# LANGUAGE INTERPRETING AND BROKERING IN SWEDISH PUBLIC SERVICE INSTITUTIONS: THE USE OF CHILDREN FOR MULTILINGUAL COMMUNICATION

Kristina Gustafsson\*, Eva Norström\*\*, Petra Höglund\*\*\*

#### **Abstract**

The aim of this article is to analyse experiences of using children as language brokers in Swedish public services, and the consequences of doing so. We begin by discussing and comparing the two concepts of brokering and interpreting. We then go on to analyse and discuss data obtained by quantitative and qualitative methods, including two online surveys whose respondents worked in health care and social services, and seven group interviews which included persons with experience of language brokering as children. A main result is the existence of discrepancies between how public service staff described their experiences of using children as interpreters, and how child interpreters perceived their situation. The former assert that children are rarely used as interpreters, only in critical situations or for simple assignments, and never on a regular basis. By contrast, interviewees with experiences of language brokering as children declare that they were regularly called on to interpret, every day, and in all kinds of situations. They testify that they were not asked for their consent, nor was their presence ever questioned. Although contradictory, both perspectives are relevant and describe the reality of those who participated in the surveys and group interviews. The discrepancy can be explained by the fact that the parents and relatives of the brokering children may have had encounters with different public service institutions several times a week. If all these institutions legitimised the use of children on isolated occasions and in simple and acute situations, this can seem like full-time work from the perspective of the child. Finally, we focus on the consequences for patients and service users in terms of legal certainty and discrimination.

**Keywords**: public service interpreting; social work; health care; non-professional interpreting; language brokering; children; migration; Sweden; group interviews; online surveys.

## LA INTERPRETACIÓ I LA INTERMEDIACIÓ LINGÜÍSTICA A LES INSTITUCIONS PÚBLIQUES SUEQUES: L'ÚS DE NENES I NENS PER A LA COMUNICACIÓ MULTILINGÜE

#### Resum

L'objectiu d'aquest article és analitzar les experiències amb nenes i nens com a intermediadors lingüístics als serveis públics suecs, i les seves consequències. Comencem comentant i comparant els conceptes d'intermediació i d'interpretació. Tot seguit analitzem i comentem les dades obtingudes per mètodes quantitatius i qualitatius, en concret, dues enquestes en línia fetes a treballadores de l'àmbit de l'atenció sanitària i els serveis socials, i set entrevistes en grup que incloïen persones amb experiència en intermediació lingüística quan eren infants. Un dels resultats principals és que hi ha discrepàncies en la manera com el personal del servei públic descrivia les seves experiències a l'hora de fer servir nenes i nens com a intèrprets, i la manera com els joves intèrprets percebien la seva situació. Els primers afirmen que gairebé mai es fan servir nenes i nens com a intèrprets, només en situacions crítiques o per a tasques senzilles, però mai amb regularitat. Per contra, els entrevistats amb experiència en intermediació lingüística quan eren infants declaren que recorrien a ells amb freqüència per interpretar, cada dia, en tota mena de situacions. Manifesten que no se'ls demanava el seu consentiment, i que tampoc no es qüestionava mai la seva presència. Tot i que són contradictòries, les dues perspectives són rellevants i descriuen la realitat de les persones que van participar en les enquestes i les entrevistes en grup. Aquesta discrepància es pot explicar pel fet que els pares i els familiars de les nenes i nens que fan d'intermediadors poden haver tingut contacte amb diferents institucions públiques diverses vegades a la setmana. Si totes aquestes institucions legitimessin l'ús de nenes i nens en ocasions aïllades i en situacions senzilles i crítiques, això pot semblar una feina a jornada completa des del punt de vista d'un infant. Per acabar, ens centrem en les conseqüències per als pacients i per als usuaris del servei pel que fa a seguretat jurídica i discriminació.

Paraules clau: interpretació als serveis públics; treball social; atenció sanitària; interpretació no professional; mediació lingüística; infants; migració; Suècia; entrevistes en grup; enquestes en línia.

