreter before or after being read”. It is always an advantage for interpreters to have the text beforehand. It enables the interpreter to find the most appropriate idiomatic expression or equivalent in the target language since during the task, time constraint represents a constant pressure which can undermine the quality of the rendition. Before getting into more details about syntactic interference, it is important to have a look at different areas of application of sight translation.

2.1. Sight Translation: From a Pedagogical Tool to a Practical Interpreting Mode.

Sight translation has different facets. Its areas of application range from academic to professional interpretation. Indeed sight translation is used as a training tool for trainee interpreters to raise awareness about the risk of linguistic interference while expressing in the target language. Another aspect of this practice that we will develop in the following lines is its application in professional meetings where interpreters use it as a mode of interpreting to break language barriers.
2.1.1 Sight Translation as a Pedagogical Tool.

Sight translation has been and remains a powerful educational tool used in interpretation course to develop simultaneous skills for trainee interpreter. It was introduced in the context of our Master in Interpretation of Conference during the first semester. The academic aim is to help the student develop a set of necessary skills and to demonstrate the importance of detaching from the source language. Sight translation is then introduced before the introduction of simultaneous interpreting since both modes of interpretation share some characteristics or similarities in various aspects such as time constraint; output delivered orally and the necessity of speaking fluently by keeping the momentum. Daniel Gile’s effort model (1997: 198) allows us to draw an apparent similarity between sight translation and simultaneous interpreting in terms of cognitive effort involved in the execution of both tasks. According to the explanation given by Gregory M. Shreve, Isabel Lacruz, and Erik Angelone (2010), in “Cognitive effort, syntactic disruption, and visual interference in a sight translation task” the efforts involved in SI are:

- [L (Listening) + P (production) +M (demand on short-term Memory) + C (Coordination)] Listening refers to all comprehension-oriented activities from input signal analysis through lexical access and meaning representation.
- [Production: all activities from the mental representation of meaning through speech planning and production].
- [Memory: demand for short-term memory.]
- [Co-ordination: All the effort engaged in the management of the other three efforts (L+P+M)].
As for sight translation, the effort involves R (reading and analysis) + P (production: all activities from the mental representation of meaning through speech planning and production). In this context, the Listening process is replaced by reading since the input is a written text. Despite the difference at the input level (SI: aural/ ST: visual), the mental process remains the same. In either sight translation or simultaneous interpreting, the interpreter has to process the information while speaking at the same time. We can see through this explanation that sight translation and simultaneous share some characteristics regarding cognitive effort deployed during the task.

Another reason for using sight translation as a pedagogical tool is to create awareness and help the student to overcome linguistic interference. That is why many scholars perceive it as a useful training tool since the student has to develop coping strategies to avoid linguistic interference while converting meaning from a written text into an oral output.

2.1.2. Sight Translation as an Interpreting Mode.

As presented in chapter 1, sight translation is becoming more and more present in the work of interpreters and is generally used during meetings and in many fields such as in court, at the police station. “ST is occasionally needed in real life when texts are read out in meetings” (Setton & Dawrant 2016: 205). Medical field is also another area of application of sight translation where there is a wide range of medical documents. They are established for many reasons ranging from informing the general public and patients about health matters, procedures, and guidelines, to legal documents such as financial agreements, consent forms, advance directives. Interpreters working in this area are often
asked to perform Sight translation of short medical documents such as medical reports, discharge instructions. Sight translation is needed in medical interpreting to assist in the process of medical care and is considered as a “useful way to verbally communicate the contents of a document, particularly in cases of emergencies (IMIA Guide on Medical Translation, 2009). Thus interpreters play a crucial role in medical interpreting since they are the ones called to perform this task. The guide also highlights that, just like a standard written translation task, sight translation requires the same level of proficiency, rigor, skills, and knowledge. The knowledge applied during written translation text refers to different techniques and strategies used by interpreters while performing that task.

We have just seen some of the areas of application of sight translation and the role played by interpreters. Whatever mode, interpreters are not safe from source language interference. As we explained in the previous line, our study focuses on syntactic interference. In the following lines, we will describe the characteristic of interference and provide more information about syntactic interference.

### 2.2. Descriptions of the Characteristics of Interference.

Interference generally happens as a result of contact and familiarities between languages and appear in different forms. It is mainly characterized by the transfer of the features of one language into another. Interference “is the importation into the target text of lexical, syntactic, cultural or structural items typical of a different semiotic system and unusual or non-existent in the target context” (Aixelá 2009: 75). The definition given by Aixelá touches on the different types of interference during a translation task or in the expression of bilingual speakers. It reveals the lack of correctness in the way the target language
expression sounds. The characteristic of interference as a deflection from a given language norm as argued by Weinreich (1966: 1) is also supported by Galvao (2009: 1) who provides more details about the causes of those instances of deviation arguing that such deviations are mostly the result of a process of meaning transfer from the native language to the second language. That transfer can acquire a positive or negative value depending on its influence in the comprehension of the message delivered. If the transfer appears to be helpful during that process, it will be considered as positive, and the opposite will be qualified as a negative transfer.

It is worth to note that interferences not only happen in the form of a transfer from mother tongue into a second language but they also result from the influence of a source language while interpreting a message into a target language. In this regard, Galvao (2009: 5) claims that “Interference in translation may occur when translating text with its source language (henceforth SL) into the target language (henceforth TL)”. Therefore interference is not only limited to a transfer from L1 into L2 but also entails the aspect of transfer from L2 into L1.

We will focus on one of those instances of deviations which appear in the form of Syntactic interference in the expression of bilingual speakers. Interpreters or translators working from French into English or vice versa are more likely to be confronted with the problem syntactic interference because of the historical contact and familiarities between both languages. It is characterized by the tendency of transferring the English structure into French making the message sound “unnatural” in the case of an interpreter working
from English into French. Although this phenomenon happens regardless of the experience of the interpreter, it is clear that it affects the rendition of trainee interpreters more. Kussmaul (1995: 17-18) argues in the same line by claiming that interference can be found not only in the translations of beginners but also in those of experienced translators. It can be attributed to factors such as time constraints where sight translation represents a higher risk of source-language interference, due to the constant presence of words and sentences in front of the eye of the Sight translator. Agrifoglio, (2004: 46).

Another characteristic of interferences is that they are easily recognizable because they appear as weird utterances which sound unusual or unnatural, awkward in the ears of the listener and may lead to confusion. It is mainly influenced by source-text formulation. What draws the attention of the listener is the deviation from the “norm” of the language. It is usually created by the application of a word-for-word translation characterized by the projection of the word order taken from the source language and implemented into the target language without taking into account the acceptable natural expressions. The illustration below shows the negative impact that a literal translation can have and the way it can make the message sound unnatural. The following examples demonstrate also the risk of literal translation on the understanding of message.
Table 1: Example of Literal Translation

<table>
<thead>
<tr>
<th>Example</th>
<th>Source language</th>
<th>Literal translation</th>
<th>Correct translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Please Inform your doctor if your pain is worse</td>
<td>Veuillez informer votre médecin si votre douleur est pire</td>
<td>Veuillez informer votre médecin si votre douleur empire</td>
</tr>
<tr>
<td>2</td>
<td>Everybody should have a tetanus shot every 5 to 10 years.</td>
<td>Tout le monde devrait avoir un tir tétanos tous les 5 et 10 ans.</td>
<td>Tout le monde devrait se faire vacciner contre le tétanos tous les 5 et 10 ans.</td>
</tr>
</tbody>
</table>

The correct translation in example one in this table shows how important it is to maintain a natural and idiomatic expression during the transition from English to French. The risk of interference remains high especially during sight translation. In example, the syntactic restructuring was necessary to reproduce an accurate translation which sound natural and clear in French, for instance the change of the adjective “worse” into a verb “empire” in French.

Example two shows the importance of taking into consideration the context and the use of idiomatic expression in the TL deriving from the polysemous aspect of a word. (Shot) in this context refers to an injection hence the use of “vacciner contre le tétanos” to express “tetanus shot”.

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In English one says “have a tetanus shot” and that is the appropriate idiomatic expression. Whereas in French the idiomatic expression is “se faire vacciner contre le tétanos”, it could be translated literally into English by “make a shot against tetanus”. It is undeniable that if one say “To make a shot against tetanus” while expressing in English, this expression would sound awkward for an English speaker. In the same way, translating literally the expression “have a tetanus shot” into French makes the message sound unclear. That example demonstrates the necessity of a restructured translation detached from the source language.

In the next section, we will explore two essential characteristics of linguistic interference which are related to interference seen as a voluntary and an involuntary projection from one language into another.

2.2.1. Intentional vs. Unintentional Interference.

Interference is generally seen as an unintentional, unwanted and unconscious transfer from the source language into the target language leading to mistake. In other words, it is an involuntary deviation from the norms of the target language which has a negative impact on the rendition. Aixelá (2009, 78) corroborates this idea: “Almost everybody seems to agree to a lesser or greater extent that normalization is a good thing and interference is essentially evil”. It shows to which extent the imperative feature of the norm in a language remain essential and generally accepted by the speaker of that language. Any deviation from those norms of grammar is automatically identified. Interference is therefore seen as an anomaly which must be avoided and corrected for the
speaker to make sense and pass the message across. However, interference is not always seen as something negative because it can have some positive effect and is often considered enriching depending on the type of text being translated (Newmark 1991, 78).

Here we are looking at interference as an intentional feature which has a positive impact on the rendition considering the fact that borrowed word, calques and sometimes “good friend” as opposed to “false friend” are better to be kept or directly translated into the target language. Newmark defends the idea in which fear of interference lead the translator to look for another expression in some cases where it would have been more correct to use a formally corresponding word. This is what he refers to as “fear of literalness” (Newmark, 1991).

Interferences can sometimes be seen as a lesser evil in a context where the interpreter has no choice but to use them as a coping strategy especially during sight translation and simultaneous interpreting where momentum and fluency are required and are also seen as a criterion of a good interpretation. From this angle, language interference is acceptable since the primary objective of an interpreter is to deliver a message.

But in our study, we are focusing on unintentional or unwanted interferences resulting in syntactic failures that have a confusing effect on the understanding of the message by looking at interference indicators such as clumsy expressions and awkward construction of sentences appearing during the rendition. They are recognizable because they sound “weird” once expressed.
2.3. Syntactic Interference.

Syntax refers to the way sentences are formed by the association of words according to the grammar rules of the language used. It is worth noting that each language has its own grammatical rules which speakers of the same language use to communicate understandably. Any deviation from the syntactic norm of a given language is considered as interference. It is mainly characterized by a word-for-word or literal translation of a syntactic structure from the source text, which can either be the entire sentence or part of it” (Havlásková 2010: 51). Therefore syntactic interferences do not occur at the level of the word but rather on the level of syntax. The literal translation occurs as a negative transfer when the word-order of the source text does not suffer any change while being translated into the target and also when words are usually translated without taking into account their contextual meanings or polysemous nature.

