Chapter 12

Making the impossible possible, or how to research in specific settings in public service interpreting

Anca Bodzer

Raquel Lázaro Gutiérrez

Universidad de Alcalá

In the last decade public service interpreting (PSI) has gain greater visibility and has become a thriving field of research evolving towards a specialization according to settings. Different studies and research projects focus more and more on specific contexts like medical interpreting in emergency departments, interpreting for victims of gender-based violence or interpreting for women in penitentiaries. The aim of this article is to describe the positive impact and promote the awareness of combining several empirical methodologies during the data collection process especially in contexts where confidentiality and special protocols turn the access to data into a tedious process. The article describes different research projects developed by the members of Group FITISPos-UAH which have combined several types of questionnaires, interviews, focus groups, recordings, direct observation and field notes. A more detailed description of these typologies of research is presented and it is argued that the empirical framework must be shaped or modeled in such a way that it serves to overcome institutional obstacles.

1 Introduction

Research (and training) within the field of public service interpreting (also known as community interpreting) has evolved towards a specialization according to settings. Thus, nowadays we can find articles or research projects (as well as training proposals) dealing with medical interpreting in emergency departments,



interpreting for victims of gender-based violence or interpreting for women in penitentiaries. The number of studies carried out on interpreting and mediation in these specific fields is usually scarce not only because of their innovative character, but also because of the many difficulties in gathering data for empirical research.

It is well known that, in order to achieve the ecological validity of a study, it is necessary to base the results of the research on real data, which, within the field of public service interpreting, are often gathered from the analysis of excerpts of natural speech. However, the compilation of recordings of actual dialogue being physically present during the course of real interactions or even carrying out interviews or gathering answers with the help of questionnaires is becoming more and more challenging. The reality is that in some countries or regions the compilation of information in order to assess the quality and characteristics of interpretations is particularly difficult due to national or local legislation regarding the protection of data or because institutions, organizations or companies are obliged to maintain total confidentiality. Besides, investigating how the process of communication is achieved in situations where people are undergoing difficult personal episodes, as is the case in gender-based violence contexts, particularly when the victims of this kind of violence are of foreign origin, represents indeed a very special and delicate situation, based on the fact that these subjects are very difficult to access, both because of their reluctance to take part in research and the protection which they receive.

Through this paper we intend to offer a brief overview of the use of public service interpreting with a special focus on specialized contexts, such as genderbased violence cases, emergency situations or prison settings. The aim of this article is to examine several methods that are being applied in this kind of crosscultural social research. Given the characteristics of these settings in which confidentiality and other ethical issues are paramount, emphasis is placed on the need to model and design a specific empirical methodology that best suits and allows researchers to gather information which is very difficult or even impossible to access. The use of several research methods, such as questionnaires, interviews, ethnographic field work (observation guides and field notes), focus groups, and video and tape recordings amongst others will be examined. Examples from different research projects developed by the members of Group FITISPos-UAH will be given to illustrate these different methods of data gathering.

2 Need for research in public service interpreting in specific fields

Even though in earlier times Interpreting Studies focused primarily on conference interpreting and especially on the cognitive processing aspect of interpreting, in the last decades, due to migration and an increase in human mobility as well as the free movement of citizens within the Member States of the European Union, the importance of interpreting performed for public services has gained greater visibility.

Public service interpreting consists of face-to-face or remote interactions in which at least two parties that need to communicate (public service providers and migrant users) do not share the same language and culture. This kind of interpreting can be described according to Gentile et al. (1996) in terms of the setting where it takes place and the techniques used by the interpreters. Public service interpreting is performed in a variety of contexts, such as courts, hospitals, jails, schools or police stations. The interactions mediated by interpreters in these contexts share some general characteristics:

- They are usually personal for the foreign speaking person and professional for the public service providers.
- They are asymmetrical and sometimes quite tense (Hale 2007; Cambridge 2002).
- Interpreters may be present, together with the main interactants, or interpretation may be performed remotely, that is, one or several of the participants in the interaction (the interpreter or any of the other speakers), joins the conversation via telephone or videoconferencing.
- Interpreters interpret bilaterally, using mainly short consecutive or *chuchotage* (although sometimes also simultaneous) interpreting, and they sometimes take notes.
- Interpreters often have to perform other roles or tasks, such as sight translation, summarizing or explaining (expanding) utterances and concepts.