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<sup>\*</sup> Kristina Gustafsson, Associate Professor and Senior Lecturer in the Department of Social Work, Linnaeus University, kristina.gustafsson@lnu.se

<sup>\*\*</sup> Eva Norström, Ph. D. Independent Researcher, Höganäs, Sweden. eva@evanorstrom.se

<sup>\*\*\*</sup>Petra Höglund, Research Assistant, Department of Social Work, Linnaeus University. <a href="mailto:petra.hoglund@lnu.se">petra.hoglund@lnu.se</a> Article received: 28.12.2018. Blind reviews: 10.02.2019 and 10.03.2019. Final version accepted: 01.04.2019.

# **Summary**

Introduction and background

- 1 Previous research, concepts and theory
- 2 Methods
  - 2.1 Online surveys
  - 2.2 Group interviews
- 3 Results
  - 3.1 Results from the online surveys
  - 3.2 Results from the group interviews with public service staff
  - 3.3 Results from the group interviews with children
- 4 Analysis and discussion

Reference list

# Introduction and background

"For my part, it became an anger towards society because my family was not treated properly. I could see how my mom was fighting and I could see how the social workers were posing demands that were disproportionate. It made me think society was shit. (...) The fact that I had to be involved in interpreting created that anger. Today I have turned it into a driving force that I use daily. If there is anyone who can create change, it is us, the second generation (...) As soon as I meet someone at my job that says, 'but my son can interpret for me' I say 'never ever'. I just know what it's like to sit there on the other side of the table (Man, 25 years old)".

The above quotation is taken from a group interview with three young men with personal experience as child interpreters. The man expresses feelings of anger and loss of faith in Swedish society as a result of many years of brokering for his parents in different public service settings. Today he works in a public service agency where he is often confronted with the use of children as interpreters, and this evokes a range of bad memories and feelings.

The interview is one of seven group interviews conducted between 2017 and 2018 as part of a study on the use of children as interpreters in health care and social work. The study is based on two surveys distributed among staff working in private and public health care and social services in the areas of functional impairment and financial assistance in Sweden. The study was commissioned by the National Board of Health and Welfare, which wanted to investigate the situation of children used as interpreters in public service settings. No data or statistics on the occurrence of this kind of non-professional interpreting in Sweden have been compiled before. Questioning public service staff about their use of children as interpreters is a delicate task, since the 1986 legislation states that public services should use interpreters for both sign and spoken languages (Swedish Statute Book, SSB, 1986: 223). The law was updated in 2017:

When an authority makes contact with a person who does not have an adequate command of the Swedish language, the authority will use an interpreter and ensure that documents are translated in order that the person in question may fully exercise his or her rights. (SSB, 2017: 900 § 13).

Other Swedish laws, e.g. the Social Service Act (SSB, 2001: 453) and the Health Care Act (SSB, 1982: 763) state that patients and service users should take an active role in their own cases, and that, as far as is possible, care and treatment will be designed and conducted in consultation with the patient or service user with respect for the equal value of all human beings and the dignity of the individual. This indirectly creates an obligation to call for an interpreter when non-Swedish speakers are involved. Swedish legislation also emphasises the duty of the public authority to overcome the language barrier. In addition, it is the public service staff member, working on the front line in encounters with service users, who is given the right to an interpreter as a tool for making legally secure investigations, diagnoses and decisions about treatments or economical support. The legal rights of patients and service users are the legislators' concern (Gustafsson, Norström, & Fioretos, 2013).

A cohesive training programme for community interpreters in spoken languages has been governed and financed by the state since 2007, while translators and interpreters have been able to obtain official, licensed status since the mid-1970s. Furthermore, all Swedish public service institutions procure interpreting services. Their requests for tenders specify certain standards, e.g. that the service providers tendering for a contract must supply trained interpreters who adhere to specific ethical principles. Interpreting services in Sweden have many flaws, but they do provide public service staff with the support of interpreters with relevant linguistic knowledge, proven interpreting skills and adherence to specific ethical principles (Gustafsson, Norström & Fioretos 2012; Norström, Fioretos & Gustafsson 2012).

The aim of this article is to investigate experiences of using children as brokers instead of professional interpreters in public service settings, and the consequences of doing so. The concept *experience* refers to "already elapsed experience that is the object of analytical and abstract knowledge" (Frykman & Gilje, 2003: 15). In the article, we describe and analyse these experiences, and their consequences for the people involved, from two main perspectives: that of public service staff and that of adults used as brokers during their childhood. We also investigate the use of children as interpreters from a wider societal perspective, looking at the consequences for legal and human rights as well as different forms of discrimination. The

analysis is based on quantitative data from two surveys and qualitative data from group interviews. We use the concepts of brokering and interpreting to analyse the differences between using children and professional interpreters (c.f. Hale, 2007; Ozolins, 2014; Orellana, 2017; Weisskirch, 2017).

