COUNSELLING THROUGH INTERPRETATION:
THE MEANING OF THE COLLABORATIVE INTERPRETER'S
EXPERIENCE OF RE-CREATING THERAPEUTIC INTENT
ACROSS LANGUAGES AND CULTURES

by

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ABSTRACT

Few studies concerning the appropriate use of interpreters in counselling exist despite the changing demographics in Canada that indicate the likelihood of an increased need for this service (Health Canada, 2001). It has been suggested that in order to fully develop standards of practice in this area, the neglected perspective of the interpreter must be included (Granger & Baker, 2002). The intent of the present research was to address this absence by inquiring into the experience of the collaborative interpreter. This role is arguably the most complex, requiring the interpreter to provide language and cultural access as well as engage in the therapeutic process. Four collaborative interpreters from three different cultural and language groups were interviewed. Each had received basic training in a constructivist therapy modality, and worked for at least seven years with a dominant-culture, English-speaking therapist in a community-based counselling program for immigrants and refugees. A hermeneutical phenomenological method was used to generate a description of the common meaning structures of the collaborative interpreter’s experience. The advantage of this method was that it could address the multiple cultural contexts and multiple languages involved in this study, and still be sensitive to the lifeworld of the collaborative interpreter. As an interpretive inquiry, the results produced descriptions of three meta-themes. These themes illuminate the essential meaning of the collaborative interpreter’s contextualized experience of a relational self. They include the collective self, which is an understanding of self as “we” distributed among the relationships formed by the counselling triad; the distinct self, which describes the heightened awareness and reconciliation of self as “other” in the triad; and the merged self, which describes the experience of self as the instrument of a functional alliance. Implications for interpreter use in multicultural counselling are discussed.
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1 INTRODUCTION

In late summer of 1995, I started work as the family counsellor for Surrey Delta Immigrant Services Society (SDISS). At the time I understood that I was to provide counselling for immigrants and refugees representing nine different language groups through the aid of interpreters. I was keen to begin because my graduate work had focused on cross-cultural counselling and I felt lucky to have secured the rare chance to be so deeply and exclusively involved in counselling a multicultural client base. However, I soon realized that I had entered an experience of counselling far beyond what I had expected. My knowledge and senses were continually challenged by a process that was compelling and mysterious, complex and transformative. I spent seven years working in that agency and it was an experience that fundamentally changed my counselling theory and practice, and remains influential to this day.

During my time there as the family counsellor and later as the clinical supervisor, I developed a deep curiosity about what was happening in those sessions, particularly about what was happening for the interpreter even more than the client. I realized that both the client and I were reliant upon the skill and inventiveness of a single person, one who knew both worlds and who could connect us to each other. I wanted to know what that experience would be like because it was hidden, relatively unique, and likely quite relevant to the efficacy of the counselling itself.

From the first session, I had a sense of myself “dancing as fast as I could” to reconfigure what I thought would be helpful into something conducive to the client’s culture and language. I also felt rather nonplussed when I could not understand what my client was saying, or what the interpreter was saying in place of my voice. In this program, the interpreter’s role was collaborative, providing cultural consultation along with verbal access. So, often the discussion between the interpreter and the client would go on for some time while the interpreter explained my intent, modified my questions, and consulted with the client. Of course the interpreter
consulted with me as well, in English, leaving the client temporarily out of the conversation. But somehow trust evolved among all of us and the goal of helping the client occurred. Once I was somewhat used to my experience of the process, I became fascinated with the interpreters’ experience and wondered how they transformed therapeutic content and intent, how they could merge two cultures along with individual lived experience and create a meeting ground for meaningful therapy. It seemed to me that they were doing something few others could do and I began to research not only the context from which such a program evolved, but also the employment and roles of other interpreters in mental health programs. What I found was a sparsely implemented, ad hoc use of interpreters for mental health services except in medical settings where their role was professionalized and objective. Once I realized that the use of interpreters in mental health settings was barely investigated, it became even more important to me to capture, if I could, some sense of what was actually happening in the interpreters’ process of helping me to more effectively help our clients. So I will begin, as I did then, by looking at the context from which the counselling program at SDISS evolved.

The program at SDISS was unique in British Columbia and, perhaps, Canada. I say “perhaps” because I and other colleagues presented our model of counselling at a variety of local and national conferences during those years where it was received with both surprise and interest, and the literature had not documented anything similar. The model was called the Multiple Partnership Model (MPM) and it was devised in 1992 by two local family therapists, Mary Kean and Arden Henley (1996), in consultation with the settlement\textsuperscript{1} team at SDISS (c.f., Grant, Henley & Kean, 2001). The idea came from the fact that because of their language skills and cultural similarity, the settlement counsellors found themselves increasingly asked to deal with the emotional difficulties of their clients. Their concerns were that their training was

\textsuperscript{1} Immigration Canada and the provinces fund non-profit settlement and immigration agencies to provide assistance to newcomers regarding orientation and linkage to Canada’s social network. Those hired to do this work are called settlement counsellors and they come from the same cultural and language groups as the clients they serve.
insufficient to adequately address this need, they had nowhere to refer clients who were not fluent in English or French, and they had no professional support to supervise their work.

This situation was more than a local concern. In 1988 a federal report from the Ministry of Supply and Services emphasized the national reality that immigrant and refugee families were not accessing mental health and social services because of cultural and language barriers. Canada was in the midst of an immigration boom with a huge increase in the number of newcomers coming from countries in Asia and the Middle East (Statistics Canada, 2006). Since that time the tendency for newcomers to have a mother tongue other than English or French has continued. In fact the share of the allophone\(^2\) population has grown from 17% in 2001 to 20% in 2006 (StatsCan). Presently, six million Canadians report that neither English nor French is their mother tongue and over half a million people, located largely in Ontario and British Columbia, do not speak either English or French\(^3\). Health Canada (1999, 2000, 2001) has consistently identified the barriers to equitable care for language and cultural minorities as resulting from lack of fluency, differences in health beliefs, and being a member of a visible minority. Along with these obstacles, this research has also identified difficulties caused by providers' lack of cultural competency, ethnocentrism, and racism (Health Canada, 2001). While Health Canada is concerned with every aspect of health care, these reports emphasize that the greatest area of need lies in mental health services.

There has been a traditional reliance by mainstream services on settlement and immigration workers to provide access to health care because of the availability of language and cultural interpretation (Health Canada, 2001). The result is that when a person from a language or cultural minority presents with mental health concerns and/or addictions, they are routinely referred back to a settlement agency. This practice represents a type of two-tiered access, where

\(^2\) Canadian use of the term "allophone" refers to a person whose native language is other than English or French. (American Heritage Dictionary).

\(^3\) Mother tongue statistics include aboriginal populations, with slightly over 100,000 reporting.
people fluent in either English or French receive specialized services and those who are not fluent receive paraprofessional service often from untrained staff or volunteers (Health Canada). Attempts to address this problem have resulted in the development of professional interpretation services (e.g., BC Provincial Health Services Authority)\(^4\). However, all interpretation services remain the financial responsibility of the client, and there are many jurisdictions in Canada without any such service. As well, the problem of standardizing the roles, training, and implementation of interpreters\(^5\) persists (Health Canada). Depending on the program or service, interpreters can be a professional, a family member, or a staff member, and can vary greatly in their own English language fluency. Their role can be as a neutral, verbatim interpreter, a cultural consultant, an advocate, or an educator, all of which affect the quality of care. Attempts to increase the number of language specific professionals are ongoing but, in truth, largely not feasible because of the plethora and distribution of small, language specific communities across Canada (Health Canada).

It was in the midst of these concerns that the MPM was launched. The model was based on the idea of a co-counselling relationship between the dominant culture, professional counsellor and the culturally specific, settlement counsellor. The goal was to create a bridge between western and non-western expertise as well as to provide multiple language access to mental health services without requiring new monies or the creation of parallel mental health services for each language group. Within the MPM, settlement counsellors took the role of cultural and language consultants and were all similarly trained in family support and counselling skills based on the principles of narrative therapy.

\(^4\) The BC Provincial Health Services Authority provides professional health care interpretation and translation services, but is limited to PHSAs membership (c.f., www.phsa.ca/AgenciesServices/Services/pls.htm)

\(^5\) Distinction is usually made between the terms “translator” and “interpreter” based on the interpersonal function of the language provider. That is, “translator” often refers to the person who produces text in another language, while “interpreter” is commonly used to refer to the one who facilitates personal communications between parties.
This theoretical approach was used because it can address power and privilege issues in the therapeutic relationship and in ideas and practices, issues which can be accentuated when a person of a non-dominant culture engages in contexts that are defined and controlled by the dominant culture (Grant, Henley & Kean, 2001). Narrative therapy also sees the client’s problem as situated in the context, not in the individual. By doing so, this perspective allows for recognition of the linguistic, social, and historical influences at work in the identification and remediation of therapeutic issues (Waldegrave, 1998; White & Epston, 1990). Counsellors listen for a client’s interpretations of experience, or their “stories,” with a view of those stories as culturally mediated, relationally interactive, and changeable. Collaboration occurs between counsellor and client as they both explore the multiple ways an experience can be interpreted depending on contextual influences. The therapeutic conversation can then bring about an alternate version to the dominant, “problem saturated” account. When used in a multicultural context, narrative therapy can support change that arises from the person’s or the family’s own interpretations, and reduce the risk of the therapist imposing a perspective based on cultural biases.

The MPM was designed to provide a wide range of cultural consultation opportunities by offering the client three ways to access help: 1) Seeing the settlement counsellor alone, with the settlement counsellor receiving support and consultation from the dominant culture counsellor outside of the sessions, 2) Seeing the dominant culture counsellor alone (depending on the client’s fluency in English), with the dominant culture counsellor receiving support and consultation from the settlement counsellor outside of sessions, or 3) In more serious situations, a joint session or sessions with both the dominant culture and the settlement counsellor present. In this latter situation, the settlement counsellor functioned as a language and cultural interpreter as well as co-counsellor. Because of their collaborative function in the process of counselling, and
because of their training, I will refer to them from now on in this research as collaborative interpreters and not settlement counsellors.

Calls by government sources for more research on the use of interpreters in health care settings have been made since the 1980’s. The reason for the continued emphasis is that lack of fluency and cultural difference consistently result in clients remaining isolated, being wrongly diagnosed and improperly treated, and being vulnerable to breeches of confidentiality (c.f., Ministry of Supply & Services, 1988; Health Canada, 1999 & 2001). Unfortunately, there is still a deficit in research regarding the use of health care interpreters, no matter what role they take. Gaps in knowledge include a lack of definition concerning the most efficacious role for an interpreter involved in a session, the type of training required for an interpreter to be effective in this role, and the potential effect of engaging an interpreter in the therapeutic relationship. While most disciplines in psychology, psychotherapy, and other helping professions have made some attempts to study the function and training of interpreters, the focus has been on paraprofessional use (eg. Miller, Martell, Pazdirek et al., 2005; Muner-Granski & Carrillo, 1997). Even counselling psychology has astonishingly little to say on the subject. Reference is made occasionally to the possibility of using an interpreter (e.g., Atkinson, Morten & Sue, 1998; Pine, Cervantes, Cheung et al., 1990), but remains cautionary without providing consensus and is limited to focusing on the clinician’s experience. Other issues addressed by counselling psychology literature are those regarding lexicon and content difficulties, such as the inherent problems with interpreting culture-bound concepts and dealing with culturally prohibitive topics (Atkinson et al.).

Social work literature has also offered recommendations for the dominant culture social worker who must use an interpreter and specifically recommends allocating the dominant culture social worker to the primary helper role. Baker (1981), who arguably was first with his
discussion, distinguishes what he calls the “Ideal Interpreting Style” as one in which the social worker and the interpreter become a “team”; however, the interpreter’s role in this “team” is to “convey the personal style of the social worker, modified rather than supplanted by his or her own style” (p. 393). To accomplish being a seamless support to the social worker, Baker explains, the interpreter must have a working knowledge of social work procedures and goals, but not use it to override the intent of the social worker. Instead, the interpreter uses the knowledge to enhance the social worker’s skills by becoming a “cultural bridge.” So, the emphasis is on making the culturally different client understand and accept western-based interventions, not on incorporating different modes of helping. Freed (1988) also argues for the interpreter taking the support position, but further objectifies this role by insisting that the interpreter become a neutral “conduit,” devoid of personal perspective.

A decade later, Pérez Foster (1998), coming from a therapy perspective, emphasized the “absolute primacy of the patient-therapist dyad” with the interpreter functioning purely as a “fairly technical vehicle or adjunct to the clinical situation” (p. 133). This literature, then, seems to presume that the act of listening to and relating therapeutic intent in another language can and should be largely an objective and/or adaptive one to enhance dominant culture goals. No acknowledgment is made of the potential helpfulness of the interpreter to the client. In fact, one could say that this view of an interpreter’s role assumes that what will be most helpful to the client is that which will alleviate what is most problematic for the dominant culture clinician.

Finally, there is simply no research on mental health programs that use interpreters who have standardized training. The problem, as identified by Health Canada (2001), is that program models and interpreter functions differ widely, which creates difficulties in designing valid research or program evaluations. As a result the “major limitation of much of the research
undertaken to date is that the proficiency level or role of the interpreter is rarely considered and/or controlled in the research design” (Part II, pg 17).

1.1 The research problem

Even though it has been several years since I stopped working in this area, I have remained curious about what all of us involved in the MPM were really doing. Since there is a distinct gap in available research, it seemed important to capture what can be known about the collaborative interpreter’s experience because it was at the heart of the process: they all functioned as the singular person in the session who could link the client and the dominant culture counsellor in thought and emotion, build consensus and understanding about best practice solutions, and establish trust among all present. The other opportunity the MPM afforded was that all the collaborative interpreters were professionally trained medical and legal interpreters, which meant their level of fluency was standardized, and all had taken the same counselling skills training.

One of my questions, then, concerned the collaborative interpreter’s experience of constructing a therapeutic relationship with the dominant culture counsellor and with the client. Even though the MPM supported an egalitarian relationship among the counsellor, collaborative interpreter, and client, there was still a dominant discourse present about the “professionalism” of western psychology. The collaborative interpreters were, after all, schooled in a western modality, the purpose of which was to aid in the successful, and less culturally biased, adaptation of helping strategies. Even the funding for the program was predicated on the fact that a western-trained, professional counsellor was acting as the “primary” counselling resource. Considering these underlying assumptions, how did the collaborative interpreter experience her role? Did she experience herself as being equal, being the leader, or being subordinate? What kind of pull

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6 By chance, all of the collaborative interpreters in this setting were female.
might there be towards cultural allegiance? Where did she find her own sense of self-efficacy? What impact did this dynamic have on counselling efficacy?

Another question that still lingered dealt with their experience of having to linguistically and culturally modify western therapeutic strategies. A few years ago, I explored the possibility that predicking the therapy on English language constructs might have an effect on the collaborative process. Coming from a predominantly western perspective, most of the current literature addressing counselling through interpretation seems to presume English as the language being translated without questioning the potential influence it may have as the dominant culture language. In an attempt to address this question, and to inform this research, I performed a pilot study in which I interviewed interpreters from three language groups (Grant, 2003).

The results of the study demonstrated the possibility that offering a session in English through verbatim interpretation has the potential to recreate dominant power structures in both the therapeutic relationship and therapeutic intent. As well, the efficacy of a session offered through interpretation seems to be affected by the relationship between the western therapist and the interpreter, in that it requires a respectful collaboration of languages and minds. For example, I asked each of the interpreters to tell me what they would have to consider if they had to provide a verbatim interpretation of the “Miracle Question” (de Shazer, 1994). This intervention is used in constructivist therapies to separate the “problem saturated story” from other possible solutions. It involves asking the client to imagine waking up and discovering that a miracle had occurred and the problem had been solved. The therapist then asks, “How would you know that this miracle had occurred?” The intent is that the client will imagine a context which is problem free and can, therefore, distinguish contextual influences that are maintaining the current difficulty. When answering my request, the interpreters were infused with laughter. They all
concluded that the Miracle Question wouldn't work for their clients because of different cultural perspectives, different religious views, collectivist values, and views on fate, for example. They also said they would take it upon themselves to modify it rather than deliver it word-for-word, without necessarily informing the western therapist (Grant, 2003). However they all agreed that if they felt a high degree of trust in the western therapist, they would discuss the limitations of the intervention before unilaterally changing it. Finally, the pilot study also seemed to indicate that the efficacy of a session through interpretation is also affected by the relationship the interpreter and the client have with English itself. Specifically, the English language can represent western power and privilege just by being used in a session with a client whose first language is not English.