Most of the studies conducted in the field of public service have mainly focused on court (Atkinson & Drew 1979; Edwards 1995; Hale 2004; Mikkelson 2000; Moeketsi 1999; Shlesinger & Pöchhacker 2010) police interpreting (Ortega-Herráez & Foulquié Rubio 2005), interpreting in hospitals and health-care centers (Angelelli 2004; Bischhoff 2006; Davidson 2000; Raga Gimeno 2006; Pöchhacker & Shlesinger 2007; Lázaro Gutiérrez 2012; Valero-Garcés 2014) but there is very little research dedicated to other specific settings such as for example genderbased violence, emergency situations or women in prison settings. The goal of this paper is to present some specific empirical methods that can be used in settings in which access to information represents a serious burden, as the ones which have been mentioned above.

3 Research in interpreting as social research

Researching interpreting as a face-to-face interaction (Wadensjö 1998) can be included in the category of *social research* as it "focuses on gathering information about society and social issues" (Adams & Brace 2006: 6).

Although research is carried out with the specific purpose of achieving new insights, accurately portraying the characteristics of a particular situation or group or testing a hypothesis (Kumar 2008: 3) there are four main pairs of recognized types of research design (see Figure 2).



Figure 1: Type of research according to Kumar (2008)

Williams & Chesterman (2002) also make a clear distinction between conceptual (theoretical) research and empirical research, and according to Borja et al. (2009) every research project includes three fundamental phases: conceptual, empirical and interpretative which in the opinion of Halverson (2009: 102) correspond to other "particular components of vital importance: the research question, research design and assessment of research quality".

Independently of the classification of research, what is truly important is to be aware of the distinction between two fundamental concepts: *research methods* and *methodology*. The first term (research methods) refers to the techniques and

strategies adopted by a researcher while the second term (methodology) represents "a way to systematically solve the research problems" (Kumar 2008: 5).

For this paper, it is the empirical phase (or research design) that is of interest to us, as it represents the stage in which the methodological grounds are defined (Borja et al. 2009: 62) and the researchers are involved in a continuous metalevel of awareness and decision-making (Halverson 2009: 80) while modelling their research methods. In what follows, the different research methods used when researching in the field of public service interpreting in specific contexts will be described and illustrated using several examples of studies carried out by the authors in the last five years.

4 Characteristics of the research carried out in specific contexts

Analyzing different aspects of the process of interpreting or of the interpreter's role in situations in which the person who does not understand and speak the language of the host country is under a particular pressure or undergoing any kind of traumatic situation turns out to be a very challenging experience and, at the same time, it can pose a risk to the research as the methodology of data collection might have to be adapted to comply with both ethical and sensitive issues.

One of the first steps that any researcher has to undertake in the incipient phase of gathering data is applying for an official permission. In order to do so, it is necessary to write a formal letter with a brief summary of the project and the kind of information needed as well as an outline of the method or methods to be used. A reply to an official request for permission to be given access to information by a public institution is usually not issued immediately, but can take up to several weeks or even months as sometimes special committees must be formed for this purpose.

However, an official permission from the institution where the research will be carried out is usually not sufficient, as it is also necessary to count on the acceptance of each and every patient, victim, client, offender, etc. Sometimes, in spite of the official permission from the institution, it is also necessary to obtain consent from the individual employees whose talk will be object of study, as well as from the interpreters, being they employed by the institution or hired by the patient/victim/client/offender.

As it has been mentioned before, many of the settings where public service interpreting is performed are tense situations, as one of the interactants (patient/ victim/client/offender) is using a public service driven by a personal need or circumstance (a gender-based violence victim making a complaint at a police station, a patient who has just had a car crash and is in hospital, a person who finds herself in prison after being charged with theft, etc.) Both the immediacy of the encounters and the personal situation of the speakers make these interactions mediated by an interpreter extremely difficult to research.

Some of the general characteristics of such communications that take place in specific contexts and which will be analyzed for the purpose of our research are outlined below:

- They take place within an institutional setting.
- The parties do not share the same language.
- The presence of an interpreter is needed in order to enable communication.
- The relationship between the two parties is asymmetrical (both from a linguistic –one party speaks the official language of the country where the encounter takes place and the other one speaks a foreign language- and an educational perspective).

All of these characteristics are found in most public service interpreting encounters, but, apart from them, there are also others that are more specific to the contexts that will be taken into account for our research:

- Formal language uttered by service providers.
- Informal language (free narration of the acts, symptoms) uttered by users of public services.
- Strict institutional protocols.
- Anonymity and confidentiality are crucial.
- Different professionals who assist the user (policemen, psychologists, social workers, lawyers, judges, forensic doctors, nurses, general practitioners, clerks, trainers, etc.)