Agrifoglio (2004: 52-53) conducted a research on language interference where she presented some characteristics of syntactic interferences as a manifestation of inadequacy between the subject and the predicate, pronouns, and nouns they referred to, disparities between gender, number, and person, compatibility of tenses of the source and the target languages. She focused, particularly on the English-Spanish language pair. Even if the language pair studied in her research is not the same as ours, it helps us to understand how syntactic interference appears and its characteristics.
As we explained in the background of the study, English and French are two languages that have influenced each other in the course of history. Both languages share some similarities in syntactic order. However there are cases where variations are necessary to achieve the production of natural expressions that are considered acceptable by the speakers of the target language during the process of interpretation.

2.3.1. Syntactic Similarities and Variations between English and French

When we closely analyze the relationship between French and English language, we note a few similarities in word order alignment which results in an acceptable literal translation. On the other hand, we cannot deny the fact that both languages have some variations which do not allow a syntactic calque during interpretation because they sometimes need some changes in the positioning of the grammatical categories to produce a natural expression.

2.3.1.1. Syntactic Similarities

One similarity between both languages is about the structure pattern “Subject Object Verb” (SOV). Indeed, sentence formation in French, as well as English, generally follow the same syntactic structure pattern based on SVO. We usually have the clause starting with a preposition followed or nouns (Setton and Dawrant, 2016: 306). We can see the similarities in the example below, e.g.:

The patient is leaving hospital / Le patient quitte l'hôpital.

<table>
<thead>
<tr>
<th>Subject</th>
<th>Verb</th>
<th>Object</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Le patient/The patient]</td>
<td>[is leaving /quitte]</td>
<td>[hospital / l'hôpital]</td>
</tr>
</tbody>
</table>
Like the example given above, it happens that the translation of some sentences from English into French can be realized directly without changing the word order and does not require any restructuring during the transfer of meaning. Such situations are generally not challenging for the interpreter. The second aspect of similarities between these languages is the type of sentences structure.

Since syntax is a process of combining sentence, it is important to look at the type of sentence structure. The grammatical rules in both English and French are almost similar with regard to sentence structure. This allow for reproduction of identical units of meaning during the process of interpretation. The following examples present some of the similarities and how elements such as subject, predicate as well as dependent and independent clause are kept in the target language during interpretation.

Simple sentences have only one independent clause. For instance, the sentence “I bought a new car” can easily be translated into French following the same principal of independent clause “J’ai acheté une nouvelle voiture”. We can see the subject (I/j’ai) and the predicate (bought a new car/acheté une nouvelle voiture).

Complex sentence comprises a main or independent clause and at minimum one dependent clause related by a conjunction. For example, “My father left the hospital when my mother went home” is translated by “Mon père est parti quand ma mère est parti à la maison”.

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The main clause is (My father left the hospital/mon père a quitté l’hôpital) and (my mother went home/quand ma mère est rentrée à la maison) is the dependent clause. The example shows the similarities in terms of independent and dependent clause in both languages.

A compound sentence is another type of sentence structure in English. It is composed of at least two simple sentences linked by a conjunction or punctuation. As simple and complex sentences, it is possible to establish a relation between French and English. In the example “We could not meet, but I left the document with his assistant”.

However, despite those common structure shared by both languages, there is a wide range of variations. Thus, the process of translation is a continuous task of adaption according to the structure used in the context.

2.3.1.2. Syntactic Variations between English-French

Syntactic variations are more critical and represent a great challenge for the interpreter especially during sight translation. One of the main challenges where it is important to pay attention is the variation in tense between both languages.

- **Variation in Tense.**

Variation in Tense is one of the differences between French and English. Sometimes, changes in verbal tenses are necessary to reproduce in the target language an accurate version of the idea expressed in the source language. In this context the interpreter cannot stick to the tense used in English and must resort to other tense in French in order to maintain accuracy and quality of interpretation. There are cases where future tense is replaced by subjunctive or a message given using present tense in English is rendered by
employing subjunctive in French. This table below presents some example of variation in tense from English into French.

**Table 2: Example of Variation in tense.**

<table>
<thead>
<tr>
<th>SL (English)</th>
<th>Translation (French)</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I will see him soon since he is arriving tomorrow.</td>
<td><em>Je le verrai bientôt puisqu’il arrive</em> demain</td>
<td>The use of future tense in the phrase “he is arriving tomorrow” replaced by the subjunctive tense in French “puisqu’il arrive”.</td>
</tr>
<tr>
<td>I don’t want you to come now</td>
<td><em>je ne veux pas que tu viennes maintenant.</em></td>
<td>In this sentence there is a change from present tense (English) to subjunctive (French). All the verbs in French have been conjugated (to want: veux / To come: vienne) whereas in English, only the verb “To want” was conjugated. Also the infinitive “to come” in English has been replaced in the target language by the subjunctive tense “<em>que tu viennes</em>. A literal translation of this sentence would sound weird in Fr “<em>Je ne veux pas toi venir maintenant</em>”. Therefore a variation in tense is necessary.</td>
</tr>
</tbody>
</table>

- **Variation in adjective and substantive (Noun + Adjective) vs (Adjective+ Noun)**

Another area of variation is the change in the syntactic order of word in English and French. Both languages use a different order that must be taken into consideration. In
fact, in English, the adjective comes before the Noun [animal bite (substantive + adjective)] whereas in French it is the opposite norm based on substantive followed by the adjective [morsure d'animal (adjective + substantive)]. During a written translation, it is easy for the translator to identify and adjust the word order and avoid interference. But in Sight Translation, it becomes more challenging because of time constraint and the interpreter must look ahead to identify the structure in order to be able to convey the correct sentence structure based on (substantive + epithet) instead of (epithet + substantive). We provided below a set of examples related to this kind of variation.

Table 3: Variation in Adjective and Substantive

<table>
<thead>
<tr>
<th>Source language</th>
<th>Target language</th>
</tr>
</thead>
<tbody>
<tr>
<td>He gave me a red pen</td>
<td>Il m’a remis un stylo rouge</td>
</tr>
<tr>
<td>You are working on an interesting subject</td>
<td>Vous travaillez sur un sujet intéressant</td>
</tr>
<tr>
<td>You may experience the following symptoms</td>
<td>Vous pouvez éprouver les symptômes suivants</td>
</tr>
<tr>
<td>There will be no collateral damage</td>
<td>Il n’y aura pas de dommage collatéral</td>
</tr>
<tr>
<td>You might need to report this to animal control or the local police.</td>
<td>Vous devrez peut être en informer les services du control animalier ou la police locale.</td>
</tr>
<tr>
<td>Some tetanus shots are combination shots</td>
<td>Certains vaccins contre le tétanos sont des combinaisons</td>
</tr>
</tbody>
</table>

We can see in the above table that a word-for-word translation is not possible since the order of the different categories in both languages cannot be changed according to the rule of grammar. It becomes more complex and challenging for the interpreter when he/she is dealing with a complex sentence. Because it is necessary to combine the effort
of keeping a look ahead in the text plus the reading, analysis, and production of the output message according to the effort model developed by Gile as explained earlier in this chapter.

- **Variation in grammatical categories.**

Individuals speaking the same language can communicate because of the association of the word class. It refers to components of sentences such as noun, verb, article, adjective, pronoun, adverb, preposition, conjunction, and interjection. There are many instances where interpreters have to effect a change in the grammatical categories of the source language to adapt it to the norm of the target language. In such a context where a literal translation would be considered awkward, a transposition is necessary to reproduce the meaning in a way that will sound more like a natural expression.

**Table 4: Variation in grammatical categories.**

<table>
<thead>
<tr>
<th>Verb → substantive</th>
<th>English</th>
<th>French</th>
</tr>
</thead>
<tbody>
<tr>
<td>What people <em>do</em> determine their health condition</td>
<td>La conduite des gens détermine leur état de santé.</td>
<td></td>
</tr>
<tr>
<td>substantive→ Verb</td>
<td>His <em>assumption</em> is that no one should die from that disease.</td>
<td>Il <em>suppose</em> que personne ne devrait mourir de cette maladie.</td>
</tr>
</tbody>
</table>

The variation in words class appears necessary and makes it possible to bring a solution where the use of the literal translation would be inappropriate and would cause a syntactic interference. These changes in grammatical categories when interpreting from English into French are ways of conforming to the norms of the target language grammar. They contribute to make the message sound more natural.
CHAPTER THREE

DATA PRESENTATION

3.0 Introduction

This chapter is dedicated to the presentation of the data collected according to the methodology developed in chapter 1. We presented first the different segment of the text used for the exercise of sight translation followed by the renditions done by the respondents. They were presented in separate segments taking into account the different units of meanings of the discharge instructions used and which is a case of a patient who was released after suffering a head injury.

3.1. Presentation of the Source Text.

The document presented below was used for the performance of sight translation. It is a text of 478 words issued by the Emergency Department of the Oxford University Hospitals NHS Trust and is based upon guidance from the National Institute of Clinical Excellence (NICE 2014).
Information for patients.
Your doctor or nurse practitioner has examined you and is happy for you to go home. However, for the first 24 hours at home you should have a responsible adult with you, who has read this information sheet. Most head injuries do not lead to serious complications. However, if you experience any of the following symptoms, you should go immediately to your nearest emergency department.

- severe or worsening headache (a mild headache is normal after a head injury)
- vomiting (being sick)
- confusion or feeling unusually sleepy
- fits (collapsing or passing out suddenly)
- any change to your eyesight
- dizziness or lack of co-ordination
- weakness in one or both of your arms or legs
- clear fluid or blood coming out of your ears or nose
- new deafness in one or both ears
- inability to remember what has happened (amnesia).

What you should not worry about?
It is normal after a head injury to experience the following symptoms over the next few days.

- Mild headache. It is safe to take a painkiller such as paracetamol. (Please see the instructions on the packet for advice about how much to take and how often.)
- Feeling sick (without vomiting) or not feeling hungry. This can be helped by drinking clear fluids (such as water) and avoiding drinking alcohol.
- Difficulty concentrating.
- Feeling more tired, which might then make you irritable or anxious.

These symptoms should disappear over the next two weeks. However, if they don’t or you are concerned about how you are feeling, please see your GP (general practitioner).

General Advice.
If you follow this advice you should get better more quickly and may relieve some of your symptoms.

- Try to avoid stressful situations as these can make any symptoms worse.
- Do not return to your normal school, college or work activity until you feel you have completely recovered.
- You should not drive a motor vehicle or operate machinery for at least 24 hours after your accident.
- Do not work on a computer or play computer games until you have completely recovered, as spending time concentrating on images or text on a screen may make your symptoms worse.
- Your ability to tolerate alcohol is reduced after a head injury, so you should not drink alcohol until you are completely recovered.
- Do not play any contact sports for at least 3 weeks and without talking to your doctor first.