In the current research I broadened the scope of the research question to include the collaborative interpreters' total experience of working with western interventions. I was equally curious about their means of verbally interpreting concepts that have no equivalent in another lexicon, their thoughts about the efficacy of western therapy, and their experience of relating culture-bound concepts from the client. My interest in the collaborative interpreter's experience of the therapeutic relationship and managing language differences constituted part of a greater, perhaps more amorphous question: What was their deepest understanding of themselves in this role? Did their experience dwell more in a dislocated self, one which became the conduit for two primary figures to meet across languages and cultures? Or was their lived experience of a more integrated and integral self? Did they experience themselves as the consultant and the broker of creative and respectful adaptations of therapy?

1.2 The research question

To summarize, the purpose of this research was to explore the experience of the collaborative interpreter who acts as a co-counsellor as well as a linguistic and cultural bridge for
a dominant culture, English speaking therapist. The reason such exploration is necessary is three fold: 1) the provision of interpreter services for mental health providers is being done on an ad hoc basis without definitive recommendations for practice, 2) the use of interpreters in therapy has been predominantly examined from the perspective of the English speaking, dominant culture counsellor, and, therefore, 3) the impact on praxis is unknown.

The research question I propose, then, is, "What is the meaning of the collaborative interpreter’s lived experience of re-creating therapeutic intent across languages and cultures when working with dominant culture, English-speaking counsellor?" It was thought that this exploration of the collaborative interpreter’s experience had the potential to create a myriad of emergent questions and possibilities. Therefore, I took a hermeneutical phenomenological approach because it can address the lived experience of the collaborative interpreter, address the interpretive act of meaning-making (for both the participant’s and researcher’s lived experience), and incorporate reflection on the qualities of language so embedded in the question (van Manen, 1990).

Specifically, the advantage of a phenomenological approach to this multicultural counselling research is that it allows the exploration of the “life world” of the collaborative interpreters as lived and understood themselves (Polyzois, 1985). It is their perspective (conscious awareness) that is brought forth in contrast to extant portrayals from the location of the external observer. As an exploration of individual lived experience, the phenomenological approach can incorporate the multilingual, multicultural, multilayered awareness of each participant as it is meaningful for her or him. The hermeneutic approach to the phenomenological study also incorporates the pre-understandings (researcher bias) as a necessary ingredient “in evolving an understanding of the phenomenon under study” (Polyzois, p. 53). Finally, the hermeneutical approach parallels the collaborative interpreter’s process of interpretation, action, revision, and
reinterpretation. By using the hermeneutic circle I hoped to incorporate the perspectives of the participants, researcher, context, and reader into the process of “unlayering” and revealing further areas for questioning and research. The limitations of this study revolve around its inability to concretize findings into direct recommendations for practice. As an exploration, it offers enticement and motivation but not answers. However, in an area as yet uncharted, there is no greater endeavour than to begin to map the territory.

1.3 Significance to counselling psychology

The potential significance of this study is arguably enormous because of its capacity to instigate more research in an area that has received little attention. Counselling psychology has been foremost in the pursuit of understanding multicultural counselling and, since the occurrence of multilingual counselling is bound to increase given Canada’s demographics, it was thought that this study could contribute to the discipline’s vanguard status.

Particularly, the current research addressed the lack of knowledge about the interpreter’s experience in a counselling session with a culturally different counsellor and client. Previously, protocols for the use of interpreters were developed almost exclusively from the perspectives of social workers, counsellors, and psychologists. Moreover, these recommendations were also mainly concerned with the use of interpreters who function only to provide verbatim verbal exchanges between the client and the help provider. The present study is the only one that looked at the collaborative interpreter’s experience of providing verbal and non-verbal access, cultural consultation, and co-counselling across several different languages and cultures. In doing so, it answered the call for further research from the interpreter’s perspective (Granger & Baker, 2002; Miller et al., 2005) to enhance praxis and inform discussions on training and supervision.

Lastly, it addressed the ethical mandate for equitable provision of service by contributing to the understanding of equity issues in counselling through interpretation.
2 LITERATURE REVIEW

2.1 Introduction

This study was grounded in multicultural counselling theory (MCT), a vital meta-theory within counselling psychology. However, other areas of scholarship also contributed to the present research. Thus, this review includes a brief history of counselling, counselling psychology and multicultural counselling theory, with a specific view on the values and beliefs that underlie them. In addition, several other areas of knowledge are included to enhance and/or clarify the major constructs upon which this research relies. What follows, then, is a brief review of the literature concerning the effect of cultural differences between client and counsellor on the counselling relationship, and the determination of multicultural counselling competencies. Next, this chapter explores the literature concerning therapeutic language, culture and language, biculturalism, bilingualism, and intercultural communication. Current understanding about the immigrant experience was also important to review since both participants and clients in this study had immigrated to Canada. Finally, this chapter includes an examination of the literature from social work, psychiatry, and counselling psychology concerning the use of interpreters. To begin, however, it is important to define the primary constructs of culture and cultural identity upon which this study rests.

2.2 Culture and cultural identity

The present research was based on the general consensus that culture is “the ubiquitous, often invisible, patterns of deeply learned beliefs, behaviours, and values that are shared among members of a group, transmitted over time, and distinguish one group from another” (Grant, 2008, p. 327). Commonly thought to refer to the nationality or ethnicity of a person or group, culture has been more precisely defined in varying ways across disciplines and theoretical perspectives. The earliest definitions, some unwieldy, come from anthropology and link the term
to the differences in values, beliefs, behaviours, traditions, practices, and artifacts among social groups (Atkinson, Morten, & Sue, 1998). Anthropology was also first in the development of worldview models, created to explain similarities and differences among groups (Sue, D.W. & Sue, D., 2003). Foremost among these, is the model developed by Kluckhohn and Strodbeck (1961), which delineates core relational questions that each culture must answer (i.e., “What is human nature?,” “What is our relationship to nature, time, activity and others?”). Cognitive anthropology, influenced by the structuralist views of Levi-Strauss, moves away from focusing on group differences in values and beliefs and defines culture as a shared symbolic system, one that is a cumulative “creation of the mind” (Keesing, 1981, p. 47). The emphasis here is on the innate, internal process of imposing cultural order on experience. Arguing instead for an external, collaborative and public system of shared symbols and meaning, other theorists in this field (c.f. Geertz, 1973) stress the semiotic nature of culture and consider it as “an assemblage of texts” embedded in social interaction (Keesing, p. 48). These perspectives are not mutually exclusive; rather they each contribute to the complexity of trying to understand how collective meanings are created and maintained.

Social psychology also defines culture as a system of shared meanings (Smith & Bond, 1998), and has looked both at the possibility of a universal content and structure of values (e.g., Schwartz & Bilsky, 1990) and at variations in values as a way to distinguish one group from another (c.f., Hofstede, 1980). This perspective emphasizes that culture creates the social consistency that provides shared ways of relating to others and to the world itself. Additionally, this area draws attention to the multidimensional and intersecting layers of socially constituted meaning systems that one may hold simultaneously. For example, a person may hold the values and beliefs of a certain ethnic group, religious group, work or organizational group, and family group, all of which make her or his worldview complex and dynamic (Chao & Moon, 2005).
Counselling psychology similarly views culture as a complexity of learned assumptions and behaviours (Atkinson, Morten & Sue, 1998), and further defines it as the "socially shared aspects of experience and knowledge" (Fukuyama, as cited in Hansen, Gama, & Harkins, 2002, p. 164). In a larger sense, counselling psychology proposes that "culturally learned assumptions become the building blocks of a meaningful life" (Pedersen, 1997, p. 35). At the same time, multicultural counselling theory tends to emphasize the pervasive, often invisible nature of culture. As Robinson (2005) explains, the impact of "belief systems, behavior, and traditions [that] make up the essence of culture. . .are often oblivious. . .because. . .unstated assumptions and shared values. . .go unrecognized (p. 7). From this perspective, counsellors are cautioned to be aware of taking an ethnocentric or etic perspective with culturally different clients because it assumes that the counsellor’s "culturally driven meanings” are the “standard for interpretation” (p. 7). Thus, a competent multicultural counsellor must develop an awareness of the otherwise hidden meaning systems of her or his group in order to be respectful and sensitive to another culture’s “meanings for phenomena” (Robinson, p. 7).

The idea that "culture is invisible without contrast” (Smith, Richards, Granley, et al., 2004, p. 3) expands the definition of culture to include the concept of a collective, or cultural identity. The current research took the position that cultural identity is determined by our sense of "connectedness and belonging” within a collective meaning system and in our delineation of difference from others (Brewer & Gardner, 1996, p. 83). The term cultural identity also embraces the understandings of self that come from all group identities including nationality, ethnicity, race, gender, class, sexual orientation and other dimensions of human difference that have socially determined meaning and status (Chao & Moon, 2005; Hansen, Gamma & Harkens, 2002). Since an individual can belong to multiple social groups, different social identities can coexist and are in the foreground or background depending on their contextually determined
status (Brewer & Gardner). The point is also made that the realization and determination of a cultural identity happens readily when a person or group from a non-dominant culture comes into contact with the dominant culture, but is rarely self-ascribed by members of the dominant culture even when in contact with a non-dominant culture (Robinson, 2005). Again, the reason given for this dichotomy is that the dominant culture perspective is often viewed as the standard to which others are compared. Two main theories are linked to this consideration: White and racial identity development models (c.f., Helms, 1990) and acculturation, both of which are discussed later in this chapter.

2.3 The history of counselling and counselling psychology

The concept of counselling arose from the American social context of the early 1900s which, because of a surge of immigration, urbanization and industrialization, created pressure to provide vocational training and counselling (Copeland, 1983). This identified need was founded on the American philosophy of individualism where each person is considered of equal value, regardless of differences, and holds the right to life, liberty and the pursuit of happiness (Copeland; Sue & Sue, 1990). The term counselling itself came to mean the process of helping an individual to use her or his resources and improve quality of life; whereas, psychotherapy referred to creating personality change (Nelson-Jones, 1982).

Recognition of counselling psychology as a discipline has been attributed largely to the influential work of Carl Rogers in the 1940s with its emphasis on self determination and freedom (Copeland, 1983). In 1952, the American Psychological Association decided that the focus of counselling psychology was to promote the psychological development of all persons and not just those who exhibited psychological distress, and in 1956 created the Division of Counselling Psychology (Nelson-Jones, 1982). Thus, the practice of counselling psychology was acknowledged as providing both counselling and psychotherapy with a focus on growth and
development. From its inception, then, counselling psychology has been distinguished by its emphasis on well-being and personal growth instead of pathology (Hage, 2003; Nelson-Jones). Its application, therefore, has been directed towards understanding the contextual experience of individuals and developing ways to help them focus on solutions, be more effective, and live more fulfilling lives.

2.4 Multicultural counselling theory

As early as the 1950’s counselling psychology was also being criticized for its limitations as a vehicle for personal growth and well-being for all persons. At that time, Black professionals in the field of psychology, as the group was referred to then, were concerned that the counselling and guidance profession in the education system was designed for the middle-class, white student and as such was often instrumental in promoting and maintaining the dominant culture’s values and beliefs (Copeland, 1983, Jackson, 1995). In the following decades, other professionals (c.f. Sue & Sue, 1977; Sue, D.W., 1981) argued further that counselling was primarily a western invention arising from the basic philosophical assumptions of western, democratic ideals such as: (1) respect for the uniqueness of each individual, (2) the inherent worth of each person regardless of “race, creed, color, or sex,” (3) the right to self-determination, and (4) the right to future happiness. As laudable as these assumptions were, research showed that much counselling practice at the time was not equitable among all groups and that minority group clients often reported the experience of discrimination (Vontress, 1971; Sue & Sue, 1990, 2003). Further discussion pointed out that counselling was based on a western worldview, which encompassed the values of: individuality, self-determination, hard work and activity, and future planning among others, and as such, fell short of encompassing the diverse worldviews and life experiences of racially and ethnically different populations (Sue, 1981; Sue & Sue, 1990).
By the 1960s the civil rights movement in America inspired the call for racial and ethnic adaptations of counselling (Abreu, Gim Chung, & Atkinson, 2000; Jackson, 1995). Then, in 1973 the demand to make counselling relevant to the diverse needs of Americans resulted in the American Psychological Association calling for cultural competence to be considered a matter of ethical practice, and urging cultural diversity training for all psychologists (Abreu, et al.). This new branch of study was at first referred to as cross-cultural psychology and cross-cultural counselling. Cross-cultural psychology encompassed research on culturally different behaviours and experiences, and aimed to determine which were universal, or etic, phenomena and which were culture-specific, or emic (Sue & Sue, 1990; Triandis, 1980). Cross-cultural counselling meant any counselling relationship where the people involved were culturally, racially or ethnically different. Among the earliest responses were recommendations for culturally sensitive counselling models and standards of practice for the four major cultural groups in America: Asian-Americans, African-Americans, Hispanics and American Indians (e.g., Pedersen, Lonner & Draguns, 1976; Sue, S. & Sue, D.W., 1971). A debate also arose over whether or not there are universal approaches in counselling that can address all cultures equitably, or if there must only be culture-specific ones. The discussion remains lengthy (e.g., Arredondo, 1998; Baruth & Manning, 1999; Fischer, Jome & Atkinson, 1998; Fukuyama, 1990; Ishiyama, 1989; Lee & Ramirez, 2000; McFadden, 1999; Wohl, 2000) and has resulted in the continued development of universal (e.g., Fukuyama) and culture specific adaptations of cross-cultural counselling and therapy (e.g., Locke, 1992).

Arising from these concerns was the growing interest in the contextual nature of cultural identity and the effect of power and oppression variables in the counselling relationship. The result was a significant movement away from using the term "cross-cultural" in favour of "multicultural." This shift emphasized two concerns: (a) the potential negative effect of a
dominant culture counsellor who was unaware of assumptions that were based on a privileged
dominant culture counsellor who was unaware of assumptions that were based on a privileged
status, and (b) that difference and its relationship to a socially prescribed status is not limited to
status, and (b) that difference and its relationship to a socially prescribed status is not limited to
racial or ethnic divisions, but inclusive of other dimensions of diversity as well, such as class,
racial or ethnic divisions, but inclusive of other dimensions of diversity as well, such as class,
gender, sexual orientation, and ability (Lee & Ramirez, 2000; Robinson, 2005). Thus, the
gender, sexual orientation, and ability (Lee & Ramirez, 2000; Robinson, 2005). Thus, the
evolution of multicultural counseling theory (MCT) marks the dramatic shift in thinking that has
evolution of multicultural counseling theory (MCT) marks the dramatic shift in thinking that has
taken place within counselling psychology from a Eurocentric, deductive theoretical paradigm to
taken place within counselling psychology from a Eurocentric, deductive theoretical paradigm to
a perspective-centered, inductive approach to the study of human behaviour (Leong & Blustein,
a perspective-centered, inductive approach to the study of human behaviour (Leong & Blustein,
2000). As well, MCT has enlarged the scope of counselling psychology to include the value of
2000). As well, MCT has enlarged the scope of counselling psychology to include the value of
social justice and has increased the interest in developing approaches that address experiences of
social justice and has increased the interest in developing approaches that address experiences of
oppression and inequities (Constantine, Hage, Kindaichi, & Bryant, 2007). In fact, MCT has
oppression and inequities (Constantine, Hage, Kindaichi, & Bryant, 2007). In fact, MCT has
been lauded as the “fourth force” in counselling theory (Pedersen, 1991) because it emphasizes
been lauded as the “fourth force” in counselling theory (Pedersen, 1991) because it emphasizes
the importance of culture in determining perspective, and it lays bare the assumptions, values,
the importance of culture in determining perspective, and it lays bare the assumptions, values,
and biases inherent to western approaches (Aponte, Rivers & Wohl, 1995; Atkinson, Morton &
and biases inherent to western approaches (Aponte, Rivers & Wohl, 1995; Atkinson, Morton &
Sue, 1998; Ivey & Ivey, 1993). In alignment with the constructivist philosophy of science, MCT
Sue, 1998; Ivey & Ivey, 1993). In alignment with the constructivist philosophy of science, MCT
has more recently been described as a meta-theoretical approach because it “recognizes that all
has more recently been described as a meta-theoretical approach because it “recognizes that all
modes and theories of helping arise from a particular cultural context” and that cultural views of
modes and theories of helping arise from a particular cultural context” and that cultural views of
reality are “social agreements” developed in relation to the interpersonal exchange (Sue, Carter,
reality are “social agreements” developed in relation to the interpersonal exchange (Sue, Carter,
Casas et al., 1998, p. 12-13).
Casas et al., 1998, p. 12-13).