In what follows, different research methods used in projects where members of the Group FITISPos-UAH took part will be presented. All of these projects have in common that they dealt with specific contexts within public service interpreting. One of them is a Ph.D. dissertation on interpreting in gender-based violence trials (Bodzer 2014), which combines interviews, questionnaires, and observation guides.¹ Also within the field of gender-based violence is the project Speak Out For Support (SOS-VICS) (2012–14),² aiming at facilitating efficient communications between women who are non-native speakers and victims of gender-based crimes, and the agents who intervene in such acts of communication through well trained interpreters, which was funded by the Directorate-General of Justice of the European Commission. The following two projects were developed in the healthcare setting and included the emergency departments of three different hospitals. The project Intercultural Mediation for the Healthcare Assistance to Migrant Population: Analysis of Communicative Problems and Suggestions for Training (2004-07) was funded by the Spanish Ministry of Science and Education and aimed at analyzing the quality of communication between clinical staff and foreign patients, at a time when interpreting or mediation services were not available in hospitals or healthcare centers. Some years later, the project InterMed (2012-15), funded by the Spanish Ministry of Economy and Competitiveness, set out to monitor healthcare mediators in order to assess the quality of mediated healthcare encounters and to establish best practice. The last of the projects involved is Interpreting and Translation in Penitentiaries (2013-14), which was funded by the University of Alcalá under the supervision of the Spanish Ministry of Economy and Competitiveness and consists of a pilot project aiming at analyzing communicative problems of female inmates in a particular prison located in the vicinity of our university.

5 Empirical research methods and instruments adopted for specific fields

Most of the research which has been or is being carried out in the field of public service interpreting is designed with the purpose of testing a hypothesis or to describe and analyze the *status-quo* of the profession or other issues related to it (ethics, role of the interpreter, etc.). In order to achieve this, both quantitative and qualitative methods can be used. Each one of methods follows particular objectives, has certain advantages and poses specific problems. For most of research projects, particularly for our descriptive projects, a combination of qualitative and quantitative methods is desired. Several authors, such as Krolokke & Sorensen (2006), suggest the need of using several research methods which are

¹Anca Bodzer was awarded a Ph.D. Fellowship by the University of Alcalá for 4 years (from 2010–2014).

²http://cuautla.uvigo.es/sos-vics/

deliberately recombined. Creswell & Plano Clark (2011) offer a convergent parallel design model, which is a data triangulation model which implies the parallel application of at least two methods in order to reach the triangulation (Denzin 1989) or the crosschecking (Douglas 1976) of the results of the research or, in Morse's words (1991: 122), "to obtain different but complementary data on the same topic".

Based on Kumar's (2008) *quantitative* versus *qualitative* type of research, throughout the following paragraphs we will describe some methods used in our research on interpreting in specific contexts and which are also summarized in the figure below:



Figure 2: Research methods in interpreting specific settings

5.1 Quantitative methods

Quantitative research is concerned with the measurement of quantity, that is, the relationship among quantifiable variables. One of the most frequently utilized methods consists of using questionnaires. Through this method, researchers try to determine the strength or importance of the correlation between variables and to establish to which degree the results obtained from a sample are objective and general and can be applied to its original population. After this, further analysis aims at explaining the results, which means describing why things happen or do not happen in a particular way.

5.1.1 Questionnaire

Questionnaires are a communication instrument used between the researcher and the group of interest for the investigation. The design of a questionnaire may vary from one research project to another both in length as in form but all of them have some characteristics in common: (1) a brief description of the study including some recommendations on how to complete it, the approximate time needed and the deadline, (2) some initial questions that are geared towards gathering socio-demographic data of the respondents (sex and age) (3) even though they are anonymous. Questions must be clear and specific and questionnaires must be piloted in order to assess their efficacy. Questionnaires can be administered in different ways: in person or remotely, either by sending them to the target population in an envelope and providing at the same time a pre-paid return envelope (Ortega Herráez 2011) so that the participants can send it back to the researcher by postal service or to be filled in online through the use of specific questionnaire design tools (Bodzer 2014).

Apart from these initial questions designed to profile the respondents, questionnaires may include closed or open questions or a mixture of both. Closed questions can be single or multiple choice questions. Some of the most popular measurements methods used are (Oppenheim 2000; Gillham 2008):

- **Likert scale** used to measure attitudes generally expressed in terms of agreement or disagreement although it also allows for measuring a certain degree of neutrality and also the experience of the subject, for example, when questioned about the frequency with which occurrence of a particular fact occurs. The most common form of the Likert scale goes from 1 to 5 (it is symmetrical), but longer scales may also be found, which can be either open (eg. Rate your experience from 1 to 10, 1 being "very bad" and 10 "very good"), or semantically expressed (eg. 1 meaning "always", 2 meaning "often", 3 meaning "sometimes"...)
- **Delphi method** is a method designed for experts which is applied in a repetitive manner since it is used as a prediction tool. The phases of a Delphi questionnaire are represented in Figure 3:

As for the current design of questionnaires, it is more common to use specific electronic tools rather than to adopt the classical form of completing questionnaires on paper. Nevertheless, the option chosen for the design of any questionnaire will directly influence its circulation and, if necessary, the possibility of translating it into other languages should be considered in case an extended sample is needed.