# 1 Previous research, concepts and theory

To provide a background for this article, we have selected research from the fields of social work and health care relating to both professional interpreting and other forms of translation and mediation in multilingual encounters between social workers, health care staff, and service users or patients (Cohen, Moran-Ellis, & Smaje, 1999; Chand, 2005; Gerrish, Chau, Sobowale, & Birks, 2004; Kale & Syed, 2010; Kriz & Skivenes, 2010; Lucas, 2015; Guntzviller, Jensen, & Carreno, 2017; Westlake & Jones, 2017). These studies identify and analyse a wide range of challenges in both social services and health care sectors. Staff view the use of professional interpreters as an obligation which they regularly disregard, due to an unsatisfactory availability of interpreters. Staff frequently find that interpreters have insufficient skills, and that access to professionally trained interpreters is difficult (Gerrish et al., 2004; Kriz & Skivenes, 2010; Westlake & Jones, 2017). Both social workers and health care staff also worry about using children to interpret, however. They argue that these situations place the children in a position of responsibility which exposes them to inappropriate mental stress (Chand, 2005). According to previous research, staff also believe that using children as interpreters undermines the possibility of an ideal childhood: children may become parentified, and the balance of power within the family may shift if children inhabit positions of power superior to those of their parents (c.f. Becker & Leu, 2014; Lucas, 2015). Both social workers and health care staff frequently notice that the presence of children during a consultation inhibits talk about sensitive subjects (Chand, 2005; Lucas, 2015). They also point out that they can neither rely on nor impose demands on children's skills (ibid.). There is agreement that children should not be used as interpreters when it comes to complicated or sensitive cases (c.f. Cohen et al., 1999). Yet despite these considerations, both social workers and health care staff defend the use of children. Lucas (2015) concludes that the social workers in her study construct arguments that legitimise this use in simple cases such as setting up dates for meetings and collecting preliminary information on first contact with the family.

A review of the literature on child language brokering (c.f. Orellana, 2003; Orellana, 2009, 2017; Orellana, Dorner, & Pulido, 2003; Weisskirch, 2017) reveals that the use of children as brokers is understood to be a normal phenomenon for migrant families. A main topic of discussion is the risk of overestimating children's abilities and underestimating their contribution to society (Angelelli, 2017; Antonini, 2017; Orellana, 2003; 2009; 2017; Orellana, Dorner, & Pulido, 2003; Weisskirch, 2017). There is also shared recognition that this kind of non-professional interpreting has until recently been overlooked in the field of interpreting and translation studies (Harris, 2017).

A reading of the previous research in the areas of social work and health care reveals the lack of a uniform terminology that frames the differences between professional interpreting, non-professional interpreting and language brokering (c.f. Antonini et al., 2017). To analyse the experiences of using children and relatives as interpreters in public service settings, and the consequences of doing so, it is useful to distinguish between the activities of professional interpreting and (informal) brokering. Adequate definitions of professional interpreting and brokering have been formulated based on current debates and discussions in the field of interpreting and translation studies. Hale (2007) proposes a definition of professional interpreting applicable in all institutions and situations where community interpreting takes place. Key characteristics are professional training, a code of ethics and payment. Hale's definition correlates with the definition of professional interpreting in the Swedish context, where the activity is clearly defined in the public service sector (Gustafsson et al., 2013).

The concept of language brokering, however, despite appearing frequently in research on multilingualism and children translating for their families, is less well defined among public service staff (Weisskirch, 2017). Kam, Guntzviller and Stahl (2017: 26) define language brokers as "individuals with little to no formal training who act as linguistic and cultural intermediaries for two or more parties, both from different cultural backgrounds".

Based on the previous research presented above, and for the purposes of this article, we define interpreting as what professional interpreters do when they interpret in a public service institution where requirements exist to safeguard legal and fair treatment for service users and public service staff. This establishes a clear distinction with language brokering. Another important difference between interpreting and brokering is the professional interpreter's exposure to and knowledge of professional ethics. The professional interpreter interprets for all parties in a meeting. Interpreters are assumed to master the relevant technical language as part of their profession. According to the literature on child language brokering, the same demands cannot be made of the informal broker (c.f. Antonini, 2017; Weisskirch, 2017). The language broker has no obligation to respect a code of ethics, and is also partial and loyal to his or her family.