2.4.1 The client/counsellor relationship in multicultural counselling

It is well known from outcome studies that the ultimate success of any counselling or
It is well known from outcome studies that the ultimate success of any counselling or
therapy practice rests on the experience of trust, empathy, and collaboration in the therapeutic
therapy practice rests on the experience of trust, empathy, and collaboration in the therapeutic
relationship (e.g., Bankhart, 1997; Frank, 1973; Mahoney, 1991; Orlinsky & Howard, 1987).
relationship (e.g., Bankhart, 1997; Frank, 1973; Mahoney, 1991; Orlinsky & Howard, 1987).
Early research on the multicultural counselling relationship found that the non-access and
Early research on the multicultural counselling relationship found that the non-access and
attrition of minority clients was largely due to their experiences of: counsellor bias, insensitivity,
lack of respect for differences, culture and class-bound values, language barriers and the reliance on standard American English, and lack of minority professionals (e.g., Atkinson, Mariyama & Matsui, 1978; Pine, 1972; Sue, D.W. & Sue, D., 1977; Sue, D.W., 1981). In a more recent review of the research concerning the multicultural counselling relationship, Atkinson and Lowe (1995) found that there was consistent evidence that clients preferred ethnically similar counsellors, but also that similarity of attitudes and values was significant even when the counsellor was ethnically different. Within-group differences, such as acculturation, racial identity development, education, socioeconomic status, also affect preferences for ethnic matching. Over all, though, there is general support for the finding that ethnically similar counselling relationships have more positive counselling process and outcomes than do ethnically dissimilar ones (Atkinson & Lowe).

The success of co-therapy, with which this study was concerned, is compounded by the negotiation of relationship between counsellor to counsellor as well as each counsellor to client. Few studies exist on co-therapy, but those that do point to the necessity of open communication and the equitable negotiation of power between the counsellors as well as the clients (Carpenter, 1993; Roller & Nelson, 1991). Power distribution is especially relevant to multicultural co-therapy especially if one therapist represents the dominant systems of power. Here, the issue of the “counsellor’s culture” becomes paramount, and much literature has been devoted to examining the impact of the counsellor’s multiple and intersecting cultural identities, such as race, gender, sexual orientation, and class, on counselling (e.g., Baruth & Manning, 1999; Helms & Cook, 1999; Pedersen, 1995; Wehrly, 1995). In addition, the cultural identity location of each person in the triad (counselors/client) contributes to the negotiation of relationship, the development of communication patterns, and the perception of meaning (c.f., Helms & Cook, 1999; Stanley & Slattery, 2003). Hence, without the counsellor having an in-depth knowledge of
self in relation to the dominant power systems, much of the counselling process in a cross-cultural situation can be irrelevant, and possibly damaging (Laird, 1998; Waldegrave, 1998).

2.4.2 Multicultural counselling competencies

A major result of these considerations is that a large area of counselling psychology literature is concerned with the question of multicultural counselling competencies. Multicultural counselling competence is defined as the skills, knowledge, beliefs and attitudes that counsellors need when working with culturally diverse clients (Sue, Arredondo, & McDavis, 1992). In 1982, Derald Wing Sue and his colleagues made recommendations to the APA Education and Training committee on the specific requirements for a counsellor to be deemed cross-culturally competent (Sue, D.W., Brenier, Durran, Feinberg, Pedersen, Smith, & Vasquez-Nuttall). What they determined was that curriculum and training models needed to address the following:

Beliefs and Attitudes:

1. Counsellors need to be aware of their own culture and its values and respect differences.
2. Counsellors need to be aware of their own assumptions, biases, values and beliefs and understand how they can affect a culturally different client.
3. Counsellors need to be comfortable working with different races and beliefs.
4. Counsellors need to be aware of when individual clients’ needs and circumstances may require a referral to a culturally or racially similar counsellor.

Knowledge:

1. Counsellors must understand the dominant sociopolitical system and how it affects diverse groups.
2. Counsellors need to have specific knowledge about the cultural group of their client.
3. Counsellors must know the basic premises of counselling and therapy.
4. Counsellors must know about the institutional barriers to service for diverse groups.

Skills:

1. Counsellors need to be able to use a large variety of verbal and nonverbal responses.

2. Counsellors need to be able to send and understand verbal and nonverbal messages appropriately and accurately.

3. Counsellors need to use appropriate intervention skills with institutional barriers on behalf of their clients (e.g., outreach, advocacy).

Other research has largely agreed with these recommendations and focused on explicating them (e.g., Atkinson, Morten & Sue, 1998; Pope-Davis & Dings, 1995, Sue, Arrenondo, & McDavis, 1992). More recent discussions have expanded on counsellor self-awareness and emphasized the complexity of cultural identity and contextual influences that are involved in a counselling relationship (c.f. Collins & Arthur, 2005; Laird, 1998; Pedersen, 2000; Robinson, 2005; Sue & S; Sue, 2003; Waldegrave, 1998). Also emerging from this emphasis is a re-assertion of counselling psychology’s commitment to social justice in counselling practice (Constantine, 2007; Waldegrave, 1998). Canadian contributions to this area are few but thorough in their discussion of the particular cultural milieu of Canada (Collins & Arthur, 2005; France, 2004), future directions of “culture-infused” counselling and professional development strategies (Collins & Arthur).

The training models that have emerged from these discussions have also emphasized counsellor awareness of their own and their client’s multiple cultural identities and the potential impact on practice. A pioneer in this area was Paul Pedersen who developed the Triad Training Model in the 1970’s and has continued to expand on it through to the present (Pedersen, 1977; 2000). This model aims to make apparent the “continuous internal conversations” (p. 40, 2000) or hidden dialogues with the self, which emerge in the context of a culturally different
counselling relationship in order to reconcile perceptions of the self as same or different. The goal is to make counsellor trainees experience and understand not only the explicit verbal exchange between themselves and the client, but their own and their client’s internal responses to dominant discourses.

Also pivotal in the development of training models were the implications raised by racial/cultural identity development theory (c.f. Helms, 1984), which recognized with-in group differences in relating to socially prescribed identities. This theory explicates the developmental process of: (a) awareness of difference, (b) identification with the dominant, white identity and rejection of one’s own racialized or cultural identity, (c) increased sociopolitical awareness and abandonment of white/western society, (d) reconnection with one’s own cultural heritage, and (e) the acquirement of a positive identity that is no longer in reference to dominant systems (Sue & Sue, 2003). In response, training programs for dominant culture counsellors arose that recognized the developmental process of the counsellor’s cultural awareness by structuring learning around each stage (Bennett, 1986; Carney & Kahn, 1986; Sabnani, Ponterotto, & Borodovsky, 1991). These stages coincided, for the most part, with the model of White Racial Identity Development (Helms, 1990) and included, (a) denial or lack of awareness of one’s own racial/cultural identity, (b) exposure to other cultures, (c) disintegration of former ideas about racial/cultural groups, and ensuing internal conflict, (d) hyper-identification of cultural issues and paternalism, (e) feeling overwhelmed, angry, and retreat into a pro-dominant culture stance, and 6) redefinition of self as a racial/cultural identity and expansion of knowledge (Atkinson, Morten & Sue, 1998)

Finally, models were also devised to address the gaps in western counselling and therapy for minority group clients. These emphasize a consideration of the client’s acculturation level and experiences of oppression when identifying the problem, its etiology, goals for treatment,
and therapist role. The option of a non-conventional role in multicultural counselling is based on a culturally appropriate assessment and can include, as Atkinson and his colleagues argue, that of advocate, change agent, consultant, adviser, or facilitator of indigenous healing methods (Atkinson, Morten & Sue, 1998).

In summary, then, the continued requirement placed on all counsellors to be culturally competent reflects the profession’s concern with ethical, equitable, and appropriate practice across the spectrum of diversity. It also acknowledges the developmental and relational processes involved, both for the individual and within every therapeutic relationship.

2.5 Language, therapy, and culture

Worth noting, in consideration of this research, are some of the wide range of psychological viewpoints that have stressed language as the foundation of therapy and the therapeutic relationship. Beginning with Freud (1915-1917), who wrote that “[n]othing takes place in a psycho-analytic treatment but an interchange of words…words provoke affects and are in general the means of mutual influence among men” (cited in de Shazer, 1994, p. 3), attention was drawn to therapy as conversation and as rhetoric. The rhetorical function of therapeutic language is also well founded in the scholarship of such seminal thinkers as Wittgenstein (1966, as referenced in Bankhart, 1997), who drew attention to the ability of analysis to convince clients to give up one way of thinking and adopt another, and Bandura (1969), who also insisted that psychotherapy is basically a process of persuasion.

The power of therapeutic language as a “process of interpersonal influence” (Ivey, Ivey, & Simek-Downing, 1987, p. 3) has emphasized certain kinds of communication over others. The emphasis on the interpretation of clients’ dreams in psychoanalysis rested upon the ideas that the unconscious communicates in symbolic forms and that this process often involved the condensation of a set of images into one, or displacement of the meaning of one object onto
another. Thus the analyst must be skilled in accurately interpreting the metaphoric language of
the unconscious for the conscious understanding of self (Eagleton, 1983). Carl Rogers (1942)
influenced therapeutic communication by viewing the client as positive, capable of growth, and
fulfillment. To facilitate this outcome, the task of the counselor in person-centered counselling is
to understand and empathize with the client’s experiential world by communicating a non-
judgmental attitude, genuineness, an accurate reflection of feelings, and incongruities between
the client’s real and ideal self. The essential communication task of cognitive therapy is to
motivate decision-making and action (Ivey et al..) through the use of logic and objectivity in
response to irrationality. A more recent example comes from narrative/solution focused
therapies, which see the client’s problem as a narrative, contextually constructed and only one of
multiple possibilities that can be revised through the counsellor’s use of appropriate questioning
(c.f., de Shazer, 1994; White & Epston, 1990).

However, developments in language theory have given rise to important questions about
the reliability of language to accurately represent reality and, thus, to the traditional assumptions
about communication in therapy (de Shazer, 1994). Polkinghorne’s (1988) work on “narrative
knowing” elaborates upon Ferdinand de Saussure’s theory of structural linguistics wherein
language is defined as a system of signs, and meaning is said to reside only in a sign’s difference
from other signs. The structuralist perspective emphasizes that language does not accurately
reflect reality; rather, as a system, language distributes meaning among ideas along “the
spectrum of conceptual possibilities” (Polkinghorne, p. 25). These possibilities, or the ways in
which we categorize experience, are determined by the “theoretical, cultural and valuing
schemes the observer has learned” (p. 25) and any experience can be categorized in multiple
ways.
Saussure's views influenced other structuralists, such as Roman Jakobson, who proposed that all communication was comprised of a relationship among the sender, the context, and the receiver. Essential in the "appearance of meaning" is the "presence of a hearer and a speaker (receiver/sender) [who] draw on communal conventions in a mutual expectation that each member of the communication community symbolize meaning according to the same set of transforming covenants" (Polkinghorne, p. 33). Included in Jakobson's view is the notion of metaphorical language, a form of expression foundational to many therapeutic interventions (e.g., psychoanalysis, Jungian therapy, constructivist therapies). As Terry Eagleton (1983) explains, metaphor changes the common relationship between the sign and the object, which frees the sign to function, "with an eye to the patterns of similarity, opposition, parallelism, and so on created by their sound, meaning, rhythm and connotations" (Eagleton, p. 99). The ability to establish a connection through having one concept stand for another is, according to Polkinghorne, "basic to human communication and the growth of language systems" (1988, p. 5). At the same time, that connection is both arbitrary and culturally defined.

Contextual systems of meaning are extensively explored by Jacques Derrida (1978) in his theory of deconstruction. Deconstruction is a heuristic act that reveals the particular (contextual) system of meaning upon which a text is based by emphasizing what it excludes (binary opposition). Derrida sees us all as contaminated by the thought-system in which we are embedded, and which cannot be eradicated and should not be ignored. Meaning, then, which any text tries to contain in the illusion of structure, is always in some sense uncontainable because its existence is reliant upon opposition. This theory relates to the language of therapy through its emphasis on meaning as existing only in relationship to non-meaning, or "other." We relate what is meaningful as much by what we exclude as by what we say. So one of the
questions involved in the present study was, what was the collaborative interpreter's experience of re-constituting a western meaning system in relationship to the "other" meaning system?

The co-creation of meaning in a therapy session might be seen in terms of reception theory. As Eagleton (1983) explains it, reception theory considers the reader's role in creating meaning in text. Text exists through the "process of signification materialized only in the practice of reading" (p. 74). The reader is constantly required to make implicit connections in the text from her or his previous understanding of the world. Text, therefore, is simply a series of invitations to "construct a piece of language into meaning" (Eagleton, p. 76). Thus, the possible meanings from any given text are legion – each reader interprets it from individual experience. Interestingly, this theory proposes that text is a set of schemata to which the reader brings his or her context of beliefs and expectations. Through this context, the reader will evaluate a text even as the text modifies the reader's expectations (Eagleton). This hermeneutical circle is the co-evolution of meaning, culture-bound, yet unique to the perspectives that create it. If the "text" in this case is the western therapeutic construct, then the interpretation of it is a co-creative process between the interpreter and client's schematic sets.

Most important to the current research are the ideas of Gadamer who said that we inhabit language, that is, that all existence is "being in the word" (as cited in Grondin, 2003, p. 145). Specifically, instead of viewing language as a system of signs that signify an objective reality, this view maintains that language creates "reality." Thus, language does not represent a view of the world; it is the world in hermeneutical relationship to us. One of the premises of the present study is that language constitutes our cultural meaning systems; hence, our multilingual world offers a multitude of perspectives, not because of each language's linguistic qualities, but because "of what is said or handed down in [each] language" (Gadamer, 1960 as cited in Grondin, p. 144). While Gadamer did not discuss culture per se, he, among others, led the way
to the position MCT takes on the correlation between language, culture and the perception of reality. As noted, MCT views language as relational, not representational, co-constituted through the social agreements of culture and the present relationship, and therefore, allowing for multiple realities beyond western standards of perception (Sue, Carter et al., 1998).

Gregory Bateson (1982) offers an interesting explanation of how cultural meaning systems are co-created. He uses the metaphor of binocular vision, “where the differences between the reports of the two eyes provide refined information about the object under scrutiny” (p. 1). The product of this “collateral knowledge,” which functions by reporting difference, is the relationship of the double description. The resultant understanding, then, is greater than the sum of its parts. While it may be advantageous to have more than one source of data, as Bateson suggests, his explanation does not address the effect of social and power relationships embodied in language (c.f., Foucault, 1980). The discourses of any language reflect and reinforce patterns of power and privilege, and it would seem important to consider the impact of a dominant culture language on the interpretation of meaning for a non-dominant culture language.