The Internet and new technologies are of great help both with regard to the design of questionnaires but especially with respect to their distribution, storage of information and even analysis of data. Even though there are a lot of free questionnaire design tools available on the Internet, it is very important to be aware of the fact that they do not offer any guarantee and data may be lost without the



Figure 3: Phases of a Delphi questionnaire

possibility of recovering it. For this reason, it is strongly recommended to choose a specialized tool and sign up for a paid account.

Finally, the researcher may consider the option of compensating the respondents for their time and collaboration by giving them the opportunity to leave an e-mail address if they are interested in receiving a summary of data analysis gathered with their help. If this kind of agreement is entered into by the researcher, it must be fulfilled once the data has been analyzed.

Questionnaires were used for all of the aforementioned projects, either to measure opinions about the quality of communication or to survey personal experiences regarding how communication was carried out. They were usually distributed among all the people involved in the communication process, that is patients/clients/victims/offenders, public service providers, and interpreters or mediators. Two different experiences will now be described: the questionnaires passed on to interpreters by Anca Bodzer as part of her Ph.D. research because of the technical difficulties which arose in the process, and the Delphi questionnaire distributed amongst interpreters with experience in gender-based violence contexts as part of the SOS-VICS project.

For the Ph.D. dissertation there were five different questionnaires designed as they were addressed to different groups of respondents: interpreters, lawyers, social workers and psychologists and finally non-Spanish speaking victims. The first questionnaire designed and piloted was the one directed to the interpreters. It was made up of two parts: the first one included questions that could help establish the profile of the interpreters (sex, age, studies, motivation to be interpreters, etc.) and the second part was more specific as it aimed at gathering information regarding the impact of the gender factor in the process of interpreting and analyze the importance of it together with other factors like religion or culture in the specific context of gender violence. For the piloting phase the questionnaire was translated into three languages (Spanish, English and Romanian) and it was designed using a free specific electronic tool which was previously used for a research at a smaller scale. Unfortunately, because of an internet attack to the page and server of the survey tool the data gathered in two weeks was lost and there was no chance of getting it back. According to this piloting experience it was totally decided that a paid account of a specialized well known tool should be used in during the entire data collection phase in order to guarantee the safety of the data.

Within the SOS-VICS project, a group of expert translators and interpreters was surveyed in order to find out about the contents that, in their opinion, should be contained in a training program for interpreters and translators working in gender-based violence contexts.³ The survey was carried out in two main phases. During the first phase, professionals were openly asked about three aspects: the contents which a training program should cover, the obstacles which prevented them (or other colleagues) from receiving such training, and the most suitable training techniques and strategies to solve this lack of training. Once all the open answers were compiled, a list was elaborated and returned to the professionals. This time, they were asked to rate the items in the list according to their relevance or importance.

The questions were chosen by a team of five people, all of them researchers involved in the project, but belonging to different fields: translation and interpreting, sociology, statistics, and journalism. The respondents were selected by researchers of the nine Spanish universities taking part in the project. This made it possible to find experts from all around Spain, thus ensuring the representativeness of the sample. The questionnaire was distributed via email together with the presentation of the project and instructions regarding its completion (including ethical issues related, for example, to the anonymity of the answers).

One of the first obstacles encountered was the difficulty involved in finding respondents with the required profile (translators and interpreters with experience

³The whole study is published in Del Pozo Triviño et al. (2013)

in gender-based violence contexts). The second main problem can be attributed exclusively to the nature of the Delphi questionnaire: as it has to be completed in two phases, nearly half of the respondents failed to respond to the questionnaire distributed during the second phase. Two reminders were necessary for each of the phases. Here we can see the aspect of the questionnaire:

Another challenge of this method was to group, reformulate and classify the answers of the respondents for the second phase. A list of 154 items was sent back to the interpreters so that they could rate each of them following a Likert scale (1–5 being 1: "not important at all" and 5: "very important"). This time, a piece of software was used to gather the answers: AdobeFormsCentral. The aim of this phase was to identify the level of importance of each of the items, and also the level of agreement between participants. A third phase had been projected in case the level of agreement had not been high enough after the second phase, but it was ultimately not necessary to carry it out.