Long-term problems.
Most people recover quickly from their accident and experience no long-term problems. However, please contact your GP if you:

- are still experiencing problems two weeks after your accident
- are concerned as to whether you are fit to drive a car or motorbike
- develop new problems after a few weeks or months

They can make sure that you are recovering properly.
3.2. Segmentation of the Source Text.

The criteria of segmentation have been operated by taking into account the different units of meaning to establish a better comparison and assess each syntax individually. This segmentation helped us to compare the interpretations of each segment to evaluate the differences in syntactic restructuring. It was divided in 32 segments.
Table 5: Segmentation of the Data.

<table>
<thead>
<tr>
<th>No</th>
<th>Segment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Information for patients.</td>
</tr>
<tr>
<td>2</td>
<td>Your doctor or nurse practitioner has examined you and is happy for you to go home. However, for the first 24 hours at home you should have a responsible adult with you, who has read this information sheet.</td>
</tr>
<tr>
<td>3</td>
<td>Most head injuries do not lead to serious complications. However, if you experience any of the following symptoms, you should go immediately to your nearest emergency department.</td>
</tr>
<tr>
<td>4</td>
<td>Severe or worsening headache (a mild headache is normal after a head injury)</td>
</tr>
<tr>
<td>5</td>
<td>Vomiting (being sick)</td>
</tr>
<tr>
<td>6</td>
<td>Confusion or feeling unusually sleepy</td>
</tr>
<tr>
<td>7</td>
<td>Fits (collapsing or passing out suddenly)</td>
</tr>
<tr>
<td>8</td>
<td>Any change to your eyesight</td>
</tr>
<tr>
<td>9</td>
<td>Dizziness or lack of co-ordination</td>
</tr>
<tr>
<td>10</td>
<td>Weakness in one or both of your arms or legs</td>
</tr>
<tr>
<td>11</td>
<td>Clear fluid or blood coming out of your ears or nose</td>
</tr>
<tr>
<td>12</td>
<td>New deafness in one or both ears</td>
</tr>
<tr>
<td>13</td>
<td>Inability to remember what has happened (amnesia).</td>
</tr>
<tr>
<td>14</td>
<td>What you should not worry about?</td>
</tr>
<tr>
<td>15</td>
<td>It is normal after a head injury to experience the following symptoms over the next few days.</td>
</tr>
<tr>
<td>16</td>
<td>Mild headache. It is safe to take a painkiller such as paracetamol. (Please see the instructions on the packet for advice about how much to take and how often.)</td>
</tr>
<tr>
<td>17</td>
<td>Feeling sick (without vomiting) or not feeling hungry. This can be helped by drinking clear fluids (such as water) and avoiding drinking alcohol.</td>
</tr>
<tr>
<td>18</td>
<td>Difficulty concentrating.</td>
</tr>
<tr>
<td>19</td>
<td>Feeling more tired, which might then make you irritable or anxious.</td>
</tr>
<tr>
<td>20</td>
<td>These symptoms should disappear over the next two weeks. However, if they don’t or you are concerned about how you are feeling, please see your GP (general practitioner).</td>
</tr>
<tr>
<td>21</td>
<td>General advice. If you follow this advice you should get better more quickly and may relieve some of your symptoms.</td>
</tr>
<tr>
<td>22</td>
<td>Try to avoid stressful situations as these can make any symptoms worse.</td>
</tr>
<tr>
<td>23</td>
<td>Do not return to your normal school, college or work activity until you feel you have completely recovered.</td>
</tr>
<tr>
<td>24</td>
<td>You should not drive a motor vehicle or operate machinery for at least 24 hours after your accident.</td>
</tr>
<tr>
<td>25</td>
<td>Do not work on a computer or play computer games until you have completely recovered, as spending time concentrating on images or text on a screen may make your symptoms worse.</td>
</tr>
<tr>
<td>26</td>
<td>Your ability to tolerate alcohol is reduced after a head injury, so you should not drink alcohol until you are completely recovered.</td>
</tr>
<tr>
<td>27</td>
<td>Do not play any contact sports for at least 3 weeks and without talking to your doctor first.</td>
</tr>
<tr>
<td>28</td>
<td>Most people recover quickly from their accident and experience no long-term problems. However, please contact your GP if you:</td>
</tr>
<tr>
<td>29</td>
<td>Are still experiencing problems two weeks after your accident</td>
</tr>
<tr>
<td>30</td>
<td>Are concerned as to whether you are fit to drive a car or motorbike</td>
</tr>
<tr>
<td>31</td>
<td>Develop new problems after a few weeks or months</td>
</tr>
<tr>
<td>32</td>
<td>They can make sure that you are recovering properly.</td>
</tr>
</tbody>
</table>
The different segments in bold in the table are some of the words and sentences that we considered potential risks of syntactic interferences. We were mainly looking at the way each respondent did the rendition by recognizing the idiomatic expressions used in French and also if their speech sounded unnatural or taken from the source language.

3.3. Presentation of the Rendition of the Source Text.

In the following tables, we presented the transcription of the rendition done by the three respondents. Since we were more interested in the content (accuracy) and also the form (way of delivery), we have illustrated some of the features appearing during the rendition ranging from hesitations, pauses [marked by an ellipsis (…)], to fillers (euh), deviations, self-correction and lousy start. This was done based on the transcription of the recorded rendition.

There are 32 segmented in total. In each segment, we presented the sentence of the source text (English) opposed to the sight translation done by the respondent in the target language (French). The following tables present the source text on the left opposed to sight translation done by each respondent on the right.

3.3.1. Rendition by the 1st Respondent.

<table>
<thead>
<tr>
<th>No</th>
<th>Segment</th>
<th>Rendition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Information for patients.</td>
<td>Information pour les malades</td>
</tr>
<tr>
<td>2</td>
<td>Your doctor or nurse practitioner has</td>
<td>Votre médecin ou infirmier vous a consulté</td>
</tr>
<tr>
<td></td>
<td>examined you and is happy for you to go</td>
<td>et il est heureux que vous soyez libéré.</td>
</tr>
<tr>
<td></td>
<td>home. However, for the first 24 hours at</td>
<td>Néanmoins pour les premières 24H à la maison,</td>
</tr>
<tr>
<td></td>
<td>home you should have a responsible adult with</td>
<td>vous devez avoir à côté de vous</td>
</tr>
<tr>
<td></td>
<td>you, who has read this information sheet.</td>
<td>une personne adulte qui aura déjà lu ces</td>
</tr>
<tr>
<td></td>
<td></td>
<td>informations.</td>
</tr>
</tbody>
</table>
Most *head injuries* do not lead to serious complications. However, if you *experience* any of the following symptoms, you should go immediately to your nearest emergency department.

**Severe or worsening headache** (a mild headache is normal after a head injury)

**Vomiting** (being sick)

**Confusion or feeling unusually sleepy**

**Fits** (collapsing or passing out suddenly)

**Any change to your eyesight**

**Dizziness** or lack of co-ordination

**Weakness in one or both of your arms or legs**

**Clear fluid** or blood coming out of your ears or nose

**New deafness** in one or both ears

**Inability to remember what has happened** (amnesia).

**What you should not worry about?**

It is normal after a head injury to experience the following symptoms over the next few days.

Mild headache. It is safe to take a *painkiller* such as paracetamol. (Please see the instructions on the packet for advice about how much to take and how often.)

Feeling sick (without vomiting) or not feeling hungry. This can be helped by drinking clear fluids (such as water) and avoiding drinking alcohol.

Difficulty concentrating.

Feeling more tired, which might then make you irritable or anxious.

These symptoms should disappear over the next two weeks. *However, if they don't or*
<table>
<thead>
<tr>
<th>Section</th>
<th>French Text</th>
<th>English Translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>you are concerned about how you are feeling, please see your GP (general practitioner).</strong></td>
<td>Suivez. Néanmoins <strong>s'ils ne disparaissent ou s'ils vous inquiètent</strong> il faut consulter directement votre médecin généraliste.</td>
</tr>
<tr>
<td>21</td>
<td><strong>General advice. If you follow this advice you should get better more quickly and may relieve some of your symptoms.</strong></td>
<td>Conseil général. Si vous respectez ces conseils, votre situation va s’améliorer beaucoup plus rapidement et certains de vos symptômes seront soulagés.</td>
</tr>
<tr>
<td>22</td>
<td><strong>Try to avoid stressful situations as these can make any symptoms worse.</strong></td>
<td>Essayez d’éviter des situations stressantes car elles peuvent empirer n’importe quels symptômes.</td>
</tr>
<tr>
<td>23</td>
<td><strong>Do not return to your normal school, college or work activity until you feel you have completely recovered.</strong></td>
<td>Attendre que vous soyez complètement guéri avant de regagner votre école, votre université ou votre activité habituelle.</td>
</tr>
<tr>
<td>24</td>
<td><strong>You should not drive a motor vehicle or operate machinery for at least 24 hours after your accident.</strong></td>
<td>Evitez de conduire une moto ou manipuler une machine pour les 24H qui suivent votre accident.</td>
</tr>
<tr>
<td>25</td>
<td><strong>Do not work on a computer or play computer games until you have completely recovered, as spending time concentrating on images or text on a screen may make your symptoms worse.</strong></td>
<td>Attendre que vous soyez complètement guéri avant de travailler avec un ordinateur ou de jouer à des jeux sur ordinateur. Parce que le fait de passer beaucoup de temps concentré sur des images ou sur un texte sur l’écran peut empirer les symptômes.</td>
</tr>
<tr>
<td>26</td>
<td><strong>Your ability to tolerate alcohol is reduced after a head injury, so you should not drink alcohol until you are completely recovered.</strong></td>
<td>Eviter de prendre l’alcool jusqu’à ce que vous soyez complètement guéri parce que votre habilité à tolérer l’alcool est réduite après l’accident au niveau de la tête.</td>
</tr>
<tr>
<td>27</td>
<td><strong>Do not play any contact sports for at least 3 weeks and without talking to your doctor first.</strong></td>
<td>Evitez de participer à des sports physiques au moins pendant trois (3) semaines. Et consulter votre médecin avant de pratiquer pareil sport.</td>
</tr>
<tr>
<td>28</td>
<td><strong>Most people recover quickly from their accident and experience no long-term problems. However, please contact your GP if you:</strong></td>
<td>Des problèmes sur le long terme. La plus grande partie des personnes récupèrent très rapidement après leur accidents et n’ont pas de problème sur le long terme. Néanmoins au cas où des problèmes suivants arrivaient il faut consulter directement votre médecin généraliste.</td>
</tr>
<tr>
<td>29</td>
<td><strong>are still experiencing problems two weeks after your accident</strong></td>
<td>Si les symptômes persistent deux semaines après l’accident.</td>
</tr>
<tr>
<td>30</td>
<td><strong>are concerned as to whether you are fit to drive a car or motorbike</strong></td>
<td>Demander si vous êtes en forme pour conduire une moto ou une voiture.</td>
</tr>
<tr>
<td>31</td>
<td><strong>develop new problems after a few weeks or months</strong></td>
<td>Au cas où d’autres problèmes se présentent quelques semaines ou quelques mois après l’accident.</td>
</tr>
<tr>
<td>32</td>
<td><strong>They can make sure that you are</strong></td>
<td>Si cela arrive cela signifie que vous n’êtes</td>
</tr>
</tbody>
</table>
recovering properly.

pas encore complètement guéri.