#### 2 Methods

As stated in the abstract, this article is based on a project concerning the use of children instead of professional interpreters in social services and health centres. Both areas are bound by the legislation for all public services to use interpreters when service users or patients have limited knowledge of the Swedish language (SSB, 2017: 900 § 13). Social services fall under municipal law while health centres are subject to regional law, and different concepts are used within the respective areas (e.g. service user – patient). The study was conducted using a combination of quantitative and qualitative methods which included two online surveys and seven group interviews.

## 2.1 Online surveys

The purpose of the surveys was to gather data on how public service staff solve problems of communication with non-Swedish-speaking service users. We used a Norwegian study on interpretation in the social welfare sector as a model (Integrerings – och mangfoldsdirektoratet, 2011). A pilot of the survey was sent to ten persons working within the targeted fields. The final surveys consisted of 14 questions each, and were divided into three sections:

- 1. Background information regarding the respondent's field of work and degree of contact with service users;
- 2. How the respondent acts in order to communicate in planned and unplanned meetings with non-Swedish-speaking service users, and why they choose to act in that specific way (using children or other relatives were two of the alternatives);
- 3. The respondent's knowledge of using professional interpreters, their degree of experience and further training, and how a request for an interpreter is initiated in the workplace.

A random selection of 29 municipalities was made from three geographically dispersed Swedish regions, representing 50 per cent of the municipalities in those regions. All 29 municipalities have social services, 23 have public health services and 12 have private health services. To obtain the email addresses of staff within the targeted services, we contacted their managers for assistance. We were not able to reach them all, and some declined to participate (see next paragraph).

The first online survey was directed to social workers in the areas of financial assistance and Support and Service for Persons with Certain Functional Impairments (hereafter "functional impairments").<sup>3</sup> It was sent to a total of 317 social workers in financial assistance (in 24 municipalities) and functional impairments (in 25 municipalities). A total of 171 social workers took part in the survey (response rate: 54%), including 115 from financial assistance and 56 from functional impairments. The second online survey was directed to health care staff working in primary care health centres, both public and private. It was sent to a total of 337 health care staff. A total of 140 health care staff members took part in the survey (response rate: 42%), with 105 from public centres in 12 municipalities and 35 from private centres in six municipalities. When viewing

<sup>1</sup> Hereafter *patient* will be included in the concept *service user*.

<sup>2</sup> Sweden has 290 municipalities and 20 regions. The three selected regions are from northern, central and southern Sweden.

<sup>3</sup> Social workers in financial assistance mainly handle applications for financial aid, whereas social workers in functional impairments handle applications for different kinds of support for persons with long-term functional disabilities. Both are regulated by Swedish law.

the survey results in this article, it is important to take into account the dropout of participants, both among participating municipalities as well as among respondents to the surveys.

The survey results presented in this article were analysed using cross tabulations in SPSS. Chi-square, Phi and Cramer's V tests were used to estimate statistical significance and correlation. Because of the quite substantial non-response rate in this part of the study, it is important to bear in mind that the results should not be used to generalise to a larger population. Notwithstanding, the results, from a total of 311 respondents, are an indication of the extent to which children and other relatives are used instead of professional interpreters in social services and health centres in Sweden.

## 2.2 Group interviews

To obtain a deeper understanding and increase the reliability of the survey results, the quantitative material was supplemented with qualitative material from seven group interviews. Three of these were conducted with staff in the targeted social services areas and two in health care. Each group included three to six participants. Besides these five interviews were two group interviews conducted with persons with their own experience of brokering, both when they were children and as adults. The first group consisted of five persons who migrated to Sweden during the 1970s and the second of three persons migrating in the late 1990s and 2010s. Notes taken during the interviews were subsequently collated. In the five group interviews with staff from social services and healthcare, participants were invited to share their experiences of using children as brokers. This was followed by discussion about why they had done so, and what they thought about it. The two group interviews with persons who had acted as brokers during their childhood followed the same procedure.