5.2 Qualitative methods

Qualitative research focuses on the qualitative phenomenon avoiding quantification and is typically carried out in a natural setting. Adopting a qualitative approach implies the use and collection of a variety of empirical data like participant observation, case studies, personal experiences and interviews, to name just a few (Denzin & Lincoln 1994: 2). Qualitative research tries to identify the deep nature of realities, their system of correlations and their dynamic structure. In the following sections two qualitative methods will be described: interviews and focus groups.

5.2.1 Interview

Interviews are particularly useful if one desires to understand opinions or behaviors of a specific group concerning a topic, "to get the stories behind a participants' experience" (McNamara 1999). They are conversations based on the researcher's need for data. In other words, it is one of the most frequently used research instrument applied to collect relevant information for the purpose of research. They represent the most common instrument for qualitative research.

Normally interviews are conducted on a face-to-face basis but, with the explosive growth of new technologies, telephone and video interviewing have become more and more common. The only difference between these two kinds of interviews is that the face-to-face interview is synchronous in both time and space while interviews conducted by telephone are asynchronous in terms of space (Opdenakker 2006). Regarding the interviews done via internet there is a debate whether they are asynchronous regarding space or not, as the Internet is considered to be "no place" (Morse 1991 in Opdenakker 2006).

As concerns this paper focused on research done in specific fields in which access to information is extremely difficult, the use of technologies such as the phone or the Internet can be of great help during the data collection process. For example, in the special case of gender violence getting to interview victims personally may be impossible for several reasons:

- The victim does not want to reveal her experience to an unknown person.
- The victim might feel ashamed in a face-to-face interaction.
- The presence of an interpreter might be needed and in this case the victim would have to cope with the presence of two unknown persons (researcher and interpreter).
- The total anonymity (in the majority of the cases) of the victim is crucial for her protection.

5.2.2 Focus group

Focus groups may be more appropriate than personal interviews for some topics which require further reflection. They represent a discussion with a group of people so that the analysis of data takes place at a level of a group interaction. The participants are chosen because of their expertise, their experiences or their background. Some questions are posed to the participants, who give their individual opinions while listening to the others' opinions, which might serve as an inspiration for the moderator of the focus group to elaborate further opinions.

The main objective of project *InterMed* was to monitor teams of healthcare mediators in order to identify and subsequently be able to recommend best practice for a communication mediated by an interpreter/intercultural mediator. One of the tasks of mediators working in Spain is usually providing assistance in the elaboration of multilingual materials for a foreign population. Within project *InterMed*, a small scale research project was carried out on health promotion videos addressed to foreign population. The aim was to find out more about their effectiveness and several aspects concerning the levels of adaptation to the audience were studied: linguistic adaptation (dubbing or subtitling), cultural adaptation (communicative styles, proxemics, etc.), and topic adaptation, amongst others. After a first analysis, the study was completed by means of focus groups. Some videos which had been studied by a single researcher were later evaluated by a group of intercultural communication experts and by individuals belonging to the target population (the audience). The evaluation was articulated based on a qualitative and subjective methodology, such as the responsive evaluation model (Stake 1976; Abma 2005). This model suggests an evaluation of materials addressed to particular subjects by these same subjects. It is based on qualitative (non-quantifiable) comments and team participation and seeks to capture the singularity of particular situations, allowing for the understanding and evaluation of both processes and results of the health promotion programmes (Gámez Requena & Márquez Aragonés 2004).

Although finding experts in intercultural communication and members of medical staff with experience or specialization in interculturality was not a difficult task, finding members of the videos' target community was particularly challenging. *These participants* had to be as close to the target culture as possible, and should not be strongly influenced by the host culture (Spanish culture, in this particular study). However, most of the people willing to evaluate the videos, although originally belonging to the target culture, were already very much imbued with the host culture, or were cultural experts themselves, posing the risk that their contributions might be influenced by this fact. This problem was solved when these individuals, instead of participating in the focus group themselves, found other people with the required characteristics within their circles of relatives and acquaintances.

5.3 Mixture of qualitative and quantitative research

Apart from the above mentioned, there is a variety of methods which can be useful both for qualitative and quantitative analysis, as both kinds of data can be compiled and extracted from them. In this article, we would like to mention the analysis of video and audio recordings and the elaboration of observation guides to compile field notes.