Table 6: 1st Rendition.

The above table presents the sight translation done by the first respondent. He was able to give the message except for one omission (segment 7) and found some of the equivalents. We have also noted few syntactic interferences (segments 2, 16, 24). The rendition was generally characterized by a slow reading speed, hesitations, some literal translations and took more than 8 minutes. During the whole interpretation, the respondent did not adopt a communicative attitude and stuck to the document without raising his head.

Regarding the logic of the reading, it was difficult to follow the enumeration presented after (segments 3, 15, 28,). Indeed, section (4 to 13), (16 to 19) and (29 to 31) are respectively enumerations resulting from the sections 3, 15 and 28. These segments were generally read by the respondent using the impersonal mode like in segments (17, 19: se sentir fatigué, avoir la nausée …)

3.3.2. Rendition by the 2nd Respondent.

<table>
<thead>
<tr>
<th>No</th>
<th>Segment</th>
<th>Rendition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Information for patients.</td>
<td>Information pour les patients</td>
</tr>
<tr>
<td>2</td>
<td>Your doctor or nurse practitioner has examined you and is happy for you to go home. However, for the first 24 hours at home you should have a responsible adult with you, who has read this information sheet.</td>
<td>Votre docteur ou infirmière vous a examiné et est heureuse de signer votre décharge. Toutefois pendant les premières 24H vous devez être assisté par un adulte qui devra lire ces prescriptions.</td>
</tr>
<tr>
<td>3</td>
<td>Most head injuries do not lead to serious complications. However, if you experience any of the following symptoms, you should go immediately to your nearest emergency department.</td>
<td>La plupart des blessures à la tête n’ont pas de complications sérieuses. Toutefois si vous expérimenter l’un des symptômes suivants vous devez immédiatement vous rendre au service d’urgence le plus proche.</td>
</tr>
<tr>
<td>Number</td>
<td>Description</td>
<td>Translation</td>
</tr>
<tr>
<td>--------</td>
<td>-------------</td>
<td>-------------</td>
</tr>
<tr>
<td>4</td>
<td><strong>severe or worsening headache</strong> <em>(a mild headache is normal after a head injury)</em></td>
<td>Donc il s’agit de grave maux de tête ou encore des maux de tête qui ont tendance à s’empirer. (de légers maux de tête sont normaux après une blessure à la tête)</td>
</tr>
<tr>
<td>5</td>
<td>vomiting <em>(being sick)</em></td>
<td>Si vous expérimenter des vomissements, ou si vous sentez souffrant.</td>
</tr>
<tr>
<td>6</td>
<td>confusion or feeling unusually sleepy</td>
<td>Si vous éprouver une quelconque confusion ou un sentiment de fatigue anormale.</td>
</tr>
<tr>
<td>7</td>
<td>fits <em>(collapsing or passing out suddenly)</em></td>
<td>Si vous perdez connaissance ou encore si vous vous effondrez.</td>
</tr>
<tr>
<td>8</td>
<td>any change to your eyesight</td>
<td>Au cas où il y a un quelconque changement...si éprouvez des troubles de la vue.</td>
</tr>
<tr>
<td>9</td>
<td>dizziness or lack of co-ordination</td>
<td>Si vous sentez que vous avez du vertige ou vous manquez de coordination.</td>
</tr>
<tr>
<td>10</td>
<td>weakness in one or both of your arms or legs</td>
<td>Si vous sentez des faiblesses dans l’un ou dans les deux bras ou jambes.</td>
</tr>
<tr>
<td>11</td>
<td>clear fluid or blood coming out of your ears or nose</td>
<td>Si vous saignez du nez ou des yeux</td>
</tr>
<tr>
<td>12</td>
<td>new deafness in one or both ears</td>
<td>ou encore si vous éprouvez une surdité dans l’une ou dans les deux oreilles</td>
</tr>
<tr>
<td>13</td>
<td>inability to remember what has happened <em>(amnesia)</em>.</td>
<td>Et pour finir si vous êtes incapables de vous rappeler ce qui ce passe, c’est à dire si vous avez eu des cas d’amnésie.</td>
</tr>
<tr>
<td>14</td>
<td>What you should not worry about?</td>
<td>Donc, quels sont les éléments qui ne doivent pas vous inquiétez ?</td>
</tr>
<tr>
<td>15</td>
<td>It is normal after a head injury to <strong>experience</strong> the following symptoms over the next few days.</td>
<td>Après une blessure à la tête il est normal d’expérimenter les symptômes suivants durant les quelques jours qui succèdent l’accident.</td>
</tr>
<tr>
<td>16</td>
<td>Mild headache. It is safe to take a <strong>painkiller</strong> such as paracetamol. <em>(Please see the instructions on the packet for advice about how much to take and how often.)</em></td>
<td>Donc vous pouvez expérimenter de légers maux de tête. Il est donc recommandé dans ce cas de prendre des antidouleurs tels que le paracétamol mais vous êtes prières de vous référer à la notice donc aux inscriptions inscrites sur l’emballage pour connaître la posologie donc le dosage.</td>
</tr>
<tr>
<td>17</td>
<td><strong>Feeling sick</strong> <em>(without vomiting)</em> or not feeling hungry. This can be helped by drinking clear fluids <em>(such as water)</em> and avoiding drinking alcohol.</td>
<td>Si vous vous sentez un tout petit peu souffrant mais qu’il n’y a aucun cas de...que vous ne vomissiez pas ou encore que vous avez une perte d’appétit. Veuillez donc boire des fluides clairs tels que l’eau, et ...cela pourra vous aider et vous devez éviter de boire de l’alcool. &quot;surtout pas d’alcool&quot;</td>
</tr>
<tr>
<td>18</td>
<td><strong>Difficulty concentrating.</strong></td>
<td>Si vous avez un trouble de la concentration, donc c’est normal.</td>
</tr>
<tr>
<td>19</td>
<td>Feeling more tired, which might then make you irritable or anxious.</td>
<td>Si vous sentez une fatigue inhabituelle...qui peut avoir un effet sur votre humeur donc peut vous rendre très irritable ou anxieux, donc c’est tout à fait normal.</td>
</tr>
<tr>
<td>20</td>
<td>These symptoms should disappear over the next two weeks. <strong>However, if they don’t or you are concerned about how you are feeling, please see your GP (general practitioner).</strong></td>
<td>Ces symptômes devraient disparaître dans les deux semaines qui succèdent...qui précèdent, pardon qui précèdent l’opération. Toutefois si ils persistent et si vous êtes préoccupé vous pouvez toujours vous rapprochez de votre médecin.</td>
</tr>
<tr>
<td>21</td>
<td>General advice. <strong>If you follow this advice you should get better more quickly and may relieve some of your symptoms.</strong></td>
<td>Conseil général. Si vous suivez les différents conseils vous devrez vous rétablir rapidement et vos symptômes vont disparaître.</td>
</tr>
<tr>
<td>22</td>
<td>Try to avoid stressful situations as these can make any symptoms worse.</td>
<td>Donc essayez d'éviter les situations stressantes étant donné que ces derniers ont tendance à faire empirer les symptômes.</td>
</tr>
<tr>
<td>23</td>
<td>Do not return to your normal school, college or work activity until you feel you have completely recovered.</td>
<td>Ne retourner à l'école, au lycée ou encore à vos différentes activités de travail que si vous êtes complètement rétabli.</td>
</tr>
<tr>
<td>24</td>
<td>You should not drive a motor vehicle or operate machinery for at least 24 hours after your accident.</td>
<td>Vous ne devez pas conduire de véhicules motorisés ou utiliser des appareils. Euh... différents appareils pendant au moins 24H après l’accident.</td>
</tr>
<tr>
<td>25</td>
<td>Do not work on a computer or play computer games until you have completely recovered, as spending time concentrating on images or text on a screen may make your symptoms worse.</td>
<td>N’utilisez pas d’ordinateur et ne jouer à aucun jeux vidéo parce que le fait de se concentrer sur les images ou encore le de lire un texte sur un écran peut faire aggraver les symptômes.</td>
</tr>
<tr>
<td>26</td>
<td>Your ability to tolerate alcohol is reduced after a head injury, so you should not drink alcohol until you are completely recovered.</td>
<td>Votre capacité à supporter les boissons alcoolisées est réduite après une blessure à la tête. Donc vous ne devez boire aucune boisson alcoolisée jusqu’à ce que vous soyez complètement rétabli.</td>
</tr>
<tr>
<td>27</td>
<td>Do not play any contact sports for at least 3 weeks and without talking to your doctor first.</td>
<td>Ne jouer...Ne pratiquer aucun sport de contact pendant au moins 3 semaines et surtout sans l’avis de votre docteur.</td>
</tr>
<tr>
<td>28</td>
<td>Most people recover quickly from their accident and experience no long-term problems. <strong>However, please contact your GP if you:</strong></td>
<td>Problèmes à long terme. La plupart des personnes se rétablisse rapidement après un accident et n’expérimente aucun problème à long terme. Toutefois... vous êtes priés de contacter votre médecin, Toutefois vous êtes</td>
</tr>
</tbody>
</table>
Table 7: 2nd Rendition.