Therapy has also been described as the discourse that provides the central metaphors on what it means to be or not to be a fully functioning human being to which the client and the rest of Western culture subscribes (Bankhart, 1997). That description recalls MCT’s emphasis on the psychosocial context as determining one’s perspective on life experiences. By focusing on the individual in relation to the sociopolitical environment, questions concerning the power and privilege of the dominant discourse arise. I take my definition of discourse from the work of Paul Gee (1999) who described it as “socially accepted associations among ways of using language, of thinking, valuing, acting, and interacting, in the ‘right’ places and at the ‘right’ times with the ‘right’ objects (p. 17). In this view, one’s perspective on self and other is in large part determined by one’s ability to participate in the dominant discourse.
The dominant discourse concerning mental health in western therapy poses difficulties for counselling across cultures and languages. Many studies have tried to explicate cultural variations in the concepts of health and illness: etiology, pathology, diagnosis, treatment, symptomatology, and prognosis (e.g., Waxler-Morrison, Anderson, et al., 1990; Eleftheriadou, 1997; Kirmayer, 1992; Kirmayer, Dao & Smith, 1998; Ponce, 1998). Some research has been devoted to the study of indigenous, or emic, constructs of psychopathology (most recently, Cuellar & Paniagua, 2000; Okpaku, 1998). However, these studies focus on the differences in understandings of the English construct, not on its translation. Importantly, though, these studies show that even when the language is the same, the understanding of the construct can be quite different.

Further evidence of the necessity to explore the meaning of any psychological construct, even when English is the language of therapy, can be found in a more recent study by Slaney, Chadha, Mobley and Kennedy (2000). They looked at the meaning of the construct of perfectionism in the Hindu context compared to the definition in a review of western literature. They then compared understandings of the construct among South Asian university students in New Delhi with samples gathered from the U.S.A. Their findings suggest that among South Asian university students, the construct appears to have more similarities than differences; however, in the context of the Hindu religion, perfectionism involves the concept of karma, which is vastly different from the Western perspective. Hence, they caution that their results “clearly indicate that counselors would be well advised to carefully investigate what they and their clients mean...to assure that their approximate meanings are as similar as possible” (p. 12).

Difficulties are also presented when one attempts to translate words for emotions and emotional states. For example, in a review of culture and anxiety disorders, Al-Issa and Oudji (1998) point out that the concept of anxiety is affected by sociocultural conditions, defined
variously across cultures, experienced and verbalized differently depending on the lexicon of the language, and physiologically elicited by culturally defined situations. Other research by Wierzbicka (1999) points out that even in English the perspective on an emotion changes over time. She offers the example of the shift in the perception of anger since the time of Shakespeare until now. The present view of anger as something that can be “controlled, vented, released, left unresolved, directed at this or that target, stirred up, repressed, expressed, suppressed…goes far beyond the semantic range of the Shakesperian anger” or wrath (p. 31). She also argues that the modern English view of anger extends far beyond the meanings in many other cultures and languages and has largely arisen from English “therapeutic culture” (p. 33; citing Bellah, Madsen, Sullivan, Swidler & Tipton, 1985). To illustrate, she offers the example of English to Polish translations of anger, where the words closest to English meaning “are so different…in meaning that it would be virtually impossible to translate into Polish perfectly ‘normal’ sentences in …English such as… “dying people may feel angry’” (p. 32). The reason is that the two closest counterparts refer to outwards expressions of either a childish temper tantrum or the reaction of someone in a position of power and authority, such as being “cross.” In summary, her work makes the point that words for emotions are culture-bound reflections of certain values and beliefs, evolving from a particular speech community.

Another important assessment on the role of language and culture in therapeutic modalities is offered by Santiago-Rivera (1995) who looks specifically at counselling for Hispanic Americans. The article reaffirms the lack of attention given to language in the design of culturally sensitive therapies and refers to the success of one modality (cuento therapy) which used bilingual-bicultural mental health professionals. Santiago-Rivera’s conclusion reaffirms MCT’s emphasis on the consideration of cultural values, beliefs and customs, and also emphasizes that the role of language in the expression of these factors be considered.
2.6 Biculturalism

Another challenge to determining the meaning of any construct from one language to another has to do with the client's acculturation level. Acculturation has been variously defined and, as a theory, has the potential to reinforce dominant culture standards as the unit of measurement (with the ideal being assimilation into the dominant culture). I took, for the purpose of the present research, the definition offered by Redfield, Linton and Herskovits (1936; as referenced in Atkinson, Morten & Sue, 1998) "that acculturation is a process of change that occurs when two or more cultures come in contact with each other" (p. 25). This process is both a social and a psychological one (Berry, 1990) and results in changes in behaviour, attitudes, values and beliefs to the extent that the resulting identity may be termed "bicultural."

Biculturalism and racial identity development are important concepts related to the theory of acculturation because the multidimensional models that have resulted from them inform the assessment of cultural identification and preference. Biculturalism is the state of resolution and consolidation attained by the individual between their original culture and the host culture. Non-White racial identity development follows a continuum of self-perception with regard to one's relationship with the dominant culture (c.f., Helms, 1990). Together, they reflect the meaning of the dominant culture's constructs for the individual.

The concept of acculturation level is often used to discuss the client's ability to understand an English construct. This continuum has the potential to reinforce dominant culture standards as the "preferred state"; therefore the responsibility to make a construct helpful or useful is put upon the collaborative interpreter and her or his ability to adapt or incorporate the dominant idea. Two theorists in particular emphasize the importance of including the dimension of language in assessing acculturation levels: Padilla (1980) proposes that "language familiarity and usage" be one of five dimensions of acculturation assessment, and de Anda (1984) includes
the individual’s degree of bilingualism among the factors determining biculturalism (as referenced by Atkinson, Morten & Sue, 1998). The lived experience of adapting to another culture, however, expresses itself as a much more fluid and reactive location in response to the dominant discourses of the host. What is helpful about any of these concepts, though, is their emphasis on the quality of the relationship between the client and the dominant culture and its role in communication.

Finally, acculturation level has been linked to counselling process and outcome variables for ethnic minority clients (Atkinson, Morten & Sue, 1998). For example, acculturation levels are generally used to predict the success or failure of the counselling relationship, with lower acculturation levels suggesting preferences for ethnically similar counsellors. Several instruments have been devised to measure acculturation levels, particularly for the major ethnic groups in the United States (Atkinson, Morten & Sue). However, research concerning the effects of acculturation on counselling are few in number, and even those who include language as a consideration focus more generally on the adaptation of values and beliefs. In the current study acculturation was seen as the level to which a person has the ability to share in the meaning system of the host culture.

2.7 Bilingualism

One more area of the question concerning the effect of English on cross-linguistic counselling needs to be reviewed. The enigma of bilingualism has been explored by cognitive psychologists, neuropsychologists, and by experts in psycholinguistics, sociolinguistics, among other disciplines. Several studies in bilingualism refer to the influence a language has and how this often determines the necessity for fluency in other languages (e.g., Edwards, 1994; Wei, 2000). This sociopolitical view defines bilingualism as “a product of dominant culture interface where each language carries its own “symbolic capital” (Myers-Scotton, 2002). From this
position, linguistic exchanges become symbolic power relations between speakers of their respective groups. Since languages differ in their status, fluency is often determined by utility; hence, the languages of some bilingual persons are not equally developed. An example in this case would be the knowledge of a second language with enough vocabulary to successfully work and do business, but insufficient to express deep emotional states. Studies have shown that even when a person is sufficiently fluent in both languages to express emotion, the choice of linguistic expression is often determined by considerations of power and privacy (Edwards). In particular, "code switching" or the use of two languages during the same communication is usually decided by the separation of emotional content from observational comments. Studies have also shown that code switching involves highly skilled manipulations of the different grammars, with a resulting mix that is still always grammatically correct (Wei, 2000).

Interestingly, the phenomenon of code switching may be related to the historical view of translation, which, according to Edwards, was associated with treason. This association was made, Edwards explains, because language was seen to contain the unique traditions, beliefs and values of a collective consciousness; thus, it was "one's inheritance and one's secret code" (p. 5). Translation of that secret code would reveal the "deep matters" of a group to others, and so it was a serious and suspect practice.

Interpretation also always involves a subjective interpretation of the speaker's tone, language level, and intent. Therefore, it is necessary to be familiar with the culture of the speaker in order to translate meaning. This function of interpretation is described as hermeneutical in that it involves the ongoing process of contribution to meaning (Edwards, 1994). So it seems that the act of interpretation involves more than knowledge of the lexicon; it involves the creation of privacy or transparency, the communication of power or position; and the consideration of intent.
The work of Dufour and Kroll (1995) and Kroll and Stewart (1994) elaborates on the concept of bilingualism by theorizing on the cognitive structures involved. Their research produced a "concept mediation model" which offers an explanation of how language is stored in memory. In brief, they describe how words seem to be stored independently, but concepts seem to use a common semantic representation. This results in a hierarchical placement of words and concepts, with access to the conceptual connections in two languages being asymmetrical. Specifically, they found that interpretation from one's second language to one's first is faster than from the first to the second. They theorize that these results mean that interpreting from a first to a second language requires conceptual access, while interpretation from a second to a first language is accomplished directly from the lexical link between the two languages. These findings seem to suggest a difference in the conceptual quality of interpretation depending on which language is being translated. This possibility would have direct bearing on the interpretation of therapeutic interventions if, indeed, the interpreter had access to the conceptual framework in English, but routed the interpretation from English to their first language through the lexicon alone.

The cognitive questions surrounding bilingualism lead again to the question of biculturalism. A recent exploration of "multicultural minds" by Hong, Morris, Chiu and Benet-Martinez (2000) looks at how bicultural individuals shift between interpretive, cultural frameworks in response to social cues. They build their argument on previous studies that indicate that bicultural individuals describe the two cultures as "taking turns" in guiding their cognitions and emotions (for a review of that literature see pp. 709-710). They propose that, instead of integrating to form a composite culture, the two (or more) cultures are "internalized in the form of a loose network of domain-specific knowledge structures," and that while possessed simultaneously, they do not and cannot simultaneously guide cognition (p. 710). Their
conclusions emphasize "construct accessibility" resulting from "the priming of related constructs" (p. 716). This priming or stimulus can be created internally or by the environment through institutions, discourse, relationships, icons etc. Thus, "particular pieces of cultural knowledge become operative in guiding an individual's construction of meaning" depending upon the availability of conceptual cues (p. 718). The current research emphasizes the importance of considering context as part of the interpretation process in therapy, especially when the co-therapists consist of a dominant culture counsellor and a non-dominant culture counsellor.

2.8 Intercultural Communication

Literature in the area of intercultural communication also has much to say on the verbal and non-verbal problems of interpreting meaning. The field originally emerged from linking anthropological studies with communication studies and evolved to include knowledge from linguistics, psychology, and sociology as well (Chen & Starosta, 1998). Briefly, the discipline focuses on analyses of the interactions between different cultures, including individual, international, interracial, dominant/non-dominant, and interethnic communications. It views communication as a developmental and contextually influenced exchange of symbols that, within a culture, have evolved common meanings (Chen & Starosta; Samovar, Porter, & Stefani, 1998). The study of these "symbol-exchanging" processes also uses models of cultural value orientations, such as Kluckhohn and Strodbeck's (1961), and, more importantly, has contributed ones that inform different communication styles and non verbal exchanges. These factors have been called the "social rhythms" that are at the foundation of all actions, including speech, and form the "hidden texts" of our communications (Samovar, Porter, & Stefani, 1998; Sue and Sue, 2003).
One model concerning communication style divides cultural differences into high-context and low-context cultures to reflect the automatic assumptions people make about how much a listener already knows (Hall & Hall, 1987, as referenced in Samovar et al.). High context cultures assume that the listener already knows the context of what is being discussed, hence, indirect verbal expressions are used. In these cultures harmony is highly valued as is social status and the listener is expected to understand implied messages such as a polite refusal that does not require the speaker to say “no.” Here the emphasis is on the listener understanding the message without speaker clarification. Low context cultures expect that all the important information will be indicated verbally and that the speaker carry the responsibility of clarification. This style emphasizes direct verbal exchange, preferably using linear logic to communicate ideas, and is less reliant on understanding nonverbal cues.

Another model developed by Hofstede (1980) offers four dimensions of cultural values: individualism/collectivism, power distance, uncertainty avoidance, and masculinity/femininity (Chen & Starosta, 1998). The first, individualism/collectivism emphasizes the relationship between the individual and the group. Individualistic cultures emphasize self-expression and treat the individual as the most important person in a social setting. Collectivistic cultures emphasize the group’s views and needs and expect the individual to emphasize them over self-interests. Power distance describes how different cultures view inequalities of power in relationships. High power distance cultures have a hierarchical structure in social relationships and emphasize differences of age, sex and status. Thus, communication is usually formal and dictated by differences in status. Low power distance cultures see social relationships as more horizontal and emphasize individual differences over group characteristics. In this case communication is often less formal and more direct. The dimension of uncertainty avoidance emphasizes the relative ability different cultures have in tolerating ambiguity, change and
uncertainty. Communication styles are influenced by either a preference to reduce ambiguity and follow rules or to show tolerance for difference and flexibility. The last dimension, masculinity/femininity, describes the extent to which a culture has rigid gender roles. In masculine cultures, the values of ambition, strength, competitiveness, assertiveness and so on are emphasized resulting in a more aggressive communication style. Feminine cultures emphasize the values of compassion, affection, emotion, and nurturing, which lead to a greater ability to understand nonverbal cues and tolerate ambiguity (Chen & Starosta).

The consideration of nonverbal communication is highly important because it more extensively exhibits differences in communication styles (Sue & Sue, 2003). Researchers have suggested that as much as 60 to 70 percent of what is communicated is nonverbal (e.g., Singelis, 1994), only a small portion of which is internationally understood (Chen & Starosta, 1998). In fact, even though a number of nonverbal cues are common as elements in human expression (e.g., eye contact, postures, personal space) the meanings attached to them vary greatly across cultures. To describe the extent of nonverbal messages, I include the following quote from Chen and Starosta:

The elements of nonverbal messages include hand gestures, eye contact, posture and stance, facial expressions, odors, clothing, hair style, walking behavior, interpersonal distance, touching, architecture, artifacts, graphic symbols, preference for specific tastes, arts and rhetorical forms, somatypes of bodies, vocal signs, color symbolism, synchronization of speech and movement, thermal influences, cosmetics, drum signals, vocal inflections, smoke signals, factory whistles, police sirens, time symbolism, timing and pose, and silence (p. 88).

Judiciously, these elements are usually described by four categories of nonverbal communication. Kinesics is what is commonly called body language and encompasses facial
expressions, eye contact, hand gestures and touch. Proxemics refers to the use of space, such as how far or close to stand to someone depending on the context of the communication.

Paralanguage is the use of all vocal signs that are not words including pitch, rate of speech, volume, tone, and sounds that reveal emotional states. The last, chronemics, looks at how time relates to human action and communication.

To conclude, nonverbal language can result in miscommunication because of: 1) the incorrect assignment of meaning to behaviour, 2) different meanings among cultures for the same behaviour, 3) sending the right non-verbal message at the wrong time or in the wrong context, and 4) non-recognition that a signal has taken place (Singelis, 1994). Obviously, the task for the collaborative interpreter, then, is compounded by not only understanding the lexicon, but also by needing to transmit value orientations and non-verbal meanings across individual perceptual fields.