The participants of all the groups discussed the questions freely, and accepted, rejected or supplemented each other's narratives during ongoing discussion. We used an argumentation analysis to organise the material collected (Bergström & Boréus, 2012). Arguments for and against using children instead of interpreters were coded manually into two themes: "for" and "against". Hence, we have clustered rather than quantified the answers. Group members were not split between "for" or "against", but tended to agree on their co-existence. The arguments discussed should not be viewed as legitimate reasons for using children, but as examples of how staff members justify their need to sometimes allow children to act as interpreters. The group interviews with the individuals with personal experience of language brokering were analysed in a similar way, with a focus on positive and negative experiences. Comments on the practice of using children for interpreting were added by the participants in these groups and considered during the process of analysis.

#### 3 Results

#### 3.1 Results from the online surveys

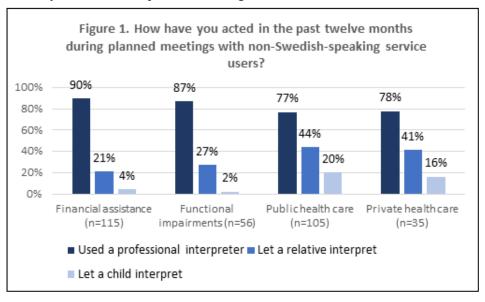
In this section, we present the results of the online surveys regarding how the respondents address communication with non-Swedish speaking service users, and why they sometimes use children or other relatives instead of professional interpreters. The results show that all of the respondents come into contact with non-Swedish speaking service users, which means they must solve the communication issue in the course of their work. Two questions in the surveys addressed how respondents communicated with non-Swedish speaking service users, distinguishing between planned and unplanned meetings. A meeting is planned when an appointment has been booked in advance. An unplanned meeting occurs when the service user seeks out the service provider without a prior appointment. The questions were constructed so that respondents could choose multiple answers. The list of possible answers is shown below:

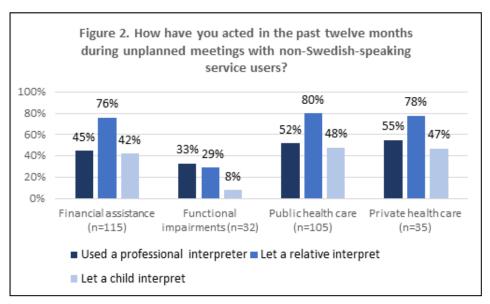
- (a) used a professional interpreter;
- (b) allowed a relative to interpret;
- (c) allowed a child to interpret;
- (d) asked a colleague to interpret;
- (e) used your own language skills;

- (f) tried to make the best of the situation without anyone interpreting;
- (g) booked a new meeting with a professional interpreter;
- (h) other.

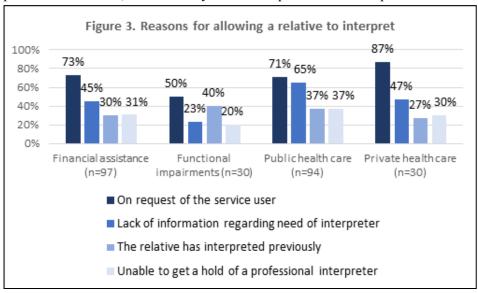
Figures 1 and 2 show the percentages of respondents choosing the first three answers for each respondent group. These options are relevant to highlight how common it is, on the one hand, to use a professional interpreter and, on the other hand, to let a relative or a child interpret during unplanned and planned meetings. Since it was possible to choose more than one answer, the total percentage for each respondent group is more than 100 per cent.

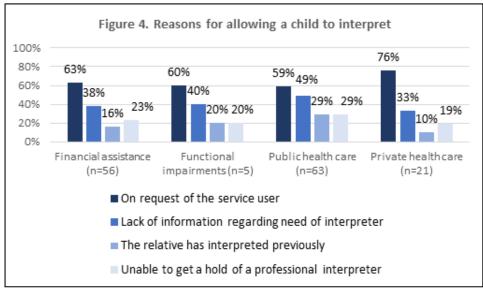
For planned meetings, the most frequent answer overall was to use a professional interpreter (78-90%). However, allowing a relative to interpret was still a common occurrence (21-44%). Allowing a child to interpret during a planned meeting seemed to be less common (2-20%). However, when the meeting was unplanned, a relative (29-80%) or a child (8-48%) was frequently allowed to interpret. The option of using a professional interpreter for unplanned meetings was chosen by 33-55 per cent of the respondents. Overall, adult relatives were used as interpreters more frequently than children (p=0.001). The "functional impairments" area stands out among the results in that the percentages are almost identical for both planned and unplanned meetings. This is presumed to be because 57 per cent of the respondents in the group stated that they do not have unplanned meetings.