5.3.1 Recordings

During two of the above mentioned projects, video and audio recordings of medical consultations were compiled. Within the project *Intercultural Mediation for the Healthcare Assistance to Migrant Population: Analysis of Communicative Problems and Suggestions for Training*, carried out from 2004 to 2007, more than 100 recordings were compiled, whereas the researchers of the *InterMed* project, carried out from 2012 to 2015, managed to record around 40 medical consultations. The difference in the number of recordings compiled is striking, taking into account that the duration of both projects was similar and that the methodology which had to be developed for the first project was simply intended to be applied to the second one, without the need of further design. The obstacles encountered in the course of implementing this methodology were manifold, but they were easier to solve in the case of the first project.

The difficulty revolved around obtaining the informed consent of all the participants in the study and all the speakers whose conversations were to be recorded. First of all, the researcher needs the authorization of the institution in which the conversations are to take place. For the first project, this was obtained after a number of interviews with the managers of the hospital departments and healthcare consultations were the study was carried out. In the case of hospital departments, the head of each department (emergency, pediatrics, and gynecology) was contacted and the project was explained to them. After receiving their verbal authorization, an agreement was signed between the hospital and our university in order to allow for the project to be developed. In turn, the head of the departments held a meeting with their respective department staff to explain the protocol for data compilation. In the case of healthcare centers, several general practitioners were contacted and asked for permission to record their consultations. After they had consented, an agreement form was signed between the healthcare area to which the healthcare centers belonged and our university.

The second step was to obtain permission from the patients to be recorded. A consent form was written by the members of the researcher's team and later translated into several languages (the most common languages of the patients of the area where the study was carried out: English, French, Chinese, Arabic, Polish, Romanian, Russian), so that foreign patients could read them in their own language. One researcher was present during the consultations and was in charge of explaining the content of the consent form to the patient (objectives of the study, what would be done with the recordings, and how personal data would be processed) and obtained consent from them. It was also the researcher who started and stopped the recorder. The researcher remained silent and as unobtrusive as possible during the consultations.

Apart from the difficulties which arose before the recording phase took place, there were two major problems encountered during the recording phase: the reluctance to participate from both members of staff and patients, and the influence of the presence of the researcher. Some members of staff were concerned about the possibility that their performance might be assessed in terms of quality. On the other hand, patients were afraid that their irregular status of residence in the country would be discovered. Both parties were given explanations about the aims of the study and about the data management process, but reluctance was not completely eliminated.

As the presence of the researcher sometimes influenced the interactions, for example, to the extent that the speakers addressed her and she sometimes became another member in the conversation, some mechanisms were identified to try to minimize this influence. The most effective approach consisted of the members of staff (doctors and nurses) recording the conversations themselves. However, other issues arose: the members of staff forgot to initiate the recorders, or they started it too late, or forgot to stop it, or decided to delete some conversations for a number of different reasons. In the end, this measure was not particularly advantageous, as it did not pose fewer problems.

Some years later, when the *InterMed* project started, a similar methodology was intended to be used. However, the process of obtaining authorization from the institutions was more complicated. Instead of giving their immediate consent, general practitioners and other doctors redirected our request to higher instances. When our proposal reached higher authorities without their prior consent, it was dealt with as an external request and additional documents were requested. We had to solicit an ethics report from the bioethics committee of our university, and our proposal had to be approved by the regional (Madrilean) bioethics committee. Amongst the many documents that we had to present, were the consents forms we planned to give to patients. After the committees' revision, the consent forms became long and complicated, and several patients refused to sign them because they did not want to take the time and go to the trouble necessary in order to become informed.

5.3.2 Field notes

As already mentioned this paper also includes part of the experience of a Ph.D. dissertation based on the analysis of interpretation for non-Spanish speaking gender-based violence victims during which access to information was decisive for the realization of the study. As access was denied to be present during the interviews with victims or to obtain audioslash video recordings the only approach that allowed for the realization of the research was an ethnographic one based on field notes because, as Koskinen (2008: 12) says, "the reality of research calls for flexibility, improvising, prioritizing and openness to new opportunities as they arise during the research process". That is why for this author "ethnography is a complex methodology which offers a robust and adaptable framework [...]

which allows for using of multiple sources, multiple methods of analysis, and for multiple sites and time-frames" (Koskinen 2008: 6).

Field notes represent one of the most famous instruments used during the observation period and they may be descriptive or analytical. Each and every field note should start with information about date, time beginning and time end as well as the location where the observation is carried out.

Contrary to other approaches that bring the field to the investigator, ethnography and the collection of data based on field notes requires that the researcher go into the field. Schwartzmann (1993: 3–4) states that "ethnographers go into the field to learn about a culture from the inside out".

The design and the process of writing field notes is very personal and adapted to each research, and that is why the following information is based on our own experience. Field notes were used along the compilation of data for Anca Bodzer's Ph.D. dissertation and for the project *InterMed*.