2.9 The immigrant experience

Since the current research involved collaborative interpreters, who were all immigrants themselves, and their work with immigrant clients, it is worth noting some psychological factors that influence the experience of immigrants to North America. In general, immigrants and refugees are at risk for developing emotional and psychological problems (France, 2004). A distinction must be made here between immigrants and refugees. Immigrants are those populations who have usually emigrated by choice while refugees have often been forced to leave (Arthur, 2005; France). As a result, the refugee experience can be marked by psychological and physiological torture, exposure to war, forced collusion in violent acts, incarceration, sexual abuse, starvation, and life in camps. In fact, a study by Bemak and Chung, (2002) found that refugees have a 50 per cent chance of developing PTSD and between a 42 to 89 percent chance of developing depression. This research was neither on a counselling program
nor on counsellors who dealt therapeutically with refugee trauma. So this discussion is limited to the experience of immigrants.

The reason immigrants can be vulnerable psychologically and emotionally is the psychosocial process of adaptation most must make to the host country. According to France (2004), adaptation can take three forms: adjustment, reaction, or withdrawal. In the case of adjustment, the newcomer makes changes to reduce conflict and increase harmony with the host culture. Reaction occurs when the newcomer tries to or does make changes to the new environment to increase their comfort. Finally, withdrawal involves the newcomer reducing contact with the host culture or being excluded by it.

Obviously, adaptation is linked to the process of acculturation. As discussed earlier, acculturation levels are determined by the interaction between the host and the immigrant cultures and are linked to the sociopolitical ideologies of the host country (Berry, 1990). For example, the host country can hold total assimilation of other cultures into one national identity as the ideal or, on the other end, value the integration and resulting mosaic of a multicultural nation. Regardless, this interface causes what has been called acculturation stress, which can manifest psychologically as confusion, anxiety, depression, alienation and identity confusion (Furnham & Bochner, 1986). The process of acculturation has been described by four strategies: assimilation, separation, marginalization and integration. The first involves the total submergence of their former cultural identity, which, as Berry points out, is often psychologically painful and ultimately brings on acculturation stress. Separation is where immigrants choose to maintain their original culture and isolate themselves from the host or other cultures. When groups lose or reject both their original cultural identity and that of the host culture, what occurs are feelings of alienation, loss, and identity confusion. Lastly, integration,
the psychologically preferred outcome, involves keeping element of one’s heritage, modifying differences, and adopting key values of the host culture (France, 2004).

The process of evolving a new cultural identity as a result of immigration is described by the Immigrant Identity Development Model (IIDM) (France, 2004). This model is useful to help counsellors understand how their immigrant clients see themselves, regardless of how long they may have been living in the host culture. The model presupposes a continuum of adjustment and can be used to determine the use or not of culture-specific approaches in therapy. Briefly, the IIDM consists of five stages: Compliance, where the newcomer completely adopts the host culture with the desire to “fit in” and belong; Conflict, usually arising from the awareness of oppressed status and a disenchantment with the host culture; Defiance, characterized by mistrust, rejection and anger towards the host culture, and a belief that their old life and culture was better; Introspection and Accommodation, involving the newcomer’s realization that adapting to the new culture does not mean abandoning their own; and Adaptation and Integration, where their sense of themselves moves toward or encompasses a bicultural identity. The model also includes the understanding that people can moves backward and forward based on their life experiences and may also become stuck in the early stages.

Other considerations for counsellors involving the immigrant experience include social and family changes. The process of moving from one country to another may mean separation from family; loss of status, education, or profession; demographic moves such as from rural to urban communities; change in gender roles, intergenerational differences in acculturation and adaptation; and power shifts in family members because of different fluency levels (France, 2004). To conclude, it is important for counsellors to consider the immigration experience and its impact on identity as well as psychological well-being, when relevant, alongside awareness of acculturation variables and racial identity development.
2.10 Counselling through interpretation

As mentioned in the first chapter, literature on the subject of using an interpreter in mental health settings is rare. The majority of what does exist are discussions and recommendations emerging from the concerns of therapists and clients on topics such as ethical considerations (Raval, 2002); the hiring, training, and supervision of interpreters (Musser-Granski & Carrillo, 1997); suggestions for therapists (Sabin, 1975; Atkinson, Morten & Sue, 1998; Pine, Cervantes, Cheung et al... 1990; Tribe, 1999) and an enduring debate on interpreter roles (Miller, Martell, Pazdirek et al., 2005; Raval). Much less of the literature is devoted to actual research findings about the use of interpreters. In fact the call for more research on the use of interpreters in general has persisted through decades with little result (e.g., Sabin, 1975; Freed, 1988; Granger & Baker, 2002; Miller et al., 2005; Razban, 2002). Even more absent is research on the interpreter’s experience (Granger & Baker; Miller et al..). I was only able to uncover five studies (Granger & Baker; Harvey, 1984, as cited in Granger & Baker; Miller, Martel, Pazdirek et al., 2005; Raval, 1996; Tribe, 1991, as cited in Granger & Baker), with one concerning interpreters for the deaf (Harvey) and two specific to interpreters working with refugees (Miller et al.; Tribe, 1991). It is important, however, to review the major themes emerging from the literature on the use of interpreters for the purpose of comparison with the findings presented in this study. So, this discussion will include perspectives on the training, roles, and ethics for interpreters, as well as what the literature has to say about the experience of counsellors and interpreters.

2.10.1 Training

The lack of standardized training for interpreters in mental health settings has been an important issue for some time (Raval, 2002). The reason is that the use of interpreters of "convenience," like family members, staff members, community members, is fraught with
problems (Musser-Granski & Carrillo, 1997). Untrained interpreters might have insufficient fluency in either language to convey emotional and mental health content. They may also omit, substitute or add information in an attempt to be more helpful or less offensive. A further ethical consideration is that untrained interpreters may not have the knowledge, skills, or support to deal with client issues.

Suggestions for the content of professional training emphasize that bilingualism is not the only or even the major criterion for gaining work as an interpreter (Corsellis, 1997 as referenced in Raval, 2002). Early comments from the field of social work first highlighted the need for interpreters to also have a working knowledge of the profession's goals and strategies (Baker, 1981). This knowledge should include the ability to understand and translate mental health terms and concepts (Musser-Granski & Carrillo, 1997). A paper by Bradford and Muñoz (1993) makes recommendations for even more specific training in concurrent translation, handling figures of speech, paralinguistic expression, and distortions in speech resulting from mental illness.

Alongside professional fluency, it has also been recommended that interpreters have basic training in counselling and interviewing skills, assessment, crisis intervention, and family violence (Musser-Granski & Carrillo, 1997; Raval; 2002). In addition to the need for basic western counselling skills, others have suggested training in confidentiality, ethics, self-awareness, the effects of power and oppression, cultural and racial identity development, and traditional healing methods (Raval, 2002). Finally, the literature also contains specific requests for the formal training of interpreters who work with refugees, in consideration of the psychological stress that can occur when dealing with a severely traumatized client population (Miller et al., 2005; Tribe, 1999).
2.10.2 Interpreter roles

The lengthy debate on what is the appropriate and most efficacious role for an interpreter takes place along a continuum, with one end arguing for mechanistic neutrality and the other for therapeutic involvement (Raval, 2002). The recommendation for absolute neutrality and "invisibility" is, obviously, difficult to achieve in real life and Baker (1981) makes some concessions to that by acknowledging the "support role" of the interpreter whereby the dominant counsellor's role is enhanced. Freed (1988) also allows a slight support role by suggesting that beyond being a neutral, verbatim "conduit" for the primary parties, the interpreter should also be prepared to inform the parties when a term is culturally unacceptable. Foster (1998) also emphasizes the primacy of the counsellor-client dyad and promotes the idea of the interpreter being a "technical vehicle" for the therapeutic process. Other recommendations include having the interpreter offer concurrent (simultaneous) translation with no enhancement of the client's meaning (Bradford & Muñoz, 1993).

The view of Musser-Granski and Carrillo (1997) is a good example of the middle of the continuum. They suggest that the interpreter's role in a clinical setting should still be "as unobtrusive as possible" (p. 54), but that when working with bilingual clients the interpreter must also communicate subtleties, idiom, hidden meanings, and non-verbal messages. While research has shown that the presence of an interpreter can be helpful even when the client speaks English as another language (e.g., Westermeyer, 1990), the distinction made by Musser-Granski and Carrillo regarding the fluency of the client seems to be strictly their own.

The variety of roles offered in the literature is best summarized by Raval (2002). In addition to the neutral/impartial role, other possibilities include cultural broker, cultural consultant, advocate, intermediary, conciliator, community advocate, link-worker, or bilingual worker. As a cultural broker, the interpreter explains the cultural context of the communication
for both the counsellor and the client. The cultural consultant role gives information and suggestions to the counsellor and can occur inside or outside of sessions. In the role of advocate, the interpreter speaks on behalf of the client. The intermediary function is one of speaking on the behalf of the counsellor or the client. A conciliator resolves conflicts that may arise between counsellor and client. As a community advocate, the interpreter may be involved in representing her or his community’s concerns around policy change. The term link-worker refers to the unique position the interpreter has in being able to help the counsellor identify any unmet needs of the client as well as being able to support the client in making informed choices. Lastly, the bilingual worker, which the current study termed “collaborative interpreter,” is one who takes an active role in the therapeutic process. These discussions of possible roles do not present them as mutually exclusive and acknowledge that interpreters are often required to take on many of them.

Another important addition to this discussion is the contribution by Mudarikiri (2002), who writes from a systemic perspective. He views the interpreter’s role as emerging from the relational context of the triad (therapist/client/interpreter) where all three are involved in the “ongoing process of maintaining a relationship with each other within the direct and translated conversations that are possible between them” (p. 183). This process results in the co-created, shared understanding of the client’s problem and the therapeutic conversation. Here the question is not about identifying the particular functions of the interpreter’s role; rather, it acknowledges the active and equal role each member of the triad takes in creating the therapeutic relationship.

2.10.3 Ethical considerations

Ethical guidelines for the use of interpretation services in therapy have only been developed for interpreters and come from primarily North American sources (Raval, 2002). They explicate some areas that are logically of concern, but they also contribute to the discussion
about appropriate roles. Raval offers a helpful summary of the work done by Kaufert and Putsch (1997), Roe and Roe (1991) and Solomon (1997), which I will endeavour to recapture here.

As with all counselling services, the need for confidentiality is emphasized. Ensuring confidentiality for the client can be more complex for an interpreter whose ethno-cultural or language community is quite small, making dual relationships difficult to avoid. Nonetheless, the need for confidentiality also speaks to the requirement that an interpreter develop and maintain a relationship of trust and respect with the client. Another ethical requirement is the need for accuracy. This guideline explains that interpreters must strive to correctly convey the words, and intent of the speaker in the language the client most easily understands. Also, interpreters must ensure completeness and refrain from any omissions. At the same time they are also responsible for letting the therapist know about any content that may be taken as offensive, and provide explanations of cultural differences. Similar again to ethics in other helping professions, interpreters must not accept work that is beyond their training or skills, or which has the potential to create conflict and undermine their ability to be objective. They should also be non-judgmental, caring, and promote client self-determination. Further the interpreter must not accept any compensation for their work other than what is provided by their employer.

The similarities to other western-based ethical requirements have been criticized by these same authors for not taking a broader cultural perspective and for maintaining the view of the interpreter as the therapist’s aide. They argue for ethical guidelines that better encompass the complexity of an interpreter’s work in the helping professions, and more research into the development of theory that can ground and inform clinical practice.

2.10.4 Therapists’ experiences

There is also very little research regarding the therapist’s experience in counselling through interpretation (Miller et al., 2005), so most of the literature is in discussion form (e.g.,
Bradford & Muñoz, 1993; Faust & Drickey, 1986; Freed, 1988; Musser-Granski & Carrillo, 1997; Raval & Smith, 2003; Sabin, 1975; Tribe, 1999). The only two studies I could find include Miller et al., who conducted research on the therapist’s experience of using an interpreter when working with refugees, and Raval (1996) who asked therapists about their work with interpreters in a child mental health setting.

The major theme arising from both discussion and research domains is about the difficulties therapists experience when using an interpreter. Therapists’ comments often revolve around the issue of loss of control and feelings of powerlessness. This experience is the direct result of not being able to understand the language of the client and of having to rely on the interpreter to provide all the information (Raval, 2002). Others have reported an uncomfortable sense of detachment from the client and from the therapeutic process. At the same time, therapists viewed the interpreter as being more engaged with the client and have felt either threatened or less effective (Raval; Tribe, 1999). Comments about the therapeutic process involve fears of or experiences with triangulation, frustration, and the need to simplify or slow down the process (Freed, 1988; Raval; Tribe). Finally, the literature also suggests that some therapists feel confused about their role and feel alienated, as if they were a “third wheel” (Musser-Granski & Carrillo, 1997).

The few positive comments correspond with the interpreter having the cultural consultant role and a trust-based relationship with the therapist (Miller et al., 2005; Raval, 2002). In this situation therapists viewed the interpreter as enhancing their work because of the greater access to cultural understanding and communication (Raval, 1996). They also reported feeling more understood by the clients and a greater ease with asking questions about the client’s culture and/or racial differences.
There is almost no consideration in the literature regarding the client’s experience of having an interpreter present and the comments that exist are subsumed within discussions about the therapist. In general it has been suggested that clients feel better understood and that counselling was helpful if an interpreter is used (Hillier, et al., 1994; Kline, 1980). However, it is also suggested that the client may feel more alienated if the interpreter is detached and neutral (Roe & Roe, 1991, as cited in Raval, 2002).

2.10.5 Interpreter’s experience

Echoing their predecessors, Miller et al. (2005), despair at the astonishing lack of research regarding the interpreter’s experience. Of the five studies that exist, two investigate the reactions of interpreters who work with refugees (Miller et al.; Tribe, 1991 as cited by Granger & Baker, 2002), one looks at their work with deaf populations (Harvey, 1984 as cited in Granger & Baker), and the remaining two examine the experience of interpreters with non-refugee clients (Granger & Baker; Raval, 1996). I have included in this review as well, a discussion on the use of interpreters (Razban, 2002) because it was written from the perspective of an interpreter.

The earliest research in this area (Harvey, 1984; Tribe, 1991) was unavailable in its original forms, so I had to rely on citations in the literature for details. First, Harvey’s findings, as Granger & Baker (2002) explain, pointed to the potential difficulties involved in the therapist-interpreter relationship due to the clinician’s perception of reduced power. Tribe’s study, as described by Granger and Baker, investigated the effects of working with refugee clients on interpreters. Her inquiry indicated the potential for interpreters to be deeply affected by their client’s stories; thus, the need for specialized training and supervision.

As mentioned earlier, Miller et al. (2005) conducted a narrative study that looked at the experience of counsellors and interpreters who worked with political refugees in torture therapy centers and mental health clinics. They interviewed 15 counsellors and 15 interpreters from these
settings in order to look at the impact of interpreters on the therapeutic alliance, the emotional experience of the triad, the effects on the interpreter's well-being, the multiple roles of the interpreters, and their training and supervision needs. The researchers acknowledged that they focused on an area of counselling that is highly emotional and trauma based. What Miller et al. (2005) found was that there was tremendous risk of interpreters being triggered by clients' stories back into their own traumatic memories. However, the interpreters felt that with the clinical and relational support of the therapists and other colleagues they were able to achieve a way to do the work with less emotional difficulty. They also found that when they experienced themselves as being helpful, the work took on a greater meaning.

The current study was done with collaborative interpreters working in a community counselling centre and so much of Miller and his colleagues' (2005) findings were of small relevance. The interpreters interviewed by Miller et al. were also all refugees themselves and all from Eastern European countries, whereas the participants in the current study were all immigrants from Asian countries. Another difference from the present research is that only three interpreters in Miller et al. had received any training in counselling.