The respondents were also asked under what circumstances they would sometimes allow children or other relatives to interpret. Figures 3 and 4 below present the percentages for the four most frequent answers from each group of respondents. Since it was possible to choose more than one option, the total percentage for each respondent group is more than 100 per cent. The most frequent answer overall is that they allowed the relative (50-87%) or child (59-76%) to interpret because the service user requested it. The other most common answers were "lack of information regarding need for interpreter", "the relative has interpreted on previous occasions", and "inability to obtain a professional interpreter".





As already stated, all respondents meet non-Swedish-speaking service users in their work, which means they have no choice but to overcome the language barrier. This is mostly achieved by using a professional interpreter. When no professional interpreter is available, for whatever reason, the respondents present other means of communication. One solution, generally used during unplanned meetings, is to allow a child or a relative to try to interpret. However, the most frequent reason (50-87%) for allowing children or other relatives to interpret is that the respondents perceived this to be the service user's wish. Another reason is that the child or relative has acted as an interpreter on previous occasions (see figures 3 and 4), which indicates that this is something that occurs with some regularity, not just occasionally. It is also commonplace to allow adult relatives to act as interpreters, even during planned meetings (21-44%). Overall, in all the target groups, adult relatives were used more frequently than children to solve communication problems during both planned and unplanned meetings (p=0.001).

### 3.2 Results from the group interviews with public service staff

This section will illustrate the results of the group interviews with public service staff, beginning by explaining why children are used as brokers and continuing with an account of why public service staff consider it inappropriate to use children and relatives as interpreters.

As the interviews show, public service staff related the difficulties of obtaining a professional interpreter within a reasonable time for unplanned meetings and emergency situations. Instead of waiting for an interpreter to arrive, they sometimes allowed an accompanying child or relative to interpret in immediate and simple situations, e.g. when booking an appointment or to submit or read forms. Public service staff sometimes found it disrespectful to call for a professional interpreter when the service user had brought someone with them to interpret, and also expressed unease at calling for a professional interpreter when service users claim not to trust interpreters and say they feel safer when a relative interprets. This is in line with the general opinion among staff that existing interpreter services are insufficient:

It is my experience that information is incorrectly interpreted, even when an interpreter is involved. Complicated technical language is generally used and must be explained. (...) It is often very unclear whether the information has been received. (Medical doctor, 60 years old)

As for arguments against allowing a child or relative to interpret, the interviewed staff sense that this is not always appropriate. Especially when it comes to children, they find it inappropriate to impose such responsibilities on a child and that allowing them to act as interpreters places them in an unnatural position of power in their families likely to compromise the parent-child relationship and the family hierarchy. The presence of a child or a relative can also inhibit the conversation, as the service user may not wish to reveal specific sensitive information in front of them. Staff believe there are some things a child should not have to know about, such as their parents' private lives, health issues or financial situation. Finally, there is also the question of language skills. Children do not have the same knowledge of language or specific terminology as a professional interpreter and therefore lack the skills for the task.

As with the results of the online surveys, the common understanding among the interviewed staff seemed to be that children mainly act as brokers during unplanned meetings and emergency situations, and that these situations are occasional occurrences. Adult relatives are used to interpret more frequently than children. One reason for this is that service users sometimes ask another adult to interpret for them. Another reason is that the interviewees considered it inappropriate to impose such responsibilities on children, yet were not reluctant to do so with adults. Children were sometimes used instead of professional interpreters, however.

#### 3.3 Results from the group interviews with children

I had a tough task interpreting and reading, even marketing mail. Sometimes I got angry. I came home from school to find lots of marketing mail, and I had to read every word. When you don't know Swedish, it's hard to sort out what's important (man, 20 years old).

Interviewees with personal experience of language brokering describe how they, mainly as children, had to act as brokers, both speaking and in writing, in a wide variety of contexts that far exceeded emergency or unplanned meetings with public institutions. The language brokering was in fact executed in three areas: everyday interpreting, form translation (including all written material) and interpreting in public service settings.