<table>
<thead>
<tr>
<th></th>
<th>English</th>
<th>French</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td><em>are still experiencing problems two weeks after your accident</em></td>
<td>continuez à avoir des problèmes deux semaines après l'accident.</td>
</tr>
<tr>
<td>30</td>
<td><em>are concerned as to whether you are fit to drive a car or motorbike</em></td>
<td>si vous êtes préoccupé et si vous voulez savoir si oui ou non vous pouvez conduire un véhicule ou une moto.</td>
</tr>
<tr>
<td>31</td>
<td><em>develop new problems after a few weeks or months</em></td>
<td>Si vous développer de nouveaux symptômes après quelques semaines ou quelques mois après l'accident.</td>
</tr>
<tr>
<td>32</td>
<td><em>They can make sure that you are recovering properly.</em></td>
<td>Donc ils pourront s’assurer que vous vous rétablissez de façon convenable.</td>
</tr>
</tbody>
</table>

The above table is the rendition of the second respondent. This rendition was accurate in terms of equivalences and sounded natural because the respondent was able to find easily the appropriate expressions. She used more connectors in terms of transitions to move from one idea into another even if those connectors were not in the text. It contributed to make the message more flowing, understandable and communicative. In addition she utilized some additional words which were not in the text to make the message more understandable However she had one misinterpretation at the (segment 20) saying that “*Ces symptomes devraient disparaître dans les deux semaines qui précèdent l’opération*” which means that the symptoms should disappear over the previous two weeks instead of the next two weeks. Although she was reading at a regular speed, we noticed that the rendition was also marked by some hesitation and an excessive use of the connector “*donc*” which means “*So*” in English as a kind of filler used to anticipate the reading of the next words or sentence. Finally, we could notice some syntactic interferences in some the sentence. We have given more detail about in the next chapter dedicated to data analysis. The respondent took 5 minutes to complete the sight translation of the document and had a good communicative attitude sounding more as an explanation than a simple
reading of a text. In terms of logic it was easy to follow the enumerations of the symptoms following respectively the segments (3, 15, and 28)

### 3.3.3. Rendition by the 3rd Respondent.

<table>
<thead>
<tr>
<th>No</th>
<th>Segment</th>
<th>Rendition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Information for patients.</td>
<td>Informations à l’égard des patients</td>
</tr>
<tr>
<td>2</td>
<td>Your doctor or nurse practitioner has examined you and is happy for you to go home. However, for the first 24 hours at home you should have a responsible adult with you, who has read this information sheet.</td>
<td>Votre docteur ou votre infirmière vous a examiné et très content que retournez à la maison sain et sauf. Cependant dans les 24H qui suivent votre temps que vous passerez à la maison vous devrez être avec une personne responsable qui va vous suivre et cette personne est censée lire ce document pour comprendre les informations qui s’y trouvent.</td>
</tr>
<tr>
<td>3</td>
<td>Most head injuries do not lead to serious complications. However, if you experience any of the following symptoms, you should go immediately to your nearest emergency department.</td>
<td>La Plupart des blessures ne conduise pas à des complications sérieuses. Cependant lorsque vous expérimenterez ces symptômes qui sont définies ci-dessous vous devrez immédiatement vous rendre à l’urgence...à l’hôpital</td>
</tr>
<tr>
<td>4</td>
<td>Severe or worsening headache (a mild headache is normal after a head injury)</td>
<td>Ces cas sont les suivants: des maux de tête sévères et chroniques (un mal de tête léger est normal lorsque vous avez un accident au niveau de votre tête)</td>
</tr>
<tr>
<td>5</td>
<td>Vomiting (being sick)</td>
<td>Le vomissement, qui est signe de maladie (lorsque vous êtes malade).</td>
</tr>
<tr>
<td>6</td>
<td>Confusion or feeling unusually sleepy</td>
<td>Des confusions ou bien vous vous sentez inhabituellement (euh) dormant</td>
</tr>
<tr>
<td>7</td>
<td>Fits (collapsing or passing out suddenly)</td>
<td>Et... des crises (comme le fait de tomber en syncope ou... (euh) vous...faites des mouvements brusques).</td>
</tr>
<tr>
<td>8</td>
<td>Any change to your eyesight</td>
<td>Quelques changements au niveau de votre vision.</td>
</tr>
<tr>
<td>9</td>
<td>Dizziness or lack of co-ordination</td>
<td>La… (euh) le manque de coordination et des vertiges</td>
</tr>
<tr>
<td>10</td>
<td>weakness in one or both of your arms or legs</td>
<td>La faiblesse au niveau de votre jambe ou de vos bras.</td>
</tr>
<tr>
<td>----</td>
<td>---------------------------------------------</td>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td>11</td>
<td>clear fluid or blood coming out of your ears or nose</td>
<td>Des sangs, fluides qui coulent, qui sortent soit par vos nez ou vos oreilles.</td>
</tr>
<tr>
<td>12</td>
<td>new deafness in one or both ears</td>
<td>Une sensation de surdité dans l’une ou bien les deux oreilles</td>
</tr>
<tr>
<td>13</td>
<td>inability to remember what has happened (amnesia).</td>
<td>L’incapacité de vous rappeler de ce qui s’était passé (comme l’amnésie)</td>
</tr>
<tr>
<td>14</td>
<td>What you should not worry about?</td>
<td>Dans ce cas, qu’est-ce que vous...devez vous... quelles sont les inquiétudes que vous devez avoir ?</td>
</tr>
<tr>
<td>15</td>
<td>It is normal after a head injury to experience the following symptoms over the next few days.</td>
<td>C’est normal qu’avec une blessure à la tête vous expérimentiez ces, les symptômes qui vont suivre dans les quelques jours qui vont suivre votre maladie.</td>
</tr>
<tr>
<td>16</td>
<td>Mild headache. It is safe to take a painkiller such as paracetamol. (Please see the instructions on the packet for advice about how much to take and how often.)</td>
<td>Comme les mots de tête… maux de tête bénins. Il est bien conseillé que vous preniez les calmants comme le paracétamol. Mais vous devez lire les instructions qui sont sur la boîte pour conseil. et vous devez les prendre en tenant compte de la posologie.</td>
</tr>
<tr>
<td>17</td>
<td>Feeling sick (without vomiting) or not feeling hungry. This can be helped by drinking clear fluids (such as water) and avoiding drinking alcohol.</td>
<td>Lorsque vous vous sentez fatigué et...mais sans vomissement. ou vous sentez régulièrement la faim. ceci peut être résolu en buvant simplement des fluides, liquides comme de l’eau. Et vous devez surtout éviter la consommation de l'alcool</td>
</tr>
<tr>
<td>18</td>
<td>Difficulty concentrating.</td>
<td>Des difficultés de concentration.</td>
</tr>
<tr>
<td>19</td>
<td>Feeling more tired, which might then make you irritable or anxious.</td>
<td>Vous vous sentez de plus en plus fatigué, qui pourra vous irritez et vous rendre anxieux.</td>
</tr>
<tr>
<td>20</td>
<td>These symptoms should disappear over the next two weeks. However, if they don’t or you are concerned about how you are feeling, please see your GP (general practitioner).</td>
<td>Ces symptômes doivent disparaître dans au plus deux semaines, dans les deux prochaines semaines. Cependant si ces symptômes demeurent, et que vous êtes frustré ou bien vous poser des questions par rapport à votre...ce que vous ressentez dans votre corps, s’il vous plaît veuillez-vous rendre chez un</td>
</tr>
<tr>
<td></td>
<td>General advice. If you follow this advice, you should get better more quickly and may relieve some of your symptoms.</td>
<td>Quels sont les conseils d’ordre général que le médecin vous donne ? Lorsque vous suivez ces conseils vous devriez aller mieux ou bien plus rapidement. Et avoir une sensation de recouvrement de ces symptômes.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>21</td>
<td>Try to avoid stressful situations as these can make any symptoms worse.</td>
<td>Vous devez éviter les situations ou qui vous implique...qui vous engage... qui vous stresse plutôt. Et cela peut provoquer des symptômes plus graves.</td>
</tr>
<tr>
<td>22</td>
<td>Do not return to your normal school, college or work activity until you feel you have completely recovered.</td>
<td>Ne retournez pas à l’école, ou bien dans vos lycées, dans vos cadres académiques jusqu’à ce que vous ne soyez complètement guéri.</td>
</tr>
<tr>
<td>23</td>
<td>You should not drive a motor vehicle or operate machinery for at least 24 hours after your accident.</td>
<td>Vous ne devez pas conduire les motos, les véhicules ou bien travailler sur une machine pendant 24H ou bien 24 après votre accident.</td>
</tr>
<tr>
<td>24</td>
<td>Do not work on a computer or play computer games until you have completely recovered, as spending time concentrating on images or text on a screen may make your symptoms worse.</td>
<td>Ne travaillez sur ordinateur ou bien faire des jeux sur ordinateur jusqu’à ce que vous soyez complètement guéri. Et vous ne devez pas passer du temps à vous concentrer sur des images, des textes ou bien des écrans qui peuvent...aggraver les symptômes.</td>
</tr>
<tr>
<td>25</td>
<td>Your ability to tolerate alcohol is reduced after a head injury, so you should not drink alcohol until you are completely recovered.</td>
<td>Votre capacité à tolérer l’alcool doit réduire après un accident cérébral, lors de l’accident au niveau de la tête. Donc ce qui est conseillé, vous ne devez pas boire de l’alcool jusqu’à ce que vous ne soyez complètement guéri.</td>
</tr>
<tr>
<td>26</td>
<td>Do not play any contact sports for at least 3 weeks and without talking to your doctor first.</td>
<td>Ne jouez pas, quel que soit le type de sport, pendant les 3 semaines sans prendre l’avis du docteur au préalable.</td>
</tr>
<tr>
<td>27</td>
<td>Most people recover quickly from their accident and experience no long-term problems. However, please contact your GP if you:</td>
<td>Donc les problèmes qui peuvent se poser à long terme. Nous avons pour la plupart du temps... (euh) plusieurs personnes recouvrent leur santé</td>
</tr>
</tbody>
</table>
rapidement lorsqu’ils ont un accident ou ont un problème un peu à long terme. Cependant veuillez contacter votre médecin généraliste si vous avez ces symptômes que vous constatez.

<table>
<thead>
<tr>
<th>29</th>
<th>are still experiencing problems two weeks after your accident</th>
<th>Vous avez toujours ces sensations de problèmes deux semaines après l’accident</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>are concerned as to whether you are fit to drive a car or motorbike</td>
<td>ou bien vous avez vous demandez si vous êtes encore solide, vous vous sentez fort pour conduire votre voiture ou bien pour conduire votre moto.</td>
</tr>
<tr>
<td>31</td>
<td>develop new problems after a few weeks or months</td>
<td>Ou bien vous développer de nouveaux problèmes après quelques semaines ou quelques mois</td>
</tr>
<tr>
<td>32</td>
<td>They can make sure that you are recovering properly.</td>
<td>Ils peuvent se rendre compte, ou bien ils peuvent, les docteurs doivent s’assurer que vous allez mieux.</td>
</tr>
</tbody>
</table>

Table 8: 3rd Rendition

The 3rd respondent did the above rendition. Regarding syntactic restructuring, we noticed some effort to detach from the source text to give the appropriate meaning by using the target language structure in some of the sentences. There is also the fact that he was trying to explain more and tended to add more information which was not in the source text. The overall message was rendered. However, the rendition has also been marked by literal or word-for-word translation making some sentences sound unnatural and confusing since some key terms and expressions were not translated using the right equivalent or the appropriate idiomatic expression. For instance in the (segment 6) “…vous sentez inhabituellement (euh) dormant”. The syntactic calque used did not meet the accuracy and faithfulness of the source text. Hesitations and unnecessary repetition have contributed as well to create confusion around the message. Besides, we noted a lot of hanging sentences finally ended by using a completely different formulation. This is
probably because he started doing the sight translation of the sentence without looking ahead to anticipate the following words. In the segment (25) the respondent realized a change in the syntax in French that does not respect the logic of the sentence. The message was negatively affected by two misinterpretations as presented respectively in the segments (17 and 26). The respondent resorted to modulation of syntax as well as expansion strategies to avoid syntactic interference.
CHAPTER FOUR

FINDINGS AND DISCUSSIONS

4.0 Introduction

This section of the study presents findings resulting from analysis carried out on the basis of data collected from the participants. There are five findings showing the impact of syntactic failures on the quality of interpretation and also translation strategies implemented by the participants to avoid syntactic interference.