Raval (1996) used a systemic approach to explore issues that arise when interpreters are used in counseling. His study was conducted in a child mental health setting where 12 therapists were given a questionnaire about their experience, and one interpreter was interviewed regarding the same. The interpreter's account emphasized the satisfaction she felt from giving families a voice and by helping them to understand the therapist better. She felt that her presence gave families more confidence to talk about culture-specific topics, and that she herself felt more confident to discuss difficult topics when she had a good working relationship with the therapist. Sometimes she felt that the therapist felt somewhat threatened by her because of her alliance with the family. However, she valued flexibility in her role and saw neutral interpreting as
limiting to the therapeutic process. With regard to interpreting she also spoke about the difficulties of finding the right word and having to make quick decisions about how to express things correctly. Finally, she commented that she thought she experienced a greater emotional impact from the work than the therapist did. In a later discussion, Raval (2002) summarized what he found to be the major themes for interpreters. These focused on the negative experiences related to not having professional recognition or autonomy, having poor relationships with the counsellor, lacking support, and being alienated by their own communities for being “western.”

Razban (2002) speaks from personal experience and again asks for more research on the topic. Her experience is presented as a discussion revolving around suggestions for the use of interpreters, what criteria should be used to determine the quality of interpretation, and an emphasis on the need for better working relationships between counsellors and interpreters. While suggestions from this perspective are valuable, insight into the author’s lived experience is limited to extrapolation.

The most extensive research on the interpreter’s experience has been done by Granger and Baker (2002). Their work emerges from Britain, as does Raval’s (1996; 2002), and strongly points out the lack of actual research and the reliance on an “interpreter’s voice...drawn from practitioners and clients” (p. 101). The original study was conducted by Granger in 1996 and remains as an unpublished doctoral thesis. It produced findings from 64 participants who returned questionnaires that contained both quantitative and qualitative data. Half of Granger’s participants were untrained in either counselling or interpreting, most were highly educated, and most had done casual or freelance interpreting for over five years. Additionally, all had worked in multiple settings and the majority agreed that their role was primarily that of a verbatim interpreter and less so a cultural broker. One of the limitations noted by the researcher was that it may have been better if a single setting had been used.
The themes that emerged from the qualitative data concerned skills, difficulties, and role conflicts. The interpreters voiced a strong recognition that interpretation in a counselling setting required multiple abilities including linguistic skills, knowledge of mental health issues, legal and immigration laws, understanding meaning and intent behind the communication, flexibility, empathy, and trust-building skills among others. The difficulties they related concerned feeling unappreciated and not respected by the clinician; the emotional demands of the work; lack of support and supervision; and work setting stressors. Role conflicts were similar to those already outlined in the literature; the main question being where on the continuum of neutral conduit/cultural consultant to place themselves.

2.11 Conclusion

The practice of using interpreters in a counselling session is largely uninvestigated, even though the use of interpreters has been documented through discussion in the literature for more than 30 years. What research does exist on this topic is dominated by investigations into the therapist’s experience. Only five previous studies are based on the interpreter’s experience and most of those focused on the role of the verbatim interpreter. There are numerous roles that an interpreter may take in counselling, the most complex being the role of collaborative interpreter; therefore, it seemed important to bring in more knowledge from the interpreter’s perspective, especially that of the collaborative interpreter’s, to the questions that still exist on practice, training, and ethics for interpreters in counselling settings. As far as can be determined, the present study is the only one that involved more than one collaborative interpreter and encompassed experiences across a variety of languages and cultures. Because the role of collaborative interpreter is multifaceted and because the current research included six languages and three cultures, knowledge from several areas needed to be considered.
Obviously, the present research had to be grounded in multicultural counselling theory (MCT) in order to understand the complex effects of culture on the therapeutic relationship, the counselling process, and the ethical treatment of culturally different clients. In addition, MCT offered insight into the dynamics involved in the relationships between culturally different counsellors as well as ethnically similar counsellors and clients. However, investigating the act of translating therapeutic intent across languages and cultures also requires some understanding of language as a cultural meaning system and as a vehicle for therapy. Thus, it was important to have perspectives from western psychology in general concerning the motivational intent of therapeutic language. Moreover, it was essential to understand certain aspects of language theory insofar as it describes language as infused with power discourses and as the way in which we construct culture. Interwoven with ideas about language are theories about bilingualism and what constitutes fluency. At the same time, considerations about fluency involve ideas about cultural identity and biculturalism. The collaborative interpreter is charged with doing more than transferring lexicons or even cultural understandings. She or he is responsible for communicating across cultural meaning systems, including the cultures of western and indigenous psychologies, in order to facilitate the therapeutic conversation. Hence, any investigation into the collaborative interpreter’s experience must acknowledge the complex and dynamic relational, therapeutic and linguistic processes involved. While the present review of the literature is not exhaustive, it presents the major constructs that underlie the current research.
3 METHODOLOGY

3.1 Introduction

As previously discussed, there is astonishingly little research of any kind on the subject of counselling through interpretation. The extant literature does offer recommendations for the use of interpreters; however, these have emerged almost exclusively from therapist commentary on his or her experience. Curiously, discussions from the therapist’s point of view occur in the literature as far back as the 1970’s (e.g., Sabin, 1975; Freed, 1988; Raval, 2002), while inquiries focusing on the interpreter’s experience in a counselling situation still remain virtually absent (Granger & Baker, 2002). The reality of Canadian demographics and the infeasibility of generating enough language-specific professionals indicates that the use of interpreters in mental health settings will continue and may even increase (Health Canada, 2001). Thus, in order to contribute to a better understanding of this practice, I thought it important to include the unheard voice of interpreters.

Since my area of inquiry was unexplored, my goal as a researcher was to begin by uncovering the lived experience and meaning of re-creating therapeutic intent across languages and cultures. I wanted to generate a description that could contribute to an emerging understanding of this important therapeutic experience. This description evolved from the accounts of the daily practice of four collaborative interpreters working with an English-only-speaking therapist. I used hermeneutical phenomenology as the interpretive method of inquiry to uncover the common, essential meaning structures of their experiences. My findings were produced from a mutual process among the participants and myself that involved speaking, listening, reading, writing, reflecting and re-reflecting. As such, it is by no means a final understanding of the meaning of this experience (Hein & Austin, 2001). By using an interpretive
methodology, my hope was that my description of the meaning of translating therapeutic intent would generate reflection and re-reflection through the multiple perspectives of the readers and lead to further study (van Manen, 1990).

### 3.2 Method

I chose to use a qualitative methodology for this research to be able to produce a “full and integrated description” (Polkinghorne, 1983, p.164) of the experience in question that was sensitive to the lifeworld of four unique persons who conceptualized their worlds in multiple languages. The question I sought to answer was: **What is the meaning of the collaborative interpreter’s lived experience of re-creating therapeutic intent across languages and cultures when working with a dominant culture, English-speaking counsellor?**

Qualitative methods are particularly suited for human science inquiries that involve complex social and contextual phenomena, about which little is known (Marshall & Rossman, 1999; Snape & Spencer, 2003). A qualitative approach answers the ontological question, “What is reality?” by claiming that the world is constituted by our conscious mind through the interpretation of phenomena (Prasad, 2005; Snape & Spencer). It also contains the epistemological assumption that interpretation produces our meaningful understanding of the world. Thus, there is no objective reality outside of human experience that can be generalized or reproduced; rather, human knowledge is a contextually and relationally influenced, constantly changing “map” that informs action (Polkinghorne, 1983; van Manen, 1990). Therefore, the validity of qualitative research relies on whether or not the results contribute to “[guiding] human action effectively” (Polkinghorne, p. 171).

In contrast, quantitative approaches assume that there are external structures to human experience that can be determined through direct observation. Results are drawn from the causal, linear relationship between certain previously identified variables and validated by their
reproduction in similar studies. Since my research was on an unexplored area of human action, trying to identify variables was premature. Hence, I chose to pursue a holistic approach that more aptly addressed my interest in the subjective and inter-subjective processes of meaning-making in cross-linguistic counselling. A qualitative method also permitted me, as a researcher, to enter into a process of mutual inquiry with the participants, one that closely parallels the process of reflection and meaning-making in their work with clients and English-speaking counsellors.

There are many approaches to qualitative inquiry, depending on the focus of the research. The traditional assumptions of qualitative research are: that truth is subjective; that the researcher gains understanding from the participants; and that human experience can be understood through the description of common meaning structures (Marshall & Rossman, 1999; van Manen, 1990). All qualitative research is characterized by its focus on the natural world and the emergence of understanding through interpretation (Marshall & Rossman). The major paradigms of qualitative inquiry have been identified by Denzin and Lincoln (1994, as referenced by Marshall & Rossman) as “constructivism and interpretivism, critical theory, feminism, ethnic studies, and cultural studies” (p. 3). Each paradigm leads to certain approaches with a focus on lived experience, society and culture, or language and communication. Traditional approaches explore the essential meaning structures of the experience of a phenomenon, while postmodern approaches challenge the assumption of universal meaning structures, proposing instead that meaning is always in flux, co-constructed within multiple perspectives and contexts (Richie & Lewis, 2003, as cited by Constantine, Hage, et al., 2007).

Because of the multiple cultural contexts and multiple languages involved in this study, I chose to use an interpretive method that was able to focus on language and meaning-making, inherent in the phenomenon of counselling through interpretation, and still be sensitive to the collaborative interpreter’s lifeworld. I chose not to use a linguistic method of analysis because I
wanted to understand the experience of co-creating therapeutic meaning. Semiotic methods assume that human experience is pre-structured by a society's language system (Polkinghorne, 1983; Prasad, 2005). Thus, they seek to understand the codes and structures of a linguistic tradition rather than the meanings constituted by individual experience. I also did not choose a critical method despite the potential influences of power and oppression because of race, class, gender, culture, and the dominant voice of western psychology on the final interpretation. The reason for this choice was that my goal was not to foster change in an oppressive social structure. First, I wanted to open a conversation on counselling through interpretation that emerged from the voice of the interpreter. Before a critical study of counselling through interpretation could be considered, the lived experience of interpreters in their daily practice needed to be brought into the process of reflection.

In order, then, to study the phenomena of interpreting therapeutic intent across languages and cultures, I needed a methodology that could: 1) address the subjectivity of the researcher's and the participants' perspectives, 2) incorporate the inter-subjectivity of the meaning created by the counsellor/interpreter/client triad, 3) offer a reflective process for data in the form of the ordinary language produced by diverse linguistic communities, and 4) situate both myself, as the researcher, and the participants in a context of mutual reflection that corresponds to the action of the triad in session.

3.3 Research design

To understand the meaning of recreating therapeutic intent across languages and cultures for the collaborative interpreter, I used the qualitative method of hermeneutic phenomenology. Phenomenological research in psychology has come to include a variety of methods for exploring human experience (Hein & Austin, 2001). However, two main branches of methodology have been designated by their respective philosophical roots: empirical or
transcendental phenomenology, which emerged from Husserl’s writings, and hermeneutical-existential phenomenology, which evolved from Heidegger’s propositions. The present study was influenced by Heidegger’s philosophy of phenomenology and also by Gadamer’s expansion of Heidegger’s work on the use of the hermeneutic circle as a method for interpreting written text. However, before expanding on their contributions to phenomenology, it is helpful to explore its beginnings.

3.3.1 Transcendental phenomenology

The origin of phenomenology is credited to the philosophy of Edmund Husserl (Giorgi, 1997; Patton, 2002). Husserl argued for the purposefulness of studying human meaning-making and proposed phenomenology as a foundational method for human science inquiry, one that could reveal the basic structures of human experience (Hein & Austin, 2001; Hersch, 2003). Traditional scientific inquiry, he maintained, was inadequate to address human experience because it was predicated on the notion of a subject-object split. This division, or dualism (Descartes’ ontology), proposed that the human mind is of a different order of being than are objects in the material world. Put more simply, dualism considers the existence of mind to be separate from the existence of things. In Husserl’s view, this ontology was impossible since it did not explain the relatedness between subject and object, that is, how the human mind can come to know the separate world of objects (Beyer, 2007; Hersch). All knowledge, Husserl argued, was constituted through the conscious experience of phenomena and the subsequent structuring and meaningful interpretation of that lived experience (Hein & Austin; Prasad, 2005). Husserl maintained that our subjective experiences are the source of all knowledge; therefore, there was no meaning outside of consciousness (McNamara, 2005). Since our understanding of the world, or the meaning of our experience, is constituted through language in our conscious mind, meaning, he insisted, does not exist permanently or intrinsically in an object apart from
our subjective experiencing of it (McNamara; Prasad). Fundamental to Husserl’s concept of
consciousness is his emphasis on intentionality. Briefly, intentionality describes the basic
property of consciousness: that consciousness is always consciousness about something (Hein &
Austin, 2001; Hersch, 2003). Again, it relates to Husserl’s view that there is no subject-object
split. Consciousness is always directed at and related to an object (Hersch).

Phenomenology, then, offers a method to systematically reveal our essential relatedness
to phenomena. Objects in everyday experience, Husserl argued, are naively perceived through
what he called our natural attitude. The natural attitude of everyday life, or our lifeworld, is our
“original, pre-reflective, pre-theoretical attitude” (van Manen, 1990, p. 7) and is composed of
established meanings that form our sense of the world (McNamara, 2005). We are born into our
natural attitude insofar as we inherit a system of socio-cultural beliefs that contribute to our
common sense of things. It is our natural attitude that hides the essence of a phenomenon, that
is, it conceals the primary correlation between subject and object (McNamara). A related and
important concept to the idea of a natural attitude is Husserl’s notion of intersubjectivity. When
we encounter another person, he explains, we naturally assume that their subjective world is the
same as ours. In the process of interacting we come to create a shared meaning or “common
sense” about the phenomenon, which we then use as a common resource to interpret the meaning
of that phenomenon. In a broader sense, intersubjectivity can be defined as the process through
which the common framework of consciousness that unites all human beings is created (Hanna,
1996).

The goal of a phenomenological study is to understand and describe the “processes of
subjective reality construction” (Prasad, 2005, p. 14) that occur in a person’s everyday
encounters with phenomena in order to reveal the essential meaning structures of experience.
Phenomena, Husserl insisted, can only truly be known through the process of internal reflection;
thus, the researcher must “bracket,” or set aside, all preconceived understandings and biases about the phenomenon in order to achieve a “presuppositionalist perspective” (Hein & Austin, 2001, p.5). By detaching from one’s natural attitude, the researcher is open to an intuitive understanding of the object as it directly appears to consciousness (McNamara). Once the phenomenon is intuitively grasped, a description of its essential meaning, constituted through language, can be developed (Hein & Austin). The concept of bracketing to achieve a presuppositional, self-reflective orientation, contains the assumption that consciousness has “privileged access to its own contents and ‘autonomy’ with respect to its own rational activity” (Wachterhauser, 1986, p.15). It is this assumption that hermeneutical phenomenology argues strongly against. However, before examining the tenets of hermeneutical phenomenology, an introduction to hermeneutics is useful.

3.3.2 Hermeneutics

Hermeneutics, or the “science of interpretation” (Eagleton, 1983; Gadamer, 1989), originated in ancient Greek culture where it referred to the process of revealing the obscure (Prasad, 2005). By the middle ages, hermeneutics had developed into a scholarly, theological approach to the study of sacred texts, which were considered to be on one level ineffable to human understanding and therefore required a rigorous peeling away of the “veil” of human existence through the repetition of questioning (Eco, 1986; Gellrich, 1985). Later, hermeneutics influenced the study of literature, history, and the social sciences (Prasad).

As a philosophy, hermeneutics is rooted in questioning the substance of texts and their interpretation. Epistemologically, hermeneutics views all human understanding as temporal and language-based (Wachterhauser, 1986; Prasad, 2005). The temporal nature of knowledge, or its “historicity,” refers to the idea that human nature is a function of our relationship with our social and communal history and the language system that symbolizes it. Thus, human nature is
transitional rather than absolute, and our possibilities for understanding are interpreted by and limited to our history (Wachterhauser). So, while hermeneutics in the traditional sense focuses on discovering the "authentic message" of a text, it also emphasizes that the interpreter (reader) must establish a connection with the author's world view in order to mediate between their different perspectives (Prasad). In doing so, the interpreter can separate out the historical context of the text and the interpreter's reading of it to derive the "timeless" or universal meaning of human experience expressed therein.