The interviewees describe how brokering improved their language development and ability to communicate with authorities. As a result, their social capital and knowledge about society increased. It also facilitated their entry into the labour market. They described how their power as brokers made them feel that they were able to influence important decisions, sometimes by translating in favour of what they believed to be the best outcome. As brokers they also gained praise and respect from adults, and this was a driving force when accepting an assignment. In retrospect, they believed they matured with the responsibility and were proud to perform as language brokers.

On the negative side, the interviewees said that, as brokers, they were sometimes coerced into taking responsibility in excessively serious and intimate situations concerning, for example, mental health, private

economy, criminal acts, childbirth, etc. This meant being obliged to bear the trust of others and instinctively take on confidentiality, without getting support to handle difficult experiences. Their limited language skills, both in Swedish and in their native languages, often caused them to feel anxious and guilty for eventual translation errors. Furthermore, taking on the role of broker obliges a child to enter the adult world, from which there is no return to the world of a child, and leads to hierarchy reversal in the family. The interviewees regretted how their parents' roles were affected by their brokering and how they became aware of their parents' human inadequacies far too early. The question that remains unanswered is why no public service officer questioned the children's role as brokers, in clear disregard of the children's rights and their parents' legal right to equal and safe treatment. In retrospect, the interviewees reflected that accepting the brokering role may have inhibited other family members, especially parents, from developing their own language skills and fully integrating into the majority society. They also reflected on how the role has become a lifelong ongoing commitment. At the same time, they realised they have rendered an invaluable service to their families.

In contrast to the staff's description, the interviewees with personal experience of language brokering testified that their brokering was never restricted to emergency and unplanned situations, but that they were called on to broker in a variety of different situations. They describe how the broker role became a full-time job that deeply affected their childhood.

## 4 Analysis and discussion

A significant result of the survey and group interviews is that there are discrepancies between public service staff's description of their use of children for interpreting and how adults with experience of language brokering as children describe that experience. From the perspective of the staff, using children is defined as a necessary evil, something that occurs only in simple cases, emergency situations and unscheduled meetings, or when the service user prefers a relative as broker or no interpreters are available. It is also perceived as an act of respect to take the wish of the parents seriously if they prefer to have their children interpret for them. Staff claimed that children were rarely allowed to language broker at sensitive or complicated consultations and reported that children only acted as brokers on sporadic occasions. These results are in line with previous studies conducted within the area of interpreting in social work and health care (Cohen et al., 1999; Chand, 2005; Gerrish et al., 2004; Kale & Syed, 2010; Kriz & Skivenes, 2010; Lucas, 2015; Guntzviller et al., 2017; Westlake & Jones, 2017).

From the perspective of adults with experiences of language brokering as children, the reality is defined somewhat differently. In both group interviews, the broker role was described as a continual part of their childhood, and even as a full-time job. Brokering took place in everyday situations as well as at very difficult consultations, in conversations about family finances, social conditions and much more. As children, they came home after school to piles of official and non-official mail that they had to read and translate. At school, they worried about how their parents managed encounters with authorities and everyday situations. As brokers, they worried about making mistakes. Although they interpreted regularly, on a daily basis, no one ever questioned their presence or asked for their consent or about their experiences. This, too, is in line with previous research (Orellana, 2003; Orellana et al., 2003; Orellana, 2009; Weisskirch, 2017). Although contradictory, both staff and children's perspectives are relevant and describe the reality of those who participated in the surveys and group interviews as they perceived it. The discrepancy can be explained by the fact that parents and relatives of the brokering children often have encounters with different public service institutions several times a week. When staff in their practice legitimise the use of children by claiming that it only occurs in simple, emergency or isolated cases, they might not realise that it can be a full-time job from the perspective of the child.

A further discrepancy is found between staff's understanding of the obligation to use professional interpreters and what they allowed in practice. In both surveys and group interviews, staff indicated that they should use professional interpreters as a guiding principle. They presume professional interpreters to be trained, have special language skills and follow a code of ethics.<sup>4</sup> At the same time, they express distrust towards

<sup>4</sup> The authorities procure interpreting services and require these services to supply trained interpreters.

interpreting services, claiming that they often find the interpreting conducted by children and relatives to be more reliable and competent than that of professional interpreters. Respondents did not make any connection with the value of the professional interpreter's code of ethics and principles of accuracy, impartiality, etc., in the survey. When asked about this in the group interviews, staff responded in two different ways: either that they hadn't thought about it, or that they preferred a trusted person, even if uneducated, to an unskilled interpreter. From a broader perspective, both these discrepancies could lead to discrimination and violation of legal security and human rights.