The study was carried out to investigate the effect of syntactic interferences on the quality of interpretation. The analysis of the data was done by looking at the syntactic failures that affected negatively the rendition by undermining the clear understanding of the message delivered. The transcription of the audios helped us to compare the source text with the target language rendered by the participants. On one hand, we looked at the content of the message by focusing on the lexical and syntactic failures to assess the quality of interpretation using the theory of sense. On the other hand also, we analyzed the respondent performance and quality of sight translation by looking at the translation and sight translation strategies used.

The theory of sense as we explained earlier is based on the fact that the quality of any work of translation or interpretation depends on the simultaneous application of the following three main steps: comprehension, deverbalization, and finally reformulation. The analysis of those three steps has helped us to assess the participant’s rendition by looking at their understanding of the medical terms and idiomatic expressions contained in the source text and the deverbalization and re-expression in the target language.
We also used two other essential concepts in the theory of sense which correspondence and equivalence. The concept of correspondence has been used to analyze the translation done using corresponding words in the target language. We looked at how respondents used direct correspondent medical terminology or expression in the target language, referring to infections, conditions, names of medicine, medical abbreviation. The Equivalences concept was meant to determine if the participants took into account the contextual meanings of every word to convey accurately and faithfully the overall meaning intended by the speaker. Moreover, the overall quality of the rendition has been assessed on the basis of features such as logic, faithfulness, accuracy, addition, and omissions.

- The *logic* of the rendition was evaluated by relying on the number of statements that did not make sense in accordance with the flow of the text;
- The *accuracy* was determined by comparing the correct meaning of words and expressions in the target language with the source language;
- The aspect of *addition* was identified by looking at words and expressions that were not in the source text
- As for *omission* we looked at the words and expression avoided or not translated by the participants.

The quality of the interpretation is finally established by analyzing the impact of the French syntactic expression on logic, accuracy, and faithfulness essentially. Addition or omission was not crucial in determining the quality as long as they do not create a
deviation from the meaning of the sentence since there are strategically used as coping strategies for lack of finding equivalence in the target language.

4.1. Literal Translation as Negative Transfer.

We have seen in the definition of syntactic interference that it is mainly characterized by literal or word for word translation. It occurs when a target language expression is directly influenced by the syntactic structure of a source language. Sometimes it appears as a Calque. Calque is known as loaned translation characterized by word for word or root-for-root translation. This direct transfer represents a problem because the manner in which syntax is formulated in English is not necessarily the same in French. So, there is need to make a syntactic restructuring taking into account the right order of the grammatical categories during interpretation into French because the simple association of word equivalents do not always reproduce a perfect interpretation of the intended meaning in English.

We have noted in many instances that the quality of interpretation was affected when the respondents failed to realize a change in the grammatical categories during their interpretation from English into French. These cases were characterized by a lack of transposition of word class such of nouns, adverbs, verbs and adjectives in the right order according to the rules of grammar of French. They applied a direct reproduction of the grammatical categories of English into the expression of French without restructuring of the entire syntax or part of it. They resorted to word-for-word interpretation where it was possible to realize a transposition in the grammatical categories. Therefore, a literal
translation appeared as a negative transfer when the interpreters reproduced the syntactic order of the source language into the interpretation of target language. In such context, interpreters failed to interpret the message following the syntactic order, equivalence and correspondence generally used and commonly accepted in French. In those instances, the message sounded unnatural and sometimes confusing for the listener. The following examples demonstrate how the quality of interpretation is affected when there are inadequate reproductions of word order during meaning transfer from English into French.

**Example 1.**

<table>
<thead>
<tr>
<th>Segment N° 6</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>confusion or feeling unusually sleepy</td>
<td>R1</td>
<td>La confusion ou une somnolence inhabituelle.</td>
</tr>
<tr>
<td></td>
<td>R3</td>
<td>Des confusions ou bien vous vous sentez inhabituellement (euh) dormant</td>
</tr>
</tbody>
</table>

The table above shows a clear case of syntactic interference which affected the quality of the rendition. It was characterized by a word-for-word translation as we can see with the translation of the sentence “feeling unusually sleepy” following the word order of the syntax verb as illustrated below

- **Verb** [feeling-sentez], **adverb** [unusually-inhabituellement], **adjective** [sleepy-dormant].

Although the logic of the sentence was maintained and there were no omissions or distortions of the meaning, we can see the influence of the source language in the target language rendition. Therefore the sentence sounds unnatural. The syntactic expression of the 1st respondent is more accurate and faithful to the source text. Moreover, there is an
error in terms of correspondence. The translation of the adjective *sleepy* is not accurate. He used the adjective “dormant” which is not the corresponding equivalent in French in this context. The corresponding adjective for sleepy is “*somnolence*”.

**Example 2.**

<table>
<thead>
<tr>
<th>Segment N° 2</th>
<th>R1</th>
<th>R2</th>
</tr>
</thead>
<tbody>
<tr>
<td>**Your doctor or nurse practitioner has examined you and is happy for you to go home. **However, for the first 24 hours at home you should have a responsible adult with you, who has read this information sheet.</td>
<td><em>Votre médecin ou infirmier vous a consulté et il est heureux que vous soyez libéré. Néanmoins, pour les premières 24H à la maison, vous devez avoir à côté de vous une personne adulte qui aura déjà lu ces informations.</em></td>
<td><em>Votre docteur ou infirmière vous a examiné et est heureuse de signer votre décharge. Toutefois, pendant les premières 24H vous devez être assisté par un adulte qui devra lire ces prescriptions.</em></td>
</tr>
</tbody>
</table>

The syntactic failure occurred in the rendition of the 1st respondent. We noticed a syntactic similarity in the order of grammatical categories in the Rendition of R1. The syntactic similarity is related to a word for word transfer of the section in bold in the source and the target language “*pour les premières 24H à la maison*”. What makes the sentence sound awkward is the direct translation of the word “for”. Syntactic interference appeared since the respondent failed to take into consideration the polysemy and to find the corresponding word for “*for*” in this context in the target language. It should have been translated by “*pendant ou durand*”. So an accurate and faithful interpretation based on equivalence would be “*pendant* les premières 24H” or “*durand les premières 24H*". 
Therefore, the interpretation was not accurate and faithful to the source-language and affected the quality of the rendition.

On the other hand, the analysis of the section showed us that similarities in grammatical categories result in literal translation which is sometimes the unique way of translating accurately the sentence according to the context. When we look for example at these similarities below, we notice that they match in both languages.

Substantive “[for-pour], Specifier [the-les] Adjective [first-premières], [24-24]
noun [hours-24 heures] preposition [at-à la] noun [home-maison]

Except the difference of categories for the substantive “for” which is replaced by the preposition “pour”, we can see that the rest of categories are similar in English and French. The interpreter had no choice but to interpret the section by [les premières 24H à la maison].

We can conclude that the wrong choice of even one semantic correspondence can affect the quality of quality of interpretation.
Example 3.

<table>
<thead>
<tr>
<th>Segment N° 15</th>
<th>R1</th>
<th>R2</th>
<th>R3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>It is normal</strong> after a head injury <strong>to experience the following symptoms over the next few days.</strong></td>
<td><em>Au cours des quelques jours qui suivent (...)</em> une blessure au niveau de la tête, il est normal d’avoir les symptômes ci-après.</td>
<td><em>Après une blessure à la tête il est normal d’expérimenter les symptômes suivants durant les quelques jours qui succèdent l’accident.</em></td>
<td><em>c’est normal que avec une blessure à la tête vous expérimentiez ces, les symptômes qui vont suivre dans les quelques jours qui vont suivre votre maladie.</em></td>
</tr>
</tbody>
</table>

The comparison of the renditions done by the participants in segment 15 shows a clear difference in term of deverbalization and reformulation of the message. The R1&2 used different syntactic structure in the target language which remained faithful to the source text.

However, the syntactic failure in this segment comes from the rendition of the R3. It was taken from the source text. He had a problem of deverbalization and reformulation of the message. As a result the expression sounded unnatural.

Example 4:

<table>
<thead>
<tr>
<th>Segment N° 16</th>
<th>R1</th>
<th><strong>R2</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild headache. <strong>It is safe to take a painkiller such as paracetamol.</strong> (Please see the instructions on the packet for advice about how much to take and how often.)</td>
<td><strong>Une céphalée légère. Il est toutefois prudent de prendre un analgésique comme paracétamol.</strong> (Il faut respecter les instructions sur l’emballage pour connaître la dose).</td>
<td></td>
</tr>
</tbody>
</table>
The aspect of the analysis of this example is based on the absence of an important grammatical category. He has done a direct transfer from English into French with the phrase “as paracetamol” interpreted as “comme paracetamol”. The respondent failed to add the preposition [le/the] which contributed to create and interference and made the rendition sound unnatural. For indeed, the adverb “such as” can be translated by “tel que/telle que or comme”. So the sentence could have also been correct with [tel que le paracetamol]

The quality of the rendition was therefore affected in terms of lack of accuracy in the interpretation of that section.

4.2. Literal Translation as a Default Strategy.

During sight translation there are cases where literal translation appeared as the only possible strategy of interpretation because of similarities between English and French. It was used as a default strategy to pass the message across, either because it was the most straightforward way or because there was no other option other than using a word-for-word translation due to similarities between English and French. In such instances, grammatical categories were arranged (ranked) syntactically in the same order. In other words, the syntactic order in the target language was the same as the one of the source language. Therefore, literal translation appeared as a positive syntactic transfer and did not negatively affect the quality of interpretation. The respondents resorted to literal translation in many instances to maintain the quality of their renditions. The examples presented in the tables below are some of the literal translations done by the participants.
Example 1.