3.3.3 The hermeneutic circle

Fundamental to understanding hermeneutics as a method is the metaphor of the "hermeneutic circle." The hermeneutic circle conceptually explains how a text is linked to the larger context in which it is read (Prasad, 2005). It has been described as an endless "spiral of understanding" (Prasad, p. 34) where a text can only be understood from within its context and the context can only be understood from within the parts of a text. More specifically, the meaning of a text does not simply reside in the words themselves since they are inextricably woven into the culture which produced them. At the same time, one cannot understand the cultural context without knowing and reflecting upon the words and sentences which describe it. By examining both the text and its context, hermeneutics hopes to produce a deeper and more meaningful understanding of the whole. Ultimately, the hermeneutic circle is supposed to facilitate the unveiling of the hidden or deeper meaning of the text. The premise in hermeneutics is that the real meaning of a text lies in its subtext, the "text underneath the surface-text" (Prasad, 2005, p. 36). This assumption retains a somewhat positivist view regarding the possibility of some ultimate meaning; however, the inclusion of contextual influences precludes any expectation of a final understanding.
Wilhelm Dilthey is credited with introducing the idea of hermeneutics as a method for interpreting human experience (van Manen, 1990; Prasad, 2005). Dilthey was concerned that if all knowledge was embedded in an historical context, was it possible to arrive at an underlying universal meaning of human experience (Grondin, 2003)? Dilthey expanded the idea of “text” to include any cultural object and proposed that lived experience could only be known through its “objectification” in the form of language, beliefs, and culture (Prasad; van Manen). He saw hermeneutics as the key to “establish in theory, against the constant intrusion of Romantic arbitrariness and skeptical subjectivism in the domain of history, the universal validity of interpretation, the solid basis of all historical certainty” (Dilthey, 1900 as cited by Grondin, p. 67). Simply put, Dilthey saw hermeneutics as a way to determine if individual, subjective knowledge has an authentic and unchanging validity (Grondin). However, Dilthey’s concept of historicity failed, in the view of Heidegger and Gadamer, to explain its inherent paradox: Dilthey argued for the “relativity of human consciousness” while at the same time proposing that the interpreter could somehow be free of her or his own historicity and achieve an “objective validity” through an empathic perspective on the life of others (Wachterhausen, 1986).

3.3.4 Hermeneutical phenomenology

Hermeneutical phenomenology initially developed from the philosophy of Martin Heidegger who departed from Husserl’s ontology to offer an entirely different view of being. Heidegger argued that the nature of human being is completely different from the nature of objects because of the existence of what he terms “Dasein” (Heidegger, 1962). Dasein is that part of consciousness which realizes itself in the process of existing. According to Wachterhauser (1986), Dasein translates as “there-being,” which clearly puts the emphasis on the situatedness of human being. In Heidegger’s view, we cannot separate ourselves from our observations; thus, we are never an “autonomous [subject] in relation to an object” (Hersch, p. 60).
50). Instead, he argued that the fundamental nature of being (Dasein) is always relational. In other words, being is a relational system that is always in the process of revealing the world (Hersch). As such, being is always becoming, always incomplete, temporal, and contextual (Hersch). Heidegger called this fundamental nature of our relatedness, being-in-the-world.

Our knowledge of the world, or the meaning we make of things, emerges first from our everyday, preliminary understandings, which Heidegger termed “the forestructures of understanding” (Packer & Addison, 1989a). The key here is that Heidegger considered our being to be constituted by these historically inherited ways of understanding. Being-in-the-world is our situatedness in our historically mediated, taken-for-granted relationship to reality (Wachterhauser, 1986). In other words, we do not understand the meaning of a phenomenon by reflecting on the phenomenon itself. We bring to that encounter the anticipation of meaning formed from the linguistically mediated, surrounding socio-cultural system of beliefs and from the context of our own concerns at the time (Hersch, 2003; Wachterhauser, 1986). However, revisions to our understandings are constantly being interpreted by our ongoing experience of being-in-the-world. Hence, there is no absolute meaning or “reality”; the meanings we make of phenomena are constantly being revised and represent only one present understanding of multiple possibilities constituted by history, language and culture (Hein & Austin, 2001).

According to Heidegger, then, understanding is circular where new meanings emerge through our ability to make reference to our pre-understandings (Packer & Addison, 1989a; Wachterhauser, 1986). For that reason, he viewed hermeneutics as the basic structure of experience, that is, the only route to understanding. Being-in-the-world (Dasein) is hermeneutical, where the understanding of any phenomenon is first situated in its larger context (pre-understandings) and, as we are in the act of perceiving it, the phenomenon can influence our perception of the context (new understanding) (Wachterhauser). The forward arc of the
hermeneutic circle is always a projection onto the phenomenon, while the return arc offers the possibility of appraising that projection to discover what changes might be needed (Wachterhauser). Heidegger saw hermeneutics as the method that could open "to Dasein the possibility of understanding itself, and of being" (Heidegger as cited by Grondin, 2003, p. 95). As a method of interpretive inquiry, he emphasized that we must enter the hermeneutic circle in the right way by making our pre-understandings apparent.

Gadamer was equally convinced that all interpretation is based on prior understandings. However, he elaborated on Heidegger's work in some significant ways. For example, he redefined the concept of forestructures by using the term "prejudices" for the "unavoidable preconditions for our interpretations" (Prasad, 2005, p. 33). Instead of prejudices being inescapable, though, he argued that there are prejudices which enhance our understanding as well as those which do not. He argued that the goal of the hermeneutic act is to defer the prejudices that impede understanding and bring forward the ones that enhance it. By this deferment, Gadamer is in no way implying that prejudices can be suspended to obtain some kind of objective distance (Prasad). His distinction was made to emphasize the problem of an interpreter's inclination to impose meaning on a text from a prior and personal framework of beliefs, that is, his or her historically based understanding (Malpas, 2005).

Like Heidegger, Gadamer too saw the task of our "historically effected consciousness" as hermeneutical (Grondin, 2003). For him, hermeneutics was not a process by which one achieved understanding by discovering the most obscure sphere of subjective meaning (Malpas, 2005). He saw hermeneutics as being able to bring the interpreter closer to the text's "horizon," the term he used to describe a text's historical framework of meaning (Malpas; Prasad, 2005). The interpreter too approaches the text from a horizon of understanding and the mutual engagement of these horizons effectively revises the other. His argument is that any horizon of understanding
is changed by the encounter with another (Malpas). Thus, all understanding is negotiated in relationship. The hermeneutical act, for Gadamer, is a dialogue between reader and text whereby a common horizon, or framework of meaning, is created. This common horizon is in part what Gadamer means by a “fusion of horizons” (Malpas). More specifically, though, this concept encompasses Gadamer’s distinction of prejudice. Since all interpretation happens within an historical framework, the task for the interpreter is to “transport” oneself into the horizon of the past in order to discern how the past may be applied to the present (Grondin; Wachterhauser, 1986). However, Gadamer questioned whether or not it was possible to leave the framework of the present in order to engage with the past. He viewed the horizon of the present as constituted by the past and the view of the past as dictated by the concerns of the present. Therefore he argued, “understanding is always the fusion of these horizons supposedly existing by themselves” (Gadamer, 1986 as cited by Grondin, p. 96).

By conceiving of hermeneutics as a dialogue, Gadamer re-emphasized the importance of language. He maintained that all thought was linguistic since we must find the words to describe something in order to have an understanding of it (Wachterhauser, 1986). Unlike the structuralist view, which sees language as a system of signs that represent reality, Gadamer thought of language as a common system of meanings that allows human beings to have a shared sense of the world. Understanding can only come through our traditional way of speaking about a phenomenon and an ensuing dialogue, which produces the possibility of new insights (Wachterhauser). While Gadamer insisted that there is no meaning without language, he also underscored the temporality of meaning by arguing that every linguistic account of a phenomenon is selective (Wachterhauser). Our prejudices are linguistically mediated and, as such, emphasize certain aspects of a phenomenon and hide others. This view is similar to the constructivist approaches to literary criticism, such as feminist theory, which foreground the
discourse created by the absences in a text. Language, he continues, only exists in dialogue where we are engaged in the purpose of understanding each other; therefore, dialogue is the true method of inquiry (Wachterhauser). According to Gadamer, understanding is gained by seeking what is implicit in a linguistic account (Wachterhauser). This deeper perspective on a phenomenon is not derivable from a specific method, but is discovered through conversation. Thus, for the human science researcher meaning emerges from the “exchange of viewpoints” between researcher and text, and from subsequent readings of the researcher’s interpretation (Wachterhauser, p.33).

3.3.5 Advantages of the hermeneutic phenomenological approach for this research

One general advantage to using hermeneutical phenomenology for this study was that it could best begin to address the dearth of research on the experience of interpreters. As an exploration of the meaning of lived experience, this approach could illuminate the participants’ multilingual, multicultural lifeworlds and, thereby, bring the “interpreters’ voice” into the discourse on the use of interpreters in counselling. As Lindseth and Norberg (2004) point out, in order to even begin a conversation on what might improve a certain situation or practice, one must start with the lived experience of it. Reflection on the meaning of that lived experience has the potential to raise awareness of helpful and unhelpful counselling practices in this situation and begin a conversation that may change the prevailing discourse on counselling through interpretation. More specifically, though, my question was complex insofar as it focused on the process of re-interpreting meaning within the frameworks of culture, language, and counselling. I needed to employ a method that could address multiple contexts and the interplay among them. Thus, there were many more specific reasons why the philosophy and the method of hermeneutical phenomenology best supported an investigation of this kind.
To begin, it is important to point out the many parallels I realized in the process of considering hermeneutic phenomenology as the method I would use to investigate the collaborative interpreter’s experience of re-creating therapeutic intent. Personally, I have long considered subjective experience and the sense we make of it to constitute our fundamental being. Further, I agree with the phenomenological assumption that we are born into a system of meanings, constituted through language, which provides us with a common understanding of the world. My years as a teacher and trainer in the areas of cultural and diversity awareness have also contributed to my view of the self as being-in-the-world and that our sense of well being is reliant upon the nature of our relatedness. Because of my background in literary studies, I spent years engaged in the close reading of poetry with the purpose of revealing the essential aspects that, beyond the historical context in which it was written, could continue to evoke human emotion. As a result, I was well acquainted with, and perhaps resolute about, the necessity of bringing an awareness of context to the relationship between reader and text.

Obviously, then, my approach to the discovery of new understandings is hermeneutical. As a counsellor, I have been grounded in the dialogic process of developing new understandings, viewing the meanings clients make of themselves and their circumstances as historical, temporal, and changeable. Because I consider that all human understanding is relational, I trust that the therapeutic relationship has the potential to revise any understanding for the better. I must point out here that I do not believe that this revision of understanding occurs unilaterally for the client. In my view, therapy is hermeneutical, where both client and counsellor mutually achieve new understandings that then become part of each one’s lifeworld.

Beyond my own experience, it seemed to me that the participants in the present study had been personally involved in a process that matched the basic tenets of hermeneutical phenomenology as well. By that I mean their lived experience of immigration and acculturation
engaged them in a dialogue between two cultures, two meaning systems that were rooted in history and language. As discussed earlier, immigration can result in a considerable disruption to one’s sense of self with all the attending losses of relationship. In one way this can be described as an abrupt sense of profound difference in one’s relatedness, or being-in-the-world, which leaves the immigrant with the temporal question: “Who am I?” Moreover, the dominant discourse of the new culture has the potential to overwhelm familiar dialogues and even make them impossible. One new understanding that can emerge from immigration and acculturation is that the common understanding of a phenomenon is language and culture-bound. In fact, in the process of becoming bicultural and bilingual, people develop an increasing awareness that they hold more than one set of pre-understandings to bring to a situation, and that the prejudices of each can benefit or disadvantage them. As well, experiences with bias and racism can also raise the awareness of how differently their identity can be interpreted.

With respect to the participants’ work as collaborative interpreters, the parallels with hermeneutic phenomenology also seemed obvious. As previously discussed, the efficacy of counselling rests largely on the quality of the therapeutic relationship. Usually, as well, the goals of counselling are directed toward coming to a new understanding, or meaning, of a situation and therein discovering new solutions or goals. Thus, a client’s lifeworld is revised, through dialogue, to incorporate the best of her or his historical sense of self-in-the-world and present understandings. The collaborative interpreters were engaged in the shared experience of creating a therapeutic relationship among the triad (collaborative interpreter, English-speaking counsellor, client), which can be thought of as intersubjective. They were charged with creating, through interaction, a deep sense of trust (relatedness) and a shared system of meaning. One of their primary skills in support of multicultural counselling was their ability to highlight the contextualization of the client’s lived experience by referencing for the English-speaking
counsellor differences in cultural values and beliefs. This function can be compared to the ability to reveal the client’s past and present horizons as well as those of the English-speaking counsellor. In this manner, one can say the collaborative interpreters created a fusion of horizons where the helpful understandings of the past in each culture were brought forth to inform the present.

Of course the counselling process itself was dependent on mutual understanding created through language. In order to interpret both the words and the cultural meaning of what was said in a session, the collaborative interpreters had to employ a method of inquiry that was hermeneutical in nature. As Edwards (1994) points out, language interpretation is hermeneutical because it involves the ongoing process of contributing to meaning. Specifically, the collaborative interpreters’ task often involved reworking a concept because no literal translation was possible. To do so, they had to be aware of the context of the client’s words (verbal text) as well as their own context as a listener (reader); inquire and reflect with the client around ways to communicate the idea in a different way (contextual distortions), change that reflection into English (new verbal text), inquire and reflect again with the English-speaking counsellor about meaning and response (contextual distortions); and come back to the client with any more clarifications or new inquiries (new understandings). In their dealings with the verbal texts produced by all in the triad, they were both reader and author, and contributed to the ability of the others to also take on both roles and uncover new meanings.

As I have said, these parallels inspired me to use hermeneutical phenomenology for this inquiry; however, by doing so I gained several advantages. First, the premise this method holds that all knowledge consists of temporal perspectives allowed me to explore the multiple interpretations of lived experience that arose from my interviews with participants from different language and cultural groups. I was able to consider perspectives that were unique to each
language, each culture, each individual, as well as the different perspectives that emerged from their lived experience of immigration, acculturation, and the dominant culture. This method also provided me with the means by which I could consider the possibility of alternate or more subtle meanings in descriptions that seemed different or inconsistent.

Secondly, the concept of being-in-the-world made it possible for me to explore the co-constitution of the collaborative interpreters’ lived experience that occurred in the midst of the triad’s therapeutic process. This premise holds that self-understanding is inextricable from our essential relatedness to the world. Thus, instead of seeing their descriptions as separate accounts, I could explore the relatedness of their interpretations. This ability was important because the act of re-creating therapeutic intent was reliant upon consensus. Further, I was able to view this relatedness as embedded in the larger social contexts of ethno-specific cultures, western culture and western psychology. The concept of being-in-the-world also assumes that my interpretation of the collaborative interpreters’ experience would arise from dominant culture discourses on the meaning of therapy and helpfulness. As a result, I could acknowledge the subjectivity of my perspective as a researcher and implement that subjectivity in my interpretation.

Thirdly, and inclusive of the idea of self and world being co-constituted, hermeneutical phenomenology’s proposal that all knowledge is situated in our historically mediated pre-understandings enabled me to consider the prejudices arising from ethno-cultural perspectives as well as those from western and indigenous psychologies. Specifically, I could explore the personal meanings each participant had drawn from their individual social traditions and history. At the same time I could examine the influence of the dominant discourse in western psychology about what constitutes help and helpfulness. Further, I could look at the discourse of indigenous psychologies on the meaning of those constructs as well.
A fourth advantage to using hermeneutic phenomenology resides in its premise that everyday, purposeful action is the proper concern of human science. The intent of this method is to produce a description of everyday activity and, through the interpretation of that description, uncover an account that improves our understanding (Packer, 1989). My research was focused on revealing the underlying meaning of the bi-counsellors’ experience as it manifests in the daily practice of translating therapeutic intent. I also held two presuppositions: 1) that western-born counsellors who are bilingual construct most of their daily practice around the values and beliefs of western psychology, and 2) that bicultural, bilingual individuals construct a considerable part of their daily living around mediating between and/or synthesizing cultures. As a result, I expected that the collaborative interpreters would bring their distinct, everyday lived experience into their daily practice. My hope was that a dialogue about their practice would provide a meaningful description that was freer from opinions that arose from dominant culture psychology.