As described above, we use a definition of interpreting that assumes an ethical code and access to professional training in order to ensure that staff have the tools they need to act according to their responsibilities and ensure the rights of the service user (c.f. Hale, 2007). When defining language broker, we refer to the role adopted by some family members and persons in a family or group to support communication in multilingual settings (Antonini, 2017; Orellana, 2017; Weisskirch, 2017). A language broker cannot be expected to have any of the qualifications of a professional interpreter. This means that public service staff cannot be sure of what is being communicated. They therefore cannot be sure if the outcome of the consultation is correct, and certainly cannot confirm adherence to any code of ethics. A language broker is, in most cases, rather a kind of advocate for the family, as was very clear from the group interviews. From the rights perspective, when a broker is allowed to interpret, control, as well as legal and medical security, is lost, potentially resulting in an increased risk of misdiagnosis and incorrect decision-making.

This in turn affects both public service staff, and the children and their families. In meetings with public services, if parents become dependent on their children, the situation can be defined as structural discrimination, since they do not have the opportunity to express themselves fully and equally, and they are regularly exposed to unnecessary risks (c.f. Gerrish et al., 2004). Kriz and Skivenes (2010) found similar problems in child care social work in the UK and Norway. They show that it is difficult for migrant families who do not speak the majority language to obtain the support and help they are entitled to. One reason is that the language barrier makes social workers uncomfortable and keeps communication at a minimum. The normally important trust-building process, seen by social workers as a significant element of their work, is neglected in their work with immigrant families.

Negative experiences lead social workers to express distrust in interpreting services. Kriz and Skivenes (2010) define such situations for migrant families as unintended discrimination. Since they are repeated on a regular basis, they could also be labelled a form of structural discrimination. The risk of discrimination is also studied by Chand (2005), whose critical review of previous research about the problem of language barriers in the UK revealed that prejudice and racist stereotypes were not uncommon among public service staff, and that feelings of discrimination were strengthened when service users were met with prejudice due to their lack of English proficiency.

Allowing child brokering may also be analysed as child discrimination. Numerous brokering assignments mean that children are often obliged to miss school and take on age-inappropriate responsibilities instead. Although there are also positive feelings and memories, the negative sides of child brokering far outweigh the positive. The interviewees stated that acting as language brokers caused them to lose their childhood and their innocence. They also indicated that their trust in society was adversely affected.

Another approach to the issue of child brokering is to assume that it is normal in migrant families for all members of the family to help (Orellana 2017; Weisskirch, 2017). In our own research, we have identified a clear risk of parents being blamed in connection with brokering (c.f. Lee & Corella, 2017). Parents are considered to be failing their children because they require something from them which the surrounding community perceives as wrong. As Weisskirch (2017) and Orellana (2017) suggest, a more nuanced approach to language mediation could be beneficial. Weisskirch (2017: 303) argues:

Given that immigration is a non-normative and generally unplanned experience for most families, it may make sense for the family to redistribute roles to adapt to the new environment. Language brokering may then be a key process for adaption, which, when acknowledged within the family, may have more positive outcomes. When families engage in language brokering, it may be how an immigrant family maintains a

sense of coherence and hope, which is necessary for family resilience.

The concepts of interpreting and brokering reveal the difference between professional and amateur interpreting, or brokering for one's family. An interpreter is trained to mediate and convey messages accurately, while a broker advocates for his or her family. We see professional interpreters as tools for legal and medical security. A professional interpreter makes it possible for the parties to conduct a conversation in which they can express themselves fully. In addition to increasing safety, the risk of discrimination and blaming is minimised.

Using the two concepts makes it clearer that brokering is a normal part of the migration process and must be understood as one of the integrating family's strategies in the new society. However, brokering does not belong in public service institutions. Current legislation in Sweden makes it clear that the service provider is obliged to call for a professional interpreter when the service user does not have command of the Swedish language. This is to ensure that service users and patients receive equal treatment and that their legal and medical rights are met, as well as to protect the rights of the public service officer.

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