The Ph.D. dissertation carried out by Anca Bodzer in the field of gender-based violence is based on a corpus of 37 field notes gathered during the daily observation of public judicial trials which took place in specialized courts (Juzgados de Violencia sobre la Mujer) in Madrid over the course of seven months. Three of the seven months were in fact a period of accommodation to the field meaning that specialized knowledge about how different courts work, about the role of all the interlocutors (judges, lawyers, prosecutors, witnesses, forensic doctors, social workers and psychologists) and the different phases of a trial. At the same time, this period helped the researcher test and improve her ability to write down notes based on a very rapid discourse, long sentences and with short or no pauses at all, pay attention to what was happening in the room and also to the non-verbal communication. Last, this pre-official three month period of observation was of great help to shape and decide upon the information to be included in the observation chart template which would serve as an instrument to collect the same data from all the observed trials. Details like date, timing, type of crime, language(s), gender of interpreter, type of interpretation (simultaneous, consecutive, *chuchotage*, summarized, sight translation) according to each phase of the trial (introduction, victim's/accused/witness's testimonies, lawyers' reports, etc.) were reflected on the observation chart template. A section for open comments was also included with the aim to gather the specific information of each one of the observed trials. This data was extremely helpful to identify the barriers existing in a trial mediated by interpreters and the data was classified following the principles included in the professional code of ethics.

6 Final remarks

The purpose of this paper is to promote awareness for the fact that the empirical framework must be shaped or modeled in such a way that it serves to overcome institutional obstacles. At the same time prerequisites such as validity and reliability must be taken into consideration when designing the methods to be used. When conducting research in a specific setting, the use of mixed methods (quantitative and qualitative) represents the only possible way to gather the necessary information. In fact, sometimes adopting typical research instruments like questionnaires and interviews is not enough and other methods must also be taken into consideration and developed.

Throughout the paper we have presented some relevant methodological information about different typologies of research, while mainly focusing on cases from projects conducted in specific settings in which members of FITISPos-UAH Group took part, placing special emphasis on the difficulties which arose as well as on the methodological solutions that were finally adopted. As nowadays it seems very difficult to obtain access to audio or video recordings from specific settings or to interview persons of interest (gender violence victims) in order to conduct research, our experience showed us that the use of mixed methods and also mixed instruments (observation guides) are of great help.

References

- Abma, Tineke A. 2005. Responsive evaluation: Its meaning and special contribution to health promotion. *Evaluation and Program Planning* 28(3). 279–289.
- Adams, Karen & Ian Brace. 2006. Introduction to market and social research. London: Kogan Page.
- Angelelli, Claudia V. 2004. *Medical interpreting and cross cultural communication*. Cambridge: Cambridge University Press.
- Atkinson, John Maxwell & Paul Drew. 1979. Order in court: The organisation of verbal interaction in judicial settings. London: Macmillan.
- Bischhoff, Alexander. 2006. Measuring quality and patient satisfaction in healthcare communication with foreign-language speakers. In Erik Hertog & Bart van der Veer (eds.), *Taking stock: Research and methodology in community interpreting*, 177–188. Antwerp: Lingüística Antverpiensia.
- Bodzer, Anca Florica. 2014. Interpretación en los servicios públicos desde la perspectiva de género: Aproximación al caso de las mujeres no hispanohablantes, víctimas de violencia de género. Universidad de Alcalá dissertation.