<table>
<thead>
<tr>
<th>Segment N° 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information <strong>for</strong> patients.</td>
</tr>
<tr>
<td>R2</td>
</tr>
<tr>
<td>R3</td>
</tr>
</tbody>
</table>

This above segment meant to compare two direct translations with one that is a more restructured. We analyzed the translation of the word “for” in the context, considering that it is a polysemous word in French. R1&2 operated a translation of the word “for” by using the first obvious equivalence “*pour*”. The R3 used a more appropriate level of language to translate the word “à l’égard des patients”.

Despite the difference in the grammatical categories, all the 3 renditions of the segment (1) were logical, accurate and retained the faithfulness of the overall message. There was no omission or addition.

Example 2

<table>
<thead>
<tr>
<th>Segment N° 9</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>dizziness</strong> or lack of coordination</td>
</tr>
<tr>
<td>R2</td>
</tr>
<tr>
<td>R3</td>
</tr>
</tbody>
</table>

The quality of interpretation was not affected by the word-for-word translation operated by the respondent. In this case a syntactic calque cannot be avoided since the both languages present some similarities in term of word order. The grammatical categories
can therefore be replicated following the same order of the source language. They have been accurately translated according to their correspondence in French.

- *[Dizziness or lack of co-ordination]*
- *[Vertige ou manque de coordination]*

4.3. Use of Other Translation Strategies as Coping Strategies

This section of our work deals with the translation strategies adopted by the respondents to overcome syntactic interference from English to French during their performance of sight translation. We particularly looked at the specific strategies applied to maintain the quality of interpretation. The analysis is based on the examples drawn from the interpretations by the respondents. Literal translation was used in many instances. When a literal translation was not the most suitable and appropriate approach to reproduce an acceptable transfer of meaning from the source language into the target language, they resorted to other translation strategies such as expansion of meaning, equivalence and modulation of syntax and transposition. So the application of those strategies helped them to produce more natural expressions free from any syntactic interference.

4.3.1. Use of Expansion of Meaning Strategy.

This process was used in many instances by the respondents. In some sections they added more words which were not explicitly present in the source-language. It was used as a coping strategy to deal with the difficulty of finding the corresponding word or expression in the target language. We provided below some of the cases encountered in the data collected.
Example 1.

<table>
<thead>
<tr>
<th>Segment N° 12</th>
<th>R1</th>
<th>R2</th>
<th>R3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>new deafness in one or both ears</strong></td>
<td><em>Nouvelle absence d’acuité auditive</em> dans l’une ou les deux oreilles</td>
<td>ou encore si vous éprouvez une surdité dans l’une ou dans les deux oreilles</td>
<td>Une sensation de surdité dans l’une ou bien les deux oreilles</td>
</tr>
</tbody>
</table>

In the above segment, Respondent one used this process during the rendition to translate the word deafness by “*absence d’acuité auditive*” which carries the idea of hearing impairment or deficiency. This was perhaps because he did not know or could not find the corresponding word in French for *deafness* which is “*surdité*”. It is good that he communicated the idea and did not get stuck by a word.

As we can see, R1&2 were able to find the word “*surdité*”.

**Example 2.**

<table>
<thead>
<tr>
<th>Segment 29</th>
<th>R1</th>
<th>R2</th>
<th>R3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>are still experiencing problems two weeks after your accident</strong></td>
<td><em>Si les symptômes</em> persistent deux semaines après l’accident.</td>
<td><em>Si vous continuez à avoir</em> des problèmes deux semaines après l’accident.</td>
<td><em>Si Vous avez toujours ces</em> sensations de problèmes deux semaines après l’accident</td>
</tr>
</tbody>
</table>

67
Except the phrase “two weeks after your accident” which all of them have correctly translated by “deux semaines après l’accident”, we notice a lot of variation of words to express the same idea carried by “still experiencing problems”. In fact, when we compare the source text with the renditions we can see some addition of more grammatical categories such as:

- **R1**: Conjunction [Si-if] preposition [les-the] + Noun [symptomes-symptoms]
- **R3**: Conjunction [Si-if] pronoun [vous-you] + Verb [avez-to have]+ Adverb [toujours-always] + demonstrative adjective[ces-these]

As we can see in their renditions, they all translated the sentence with different syntax which contained more words than in the source text. Despite the additions, they remained faithful to the source text. Therefore the quality of the section was not affected by the word for word translation.

**Example 3.**

<table>
<thead>
<tr>
<th>Segment N° 2</th>
<th>R3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your doctor or nurse practitioner has examined you and is happy for you to go home. <strong>However</strong>, for the first 24 hours at home you should have a responsible adult with you, who has read this information sheet.</td>
<td>Votre docteur ou votre infirmière vous a examiné et très content que retourniez à la maison sain et sauf. Cependant, dans les 24H qui suivent votre temps que vous passerez à la maison vous devrez être avec une personne responsable qui va vous suivre et cette personne est censée lire ce document pour comprendre les informations qui s’y trouvent.</td>
</tr>
</tbody>
</table>
Through the rendition of Respondent 3, we can present another case of expansion. He proceeded by adding new words that were not explicitly present in the source text.

If we have to translate the above addition highlighted in bold we will have

- \[\text{sain et sauf / safe and sound}\]
- \[\text{votre temps que vous passerez à la maison / the time you will spend at home}\]
- \[\text{personne / someone}\]
- \[\text{qui va vous suivre et cette personne est censé / who will follow you up and this person is supposed to}\]
- \[\text{Pour comprendre les informations qui s’y trouvent / to understand the contained information}\].

We can clearly see that he added a lot of words to explain more but maintaining at the same time the same idea contained in the source text.

4.3.2. Use of Equivalences and Modulation of Syntax.

We noticed that the participants used equivalence strategies to describe the reality presented in the source language by using a completely different expression or formulation in the target language. They adopted the corresponding idiomatic expression in the target language instead of using the source language structure in order to keep the essence of the message. They also operated some modulation of syntax by changing word order in the target language structure compared to the original source with the objective of delivering the message more fluently and make it sound as natural as possible in the target language.
Below are some of the equivalences used by the respondent.

**Example 1.**

<table>
<thead>
<tr>
<th>Segment N° 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is normal after a head injury to experience the following symptoms over the next few days.</td>
</tr>
<tr>
<td>R2</td>
</tr>
</tbody>
</table>

The interpretation presented above shows that respondent 1&2 modulated the syntax differently but gave the same meaning in the target language. It also shows that they had a good understanding of the source text since they were able to find the appropriate idiomatic expressions.

R1: Starting with the respondent 1, we can see a difference in word order since he started the sentence by adverb “au cours de...” “during” whereas the source text begins with a pronoun. He reversed the positions of the clause in the sentence.

R2: used with a preposition “après”, “after” instead of the pronoun and also reversed the word order during the rendition in the target-language. It demonstrates a good command of the language from both respondents.

The comparison of the renditions done by the participants in segment 15 show a clear difference in terms of deverbalization and reformulation of the message.
Example 2

Segment N° 26

<table>
<thead>
<tr>
<th>English</th>
<th>French</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your ability to tolerate alcohol is reduced after a head injury, so you should not drink alcohol until you are completely recovered.</td>
<td>Eviter de prendre l’alcool jusqu’à ce que vous soyez complétement guéri parce que votre habilité à tolérer l’alcool est réduite après l’accident au niveau de la tête.</td>
</tr>
</tbody>
</table>

Same as the previous example we have a modulation of syntax and equivalence which maintained the same meaning of the source text. He started the sentence with the second clause expressed in the source text [Eviter de prendre l’alcool / Avoid drinking alcohol]. And the first clause of the source text became the second clause in the target language. Despite this change the meaning remains the same and the message sounds equally natural.

4.3.3. Transposition Strategy.

Transposition as explained by Vinay and Darbelnet (1958) is a process which consists of making a change in word class without affecting the original meaning of the sentence. In our analysis, we have seen cases in which participants have used transposition to achieve a better restructured interpretation. We noticed two different cases of change in the grammatical categories that are presented in the following examples. This example one presents a change from [Adverb + adjective] in English into [adjective + noun] in the target language.
Example 1

<table>
<thead>
<tr>
<th>Segment N° 6</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>confusion or feeling unusually sleepy</td>
<td>R1</td>
</tr>
</tbody>
</table>

In the example above, the section “unusually sleepy” is arranged in the source language as follows: [unsually-Adverb] and [Sleepy-adjective]. During the interpretation the respondent replaced the adverb “unsually” with the adjective “inhabituelle” and the Adjective “Sleepy” became a noun “somnolence” [somnolence inhabituelle]. The initial grammatical category in English was [Adverb + adjective] and finally became [adjective + noun] in the target language. It shows the effort to interpret the source text by using a more reformulated structure.

In the second case the respondent used a different structure, the shift was a change from [Adverb + adjective] into [noun + Adverb]

**Example 2.**

<table>
<thead>
<tr>
<th>Segment N° 6</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>confusion or feeling unusually sleepy</td>
<td>R2</td>
</tr>
</tbody>
</table>

In the second case above, the change in the grammatical categories was operated by the replacement of the [Adverb (unsually) + adjective (sleepy)] with the structure [noun (fatigue) + adjective (anormale)].
The two examples of transposition applied by the respondents in this context shows clearly that the transposition strategy resulted in a better interpretation and understanding of the message. The literal translation sounded unnatural since it followed the word order of the source language.


The analysis of this section was done by following the notions of correspondence and equivalence. It was noted that the participants have been constantly confronted with the problem semantic false friends. In these cases, the quality of interpretation was affected because of the use of semantic false friends during interpretation of some of the medical expressions. The respondent failed to consider the polysemous character of the terms thereby resulting in the production of unnatural expressions that sounded awkward in the target language. The table below presents the different semantic false friends which constituted a challenge and how some of them were able to cope.