- Borja, Anabel, Isabel García Izquierdo & Vicent Montalt. 2009. Research methodology in specialized genres. *The Interpreter and Translator Trainer* 3(1). 57–77.
- Cambridge, Jan. 2002. Interlocutor roles and the pressure on the interpreter. In Carmen Valero-Garcés & Guzmán Mancho Barés (eds.), *Traducción e interpretación en los servicios públicos: Nuevas necesidades para nuevas realidades*, 119– 124. Alcalá de Henares: Servicio de Publicaciones de la Universidad de Alcalá.
- Creswell, John W. & Vicki L. Plano Clark. 2011. Designing and conducting mixed methods research. London: Sage.
- Davidson, Brad. 2000. The interpreter as institutional gatekeeper: The sociallinguistic role of interpreters in Spanish–English medical discourse. *Journal of Sociolinguistics* 4(3). 379–405.
- Del Pozo Triviño, María Isabel, Antonio Vaamonde Liste, David Casado-Neira, Silvia Pérez Freire, Alba Vaamonde Paniagua, Doris Fernandes del Pozo & Rut Mencía Guinarte. 2013. Formación especializada en interpretación para víctimas/supervivientes de violencia de género: Informe sobre la encuesta Delphi a intérpretes del proyecto Speak Out for Support (SOS-VICS). Vigo.
- Denzin, Norman K. 1989. The research act. New Jersey: Prentice Hall.
- Denzin, Norman K. & Yvonna S. Lincoln (eds.). 1994. *Handbook of qualitative research*. Thousand Oaks: Sage.
- Douglas, Jack D. 1976. Investigative social research. Beverly Hills: Sage.
- Edwards, Alicia B. 1995. The practice of court interpreting. Amsterdam: Benjamins.
- Gámez Requena, José Javier & Ana Christina Márquez Aragonés. 2004. Evaluación de los programas de promoción de la salud para inmigrantes [Evaluation of health promotion programmes for migrants]. *Index de Enfermería* 13.
- Gentile, Adolfo, Uldis Ozolins & Mary Vasilakakos. 1996. *Liaison interpreting: A handbook*. Melbourne: Melbourne University Press.
- Gillham, Bill. 2008. *Developing a questionnaire*. 2nd edn. London: International Publishing Group Limited.
- Hale, Sandra Beatriz. 2004. *The discourse of court interpreting practices of law, the witness and the interpreter.* Amsterdam: Benjamins.
- Hale, Sandra Beatriz. 2007. Community interpreting. Basingstoke: Palgrave.
- Halverson, Sandra L. 2009. Elements of doctoral training: The logic of the research process, research design, and the evaluation of research quality. *The Interpreter and Translator Trainer* 3(1). 79–106.
- Koskinen, Kaisa. 2008. *Translating institutions: An ethnographic study of EU translation*. Manchester: St. Jerome.
- Krolokke, Charlotte & Anne Scott Sorensen. 2006. *Gender communication: Theories and analyses*. London: Sage.

Kumar, C. Rajendra. 2008. Research methodology. New Delhi: Nangia.

- Lázaro Gutiérrez, Raquel. 2012. La interpretación en el ámbito sanitario: Estudios de la asimetría en consultas médicas. Editorial Académica Española.
- McNamara, Carter. 1999. *General guidelines for conducting interviews*. Authenticity Consulting, LLC.
- Mikkelson, Holly. 2000. Introduction to court interpreting. Manchester: St. Jerome.
- Moeketsi, Rosemary. 1999. Discourse in a multilingual and multicultural courtroom: A court interpreter's guide. Van Schaik Publishers.
- Morse, Janice M. 1991. Approaches to qualitative-quantitative methodological triangulation. *Nursing Research* 40(2). 120–123.
- Opdenakker, Raymond. 2006. Advantages and disadvantages of four interview techniques in qualitative research. *Forum: Qualitative Social Research* 7(4). http://www.qualitative-research.net/index.php/fqs/article/view/175/391, accessed 2014-10-27.
- Oppenheim, Abraham Naftali. 2000. *Questionnaire design, interviewing and attitude measurement*. London: Continuum International Publishing Group Ltd.
- Ortega Herráez, Juan M. 2011. Interpretar para la justicia. Granada: Comares.
- Ortega-Herráez, Juan-Miguel & Ana Isabel Foulquié Rubio. 2005. La interpretación en el ámbito jurídico en España: Hacía la creación de estructuras estables y profesionales. In Carmen Valero-Garcés (ed.), *Traducción como mediación entre lenguas y culturas/Translation as mediation or how to bridge linguistic and cultural gaps*, 182–192. Servicio de Publicaciones de la Universidad de Alcalá.
- Pöchhacker, Franz & Miriam Shlesinger. 2007. *Healthcare interpreting: Discourse and interaction*. Amsterdam: Benjamins.
- Raga Gimeno, Francisco. 2006. Comunicación intercultural y mediación en el ámbito sanitario. In Francisco Raga Gimeno & Carmen Valero Garcés (eds.), *Retos del siglo XXI en comunicación intercultural: Nuevo mapa lingüístico y cultural de españa*, 217–230.
- Schwartzmann, Helen. 1993. Ethnography in organizations. Newbury Park: Sage.
- Shlesinger, Miriam & Franz Pöchhacker (eds.). 2010. *Doing justice to court interpreting*. Amsterdam: Benjamins.
- Stake, Robert E. 1976. *Evaluating educational programs: The need and the response.* Washington: OECD Publications Center.
- Valero-Garcés, Carmen. 2014. *Health, communication and multicultural communities topics on intercultural communication for healthcare professionals.* Cambridge: Cambridge Scholars Publishing.
- Wadensjö, Cecilia. 1998. Interpreting as interaction. London: Longman.

Williams, Jenny & Andrew Chesterman. 2002. *The map: A beginners guide to doing research in translation studies.* Manchester: St. Jerome.