<table>
<thead>
<tr>
<th>Source text</th>
<th>Renditions</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluids</td>
<td>R1: -</td>
<td>The term “fluid” was appearing respectively in the segment 11 and 17. The first respondent omitted the translation. They generally interpreted “fluid” by <em>fluide</em> in French. Whereas the word “<em>Fluide</em>” has a polysemous character in French. In the medical field <em>fluide</em> refers mainly to “<em>liquide/liquid</em>”. It can also be used in communication context by talking about “<em>un discours fluide / a flowing speech</em>”.</td>
</tr>
<tr>
<td></td>
<td>R2: <em>Fluides</em></td>
<td></td>
</tr>
<tr>
<td></td>
<td>R3: <em>Fluides</em></td>
<td></td>
</tr>
<tr>
<td><strong>Dosage</strong></td>
<td><strong>R1:</strong> Dose</td>
<td>The term “dosage” refers to the spacing, time or duration of administration of the medicine. Its corresponding word for French is “posologie” and not “dosage”. The meaning of dosage is the exact determination of quantity of a substance in a certain environment.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>R2:</strong> Dosage/posologie</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>R3:</strong> posologie</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Develop</strong></td>
<td><strong>R1:</strong> se présentent</td>
<td>Develop, is used in the medical field to refer to a symptom, condition or a disease. Therefore, it cannot be translated by “développement” but rather (apparition, manifestation, survenance)</td>
</tr>
<tr>
<td><strong>R2:</strong> developer</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>R3:</strong> developer</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Serious (S3)</strong></td>
<td><strong>R1:</strong> Sérieuse</td>
<td>All the respondents translated “severe” by “sévère” which can be acceptable but in this context the equivalence of severe is “grave”</td>
</tr>
<tr>
<td><strong>R2:</strong> Sérieuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>R3:</strong> Sérieuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Experimenter</strong></td>
<td><strong>R1:</strong> S’il vous arrive / il est normal d’avoir</td>
<td>Respondents (2&amp;3) used experimenter in their renditions. They didn’t take into consideration the polysemous aspect of the verb “to experiment” which equivalent in this context is (Rencontrer “Encounter”) or (Constater “to note, to see”). The respondent 1 used “il est normal d’avoir (S15) and “s’il vous arrive”. It shows an effort of deverbalization taking into account the meaning of the verb in the context. In other words he interpreted by using the equivalence in French.</td>
</tr>
<tr>
<td><strong>R2/3:</strong> Expérimenter</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Through the few examples presented above, it is easy to notice how cautious the interpreter should be while performing a translation of a medical document since he/she is not safe from semantic false friends. The participants used wrong semantic equivalents to translate the words in the table. We noticed an effort from all of them to detach from the source text while maintaining logic, accuracy, and faithfulness. But the wrong correspondence somehow affected the quality of interpretation. As in the section “how much to take and how often” is a long phrase that refers to “dosage” “posologie”. Although the term was not mentioned in the source text, the respondents were able to get the word to express the idea. It is noticed that R3 used the term posology. R2 did the same but felt the need to add the word “dosage” “dose” in English to explain more, maybe because she was not sure about which one was the most representative of the idea or because she wanted to explain more in case the audience did not understand it. On the other hand, R3 used the term “dose.” A French speaker can easily understand this term in context. But Ammal (1999) ranged the term “dosage” in the category of semantic false friends. According to him, the equivalence of dosage is posology and dose corresponds to titration or assay.

4.5. Unconscious Use of Translation Strategies.

Moreover, based on the answers obtained from the questionnaire, it appeared that the respondents were not aware and did not previously know the translation strategies they applied during the rendition. In other words, they implemented them unconsciously because none of them explicitly named the translation strategies that we came across during the analysis of the data collected. They used them as coping strategies to overcome and avoid the trap of the syntactic interferences.
4.2. Time Constraint as a Cause of the Syntactic Interference.

In the interpretation world, interpreters can only interpret into their mother tongue (A language) or a (B language). This is because the interpreter will be more proficient since he or she has a good mastery of that language and can always find a way to make the message clear enough no matter how complex the source language is. Why then do the interpreters face the problem of interference? Interference happens when the interpreter does not detach himself from the source text and copies its structure while transferring the meaning into the target language. The mental information processing during sight translation involves reading a written source text and translating orally at the same time into the target language. Same as in simultaneous interpreting, the execution of this task is done under time constraint.

While performing sight translation, an interpreter is operating a syntactic restructuring during the transition from source language to target language. Syntactic interference may occur at that time because the interpreter starts sight translating even before having read the entire sentence and therefore he focuses more on translating units of meaning instead of considering the sentence as a whole. Time constraint and the necessity of keeping momentum in the rendition does not allow the interpreter to read the whole sentence and then decide to use the appropriate word or syntactic structure according to the context. Thus, that situation can lead to literal translation or word for word translation by using the syntactic structure of the source language. Such interference should be avoided.
CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS.

5.0. Introduction

This chapter is the last part of our study. We have presented a summary starting from the background of the study to the essence of the discussions in the different other chapters. It also includes the conclusion that we have drawn from this study as well as some recommendations regarding the relevant research angle briefly evoked in the present investigation.

5.1. Summary

This study set out to investigate syntactic interference during sight translation from English into French. Our objective was to investigate how syntactic interference affects interpretation quality during sight translation of medical discharge instructions from English into French and the impact on the rendition. We also aimed at examining sight translation and translation techniques that are relevant to help overcome syntactic interferences during sight translation.

Our research was divided into five chapters. In the first chapter of our study we presented a general background related to the evolution of sight translation as a didactic tool to its implementation in various aspects of the interpretation field focusing mainly on sight translation applied health-care interpreting. The methodology designed to achieve the set objectives included the use of data collecting instruments such as questionnaires and observation. It was based on qualitative research and involved three respondents who
were recent graduate interpreters with less than one year of experience as professional interpreters. The second chapter of the study was dedicated on one hand to the explanation of the features of sight translation from different angles, and on the other hand, we focused on syntactic interference. Sight translation is viewed as an excellent pedagogical tool for preparation of simultaneous interpreting and because both modes share some characteristics such as time constraints, information processing, and verbal communication. It is also considered as an excellent way to verbally communicate written medical records such discharge instructions as recommended by the recognized organizations of medical interpreters like International Medical Interpreters Association (IMIA) and National Council on Interpreting in Health Care (NCIHC). Those organizations have set standards through published guidelines which help health-care interpreters to work according to the code of ethics of the profession. As for the features of syntactic interference, we have illustrated the similarities and variations of the syntax formation in both languages. Although both languages generally follow the SVO structure, there are cases where variations in syntax are necessary during the transfer of meaning from English into French. The changes can appear in tenses, in grammatical categories and adjective and substantive order.

We presented in chapter three the data collected from the respondents using different mechanism such as questionnaire and observation. The participants performed sight translation based on a medical discharge instruction. Their interpretation was recorded to further analyze features such as hesitations, reformulation, and fillers to determine the influence on the quality of interpretation. The audios of their renditions were transcribed
and presented individually in different tables showing sections of the English source language opposed to the French versions.

Chapter four set out to analyze the data collected based on the principals of correspondence and equivalence of the theory of sense as developed by Seleskovitch and Lederer. We examined the choice of corresponding word and expression uttered by the respondents. We also looked at the semantic equivalence proposed by the participants to determine if they took into account the contextual meanings of words and expression. It came out of the analysis that failures to avoid syntactic interference represent an important factor that affects interpretation quality during sight translation of medical discharge instructions. Moreover, there are translation strategies that are relevant to avoid syntactic interference. Our two hypotheses were therefore confirmed. Besides that, we came across the fact that semantic false friend can have a negative impact on the quality of interpretation.
5.1. Conclusions

The challenge of avoiding syntactic interference through sight translation mode remains a big challenge for inexperienced interpreters. At the end of our study, we concluded that a successful Sight translation free from syntactic interference imply the right choice of correspondence of words and equivalence in the target language during the performance of the task. That supposes not only the appropriate selection of the grammatical categories and their right positioning according to the rule of the grammar of the target language. Moreover, as long as literal translation sometimes appears as a default strategy, there instances where the interpreter must resort to the implementation of other translation strategies such as equivalence, modulation of syntax, transposition, and expansion to produce a more restructured expression.

5.2. Recommendations.

One of the recommendations that we can make after our research is related to the exploration of sight translation from another angle. Our study focused on investigating syntactic interferences in sight translation of discharges instructions. An area of further research is the register that is used during the sight translation. In other words, ‘An investigation on how sight translation effects or influences the register that is employed by the interpreter while performing the task’. For during sight translation, the interpreters in some instances did not take into account the polysemy of words and operated a literal translation which sounded casual.
An investigation of the practice of consecutive and simultaneous interpreting in health-care interpreting deserves specific attention since our research focused only on sight translation.
BIBLIOGRAPHY


APPENDIX I: QUESTIONNAIRE.

INVESTIGATING SYNTACTIC INTERFERENCE DURING SIGHT TRANSLATION FROM ENGLISH INTO FRENCH.

I am a second year student at The University of Nairobi, Centre for Translation and Interpretation, pursuing Masters of Arts in Interpretation.

I am carrying out a research for the partial fulfillment of the university requirements. The research seeks to investigate lexical and syntactic interference during Sight Translation from English to French. I kindly request your assistance by responding to the questionnaire below, in regards to the speech you rendered. Your cooperation is highly appreciated. Thank you

1. SECTION ONE BACKGROUND INFORMATION

1.1 Sex

☐ Male  ☐ Female

1.2 Language Combination.

☐ French (A)

☐ English (B)

☐ English (C)

☐ Kiswahili (C)

1.3 Area of study for your Undergraduate degree

1.4 Did you undergo any training related to the medical field?

☐ Yes  ☐ No

1.5 Have you ever worked in the medical field as an interpreter/translator or any other position?

☐ Yes  ☐ No

1.6 Please rate how much your training and/or your experience in the medical field helped you find equivalences (1 lowest grade) (5 highest grade)

☐ 1  ☐ 2  ☐ 3  ☐ 4  ☐ 5
1.7. Experience in Interpretation before joining the course:

☐ None
☐ Occasionally
☐ Less than 2 years
☐ 2-5 years
☐ More than 5 years

2. SECTION TWO: SYNTACTIC INTERFERENCE FROM SOURCE TEXT INTO TARGET LANGUAGE

2.1. How do you assess your understanding of the text?

☐ Excellent
☐ Very good
☐ Good
☐ Not so good
☐ Insufficient

2.2. What were your biggest challenges during the rendition?

☐ Time constraint
☐ Finding equivalent words or expressions.
☐ Keeping the momentum
☐ The medical terms or expressions.

2.3. How do you assess your level of knowledge syntactic interference between the source language and target?

☐ Excellent
☐ Very good
☐ Good
☐ Not so good
☐ Insufficient

2.4. Were you cautious about avoiding lexical interference?
Yes ☐
No ☐
Somehow ☐

2.5. Were you cautious about avoiding syntactic interference?
Yes ☐
No ☐
Somehow ☐

2.6. Do you think the interpretation training helps trainee interpreters to overcome the challenges of lexical and syntactic interferences from the Source text into the Target language?
Yes ☐
No ☐
Somehow ☐

2.7. If your answer in Q6 above is No, according to you, what can be done to help trainee interpreters overcome the challenges of lexical and syntactic interferences from the Source text into the Target language?

3. SECTION THREE: ABOUT SIGHT TRANSLATION AND TRANSLATION STRATEGIES.

3.1. Did you previously know some Sight Translation strategies?
Yes ☐
No ☐

3.2. If yes, which ones did you find relevant for this kind of medical document?

3.3. Did you previously know some Translation strategies?
Yes ☐
No ☒

3.4. If Yes, which ones did you find relevant for this kind of medical document?

3.5. Do you have anything else that you consider relevant to add to this study?

Thank you!

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