The fifth advantage to using this method lies in its emphasis on language. As noted earlier, hermeneutic phenomenology proposes that all thought is linguistically mediated; thus, language is the common system of meaning into which we are born. Dialogue, then, is the true method of inquiry (Gadamer) and exclusively where understanding resides. Dialogue is also thought of in a hermeneutical sense as “reader and “text” ; the researcher, then, is charged with challenging the pre-understandings of text and self and in the process create a fusion of horizons where a shift in perspective (new understanding) may emerge. My research site was located in the transcribed English dialogue between the participants and me because the English language was the way we co-interpreted the meaning of re-creating therapeutic intent. I was only too aware that I could only access their understandings through English, and that we could only use English to create new understandings, which eliminated the use of their first languages to
describe their experiences. So as I read the texts, I had to challenge the pre-understandings of the English language and question its ability to mediate lived experience in another culture. To do so, I relied in part on the new understandings I gained from earlier work where I had examined the grammatical structures used to interview a bicultural, bilingual professional. I also conducted the pilot study discussed in chapter one about the impact of English on the counselling process. Further, I made notes after my interview with each participant of my experience of the research process.

Perhaps the most important advantage to using this method was being able to include my subjective perceptions instead of trying to suspend them in the attempt to gain objectivity. As Packer (1989) explains, “If we are to form psychological theories that do justice to humankind, we must start from our practical understanding of people and practice . . . instead of attempting to be neutral and objective” (p. 98, emphasis his). A hermeneutic phenomenological approach brings forward the personal experience of the researcher to locate it within a research tradition that acknowledges understanding as beginning with prejudice (Gadamer, 1989; Grondin, 2003). As a white, middle class, western trained, English only-speaking counsellor and researcher, who was inquiring about the experience of multilingual, persons of colour who had immigrated to Canada as adults, I needed a method that could underscore my cultural understandings. As I explained previously, I did not choose a critical methodology because almost nothing is known about the practice of counselling through interpretation from the perspective of the interpreter. I wanted to use a method that could reveal their voice while at the same time provide a reference point for my interpretation of that voice. I also wanted to open the possibility of continuing the dialogue and the formation of new questions about the collaborative interpreter’s experience through the engagement of the reader’s further reflection upon my final interpretation.
My choice of methodology is also supported by the research of Polyzoii (1985), who used hermeneutical phenomenology to study the immigrant experience. Her argument began from the similar position that prior literature on the subject was exclusively from the dominant culture’s perspective, focusing on the attainment of assimilation rather than on the immigrant’s lived experience of it. Polyzoii said she chose hermeneutical phenomenology in order to incorporate researcher bias as a “necessary ingredient in evolving an understanding of the phenomena under study” (p. 53). Thus, the method could address how bias affects the dominant culture’s understanding of non-dominant culture lived experience; could develop new understandings by making the researcher’s evolving relationship with the text transparent; and, thereby, implicate the reader in this evolving understanding.

3.4 Research Method

Hermeneutics is traditionally concerned with the multiple interpretative possibilities in extant written texts. However, hermeneutic phenomenology has expanded the focus to include the idea of text as “a metaphor for the understanding of conversation, interactions, and events” (Prasad, 2005, p. 39). As applied to psychological research, hermeneutics approaches human experience “as if it has a semantic and textual structure” (Hein & Austin, 2001, p. 9). Thus, it supports using the linguistically mediated everyday lived experience of individuals as the source for understanding their activities. This understanding is generated from the shared interpretation of meaning that occurs from the researcher’s relatedness to the text (Grondin, 2003). The value of hermeneutic phenomenology as a research method is that it provides insight into the more obscure meanings of human activities (Prasad). However, this type of research does not include a strict method for analysis because, as a circular, interpretive act, it must follow the path set by the unique nature of the text under study (Prasad; van Manen, 1990).
Characteristically, the method involves writing and rewriting to produce understanding, and rests upon researcher qualities of openness, insightfulness, sensitivity to language, and the ability to be reflective (van Manen, 1990). The result is a linguistic description of the phenomenon, one that is "holistic and analytical, evocative and precise, unique and universal, powerful and sensitive" (van Manen, p. 39). This produced text implicates the reader of the research as well; the inquiry continues to be circular, incorporating the interpretive actions of the next readers of the text (van Manen).

3.4.1 Entering the circle

Conducting a hermeneutical inquiry begins with the researcher being properly oriented to the text (van Manen, 1990). This orientation is what is meant by "entering the circle" and requires that the researcher come from a vantage point of deep interest and personal experience (Packer, 1989; van Manen). Hence, the starting point of any interpretation is always a description of the researcher's pre-understandings about the area of inquiry (Packer). As Heidegger explained, "any interpretation which is to contribute to understanding, must already have understood what is to be interpreted" (Heidegger, 1927, as cited by Packer, p. 97). I entered the interpretive process from the perspectives I had gained by being involved in co-therapy with collaborative interpreters; practicing multicultural counselling; writing articles and curriculum for multicultural counsellor training; and teaching and training in the areas of cultural and diversity awareness. I then anticipated, through reflection and writing, what prejudices in this pre-understanding would be helpful or a hindrance to the process.

Once clear about my pre-understandings, I began the forward arc of the hermeneutic circle, which was to engage in reflective inquiry with the text produced through individual interviews with the collaborative interpreters. As I reflected on their use of language and the different themes that emerged, I entered the return arc of the circle where my previous
understandings were revised. Following, I made corrections to my understanding and inquired again from this new perspective. The repetition of this forward and backward motion is the hermeneutic circle wherein I realized an ongoing development of my original understandings (Packer, 1989). As I continued as well, the meanings I derived from the separate parts of each interview resulted in changes to my original expectations of the meaning of the experience as a whole; accordingly, changes to my expectations of the global meaning revised my interpretation of the parts (Packer). This development of new understanding involves moving from dialogue to reflection, from reflection to writing, from writing to reflection on themes, and from thematic understanding to writing (Packer; van Manen). I followed this process until I could produce a written interpretation of each individual experience to present to the participant. I then took their re-interpretations of my texts and involved it in a consideration of the whole. Next I took my written interpretation to a group which included all the participants and brought back their re-interpretation to my final interpretation of the experience. As I discussed before, the hermeneutic circle of interpretation continues with the involvement of the reader of my final description.

3.4.2 Pre-understandings

Earlier in this chapter I made brief mention of my attempts to clarify my pre-understandings, both before engaging in this research and before analyzing the results. It is important, however, to explicate them in greater detail here. The reason for making pre-understandings transparent is two-fold: to enable the researcher to enter the circle with the correct orientation, one that is open, engaged, and aware of the potential to impose meaning on the phenomenon under study; and to bring accountability and credibility to the researcher’s final interpretation (Packer & Addison, 1989b). I will begin by discussing the processes I used to reveal these preliminary perspectives, and then I will describe what I discovered by organizing them through Gadamer’s distinction of helpful and unhelpful prejudices.
Almost from the beginning, which was 13 years ago, I began reflecting on the process within which I was engaged. As the white, English-speaking counsellor in the triad, I had to find a way past my historical and cultural understandings in order to foster trust and increase my ability to be helpful across cultures. So, early on I decided to approach the phenomena of counselling though interpretation in an open, curious, and self-aware manner. Each experience I had of not knowing what was going on resulted in an attempt to categorize my experience in some previously known framework and then an awareness that it did not quite fit. I became uncomfortably conscious of the perspectives I held from my experience of western therapy, western psychology, and western privilege. As a result, I started to write down my curiosities and confusions in a therapy journal that I could take to supervision. I included drawings, poetry and prose to describe these musings and then processed them through dialogue with my colleagues and supervisors. I was fortunate enough to have the people who created the program and trained the collaborative interpreters as my supervisors. So our dialogues could explore similar experiences. The result of our collaborations was a scholarly article about the program, which attempted to describe our experience to other colleagues (Grant, Henley & Kean, 2001).

As I became more aware of my new understandings about the process of counselling through interpretation, I was increasingly curious about the collaborative interpreters’ experience. The result was a rising interest in researching their experience with the hope that the results of such a study would increase my understanding of this practice as well as that of other colleagues. So, I conducted a test interview with a bilingual, bicultural co-worker who was not involved in bicultural counselling but worked in an adjacent mental health program. My purpose was to examine my everyday, common understandings of how to interview when applied to a bilingual person of colour. I needed to know if or how my biases might affect that endeavour. The result was startling beyond my predictions. As I analyzed the grammar and tone of my
questions, I discovered that I automatically used words and phrases that minimized or trivialized the expected response (such as: “just talk to me a little about”); and grammatical structures that confirmed my position of power (e.g. beginning questions with the emphasis on myself and my interests such as, “I’m thinking,” “I’m hoping.” I also used patronizing responses like “That’s fine” and “I’m wondering if you’re aware at all…”). As a result of my grammar and word use, the interviewee often responded in the passive voice. This test interview provided me with a heightened awareness of how my pre-understandings automatically directed even my verbal approach to cross-cultural inquiry.

At the same time, my experience in that counselling program created an opening for me to contribute to conferences, training, and curriculum development in the area of multicultural counselling. According to Wachterhauser (1986) Gadamer considered academic practices as “part of working out our pre-understandings in light of the things themselves” (p. 33). This process involved a continual search for current understandings from the literature; an ever-evolving dialogue about the subject with colleagues, students and co-contributors; and constant writing and re-writing to produce texts from which I could teach and train. From these investigations I acquired knowledge about the immigrant experience, intercultural communication, cultural and racial identity development, and social discourses of power and privilege. It also required that I pursue ongoing questioning of the means and the mode by which I participated in producing these texts.

Finally, before I began to enter into this research, I did a pilot study on the effects of the English language on the collaborative interpreters’ process. The purpose was to provide me with yet another reference point for the pre-understandings which arose from my linguistic system of meaning. One of the findings that this study produced was that the efficacy of a session was affected by the relationship each member of the triad had with the English language itself (Grant,
2003). Specifically, the study supported the idea that English constructs and maintains power and status discourses (Myers-Scotton, 2002), which therefore give more credence to English values and beliefs when used in a session with non-fluent or non-English-speaking clients.

I was able to bring all these historical, cultural, and emerging understandings to the interpretation of the texts that resulted from my interviews with the collaborative interpreters. To keep these understandings in the forefront of my thinking, I continued to keep notes while I interpreted the texts, reflecting on my choices of questions and responses, and re-reading the texts in view of these considerations. I also made note of my reactions while re-interviewing and re-composing my interpretations as the research progressed. As a result, I was able to separate some of my pre-understandings into those which would be potentially helpful or unhelpful to my final interpretation.

To begin with, my lived experience as a Canadian-born, white woman carried pre-understandings that could easily contribute negative prejudice to my interpretation. As a white, western-trained therapist I have been born into a perspective of privilege that naturally assumes the primacy of my experience (Helms, 1990; Robinson, 2005). Therefore, I have the pre-understanding that my perspective is the touchstone to which all others must be compared. I can automatically be the “confident white voice” in many interactions and, therefore, be involved in colonizing the “other” by making my point of view the reference point for what is different or the same (Frankenberg, 1993). I could even make the assumption that my perspective on the lived experience of persons of colour was neutral (Helms, 1990). Therefore, I had the potential to impose meaning on the collaborative interpreters’ experience based on biased assumptions such as: 1) if successfully translated, western therapy was preferable to indigenous modes of helping; 2) any difficulties in the process would arise from translation problems formed by the other language; 3) collaborative interpreters would naturally rely on the English-speaking counsellor’s
expertise; 4) the collaborative interpreter’s success rested upon her knowledge of western therapeutic strategies; 5) the inclusion of a white professional in the process would enable the collaborative interpreters to have more authority as a para-professional, and so on.

Equally unhelpful were some of the values and beliefs I had assimilated from western culture and therapy. For example, the assumption that encouraging the freedom of individual choice would mean therapeutic success, or that emotional expressions were preferable to explanations. Thus, I could have attributed more meaning to those certain elements of their experience that coincided with my western perspective and dismissed those which did not fit into that framework. At the same time, my awareness of my privileged perspective could have been equally unhelpful if I were to allow it to cast doubt on every interpretation I made. By holding my past and present understandings about myself in relationship in front of me at the same time, I was able to notice the interplay of my own “horizons” with those contained in the text. Thus, the awareness of my status as a white researcher and therapist proved to be helpful because it freed me to look more closely at difference in the collaborative interpreters’ experience.

My experience with the program and the collaborative interpreters also contained some potentially unhelpful pre-understandings. Because I had such a vivid and long-term relationship with everyone involved I risked imposing my sense of what they were experiencing. Over time our work together as co-therapists grew more intimate, even routine, as we developed mutual rhythms and reliance. Moreover, the more embedded I became in our collective experience the more likely it was that I would interpret from our collective understandings. In part, my writings, consultations, and contributions during that time enabled me to distinguish between my experience as the English-speaking therapist and their bicultural, bilingual experience. Thus, I was able to engage in our intersubjective meaning-making, which contributed greatly to our ability to work together, while keeping in mind the pre-understandings from my perspective. In
addition, I kept these collective meanings in mind when I began this research and made notes regarding them as I proceeded through the analysis. Ultimately, the collective meanings of our experience were also helpful in that my awareness of them contributed to a closer reading of the texts and strengthened my relationship with the participants.

Altogether, my pre-understandings led me to expect the following from this research:

1. My experience of “being at sea” or excluded would be different from theirs.
2. My understandings of our collective experience would hold some similarities and some differences to theirs.
3. Their experience of being bicultural and bilingual would be different from anyone else in the triad.
4. The collaborative interpreters would have experienced difficulty translating certain therapeutic concepts or words.
5. The collaborative interpreters would have trust in the helpfulness of western therapy.
6. There would be differences in the collaborative interpreters’ experiences because of the variety of cultures and languages.
7. There would be some similarities in their experience because of their relationship with the dominant culture.
8. Their experiences with a dominant culture, English speaking therapist would be different depending on earlier and similar experiences with dominant culture professionals.
9. There would be some effect on their experience due to differences in racial status.

To conclude, I continually reflected upon and revised my pre-understandings throughout the research process. As new understandings emerged, I endeavoured to remain open to the possibility of new assumptions of which I was previously unaware, and to new perspectives that
challenged my beliefs. The purpose of my notes was to keep these transparent as I moved through the interpretative process.

3.4.3 Role of the participants

Although my relationship with the collaborative interpreters had lapsed over several years, I still anticipated that our previous knowledge and trust in one another would contribute to their willingness to participate in a dialogue with me and each other about their experiences. My intent was to satisfy Gadamer’s requirement of producing an open conversation where the participants were as engaged in understanding the phenomenon as was I (Wachterhauser, 1986). I already knew them to be self-aware and highly capable of verbal expression in English, as well as keenly interested in exploring their experience as collaborative interpreters. Because of our previous collaborative relationship, I viewed the participants as colleagues of equal power who had their own expertise to contribute this research. I also assumed that our prior basis of trust would reduce the power difference between us that could arise from my racial, cultural, and academic status. Moreover, I supported their expertise by asking them to describe their lived experience in their own way.

My initial question simply offered an opportunity to speak to the research question, which I followed with queries that arose from our dialogue or that supported an exploration of areas not yet discussed. I did not pre-plan a set of structured questions because of the risk that I might impose a direction or a theory that would affect their responses. I also wanted to provide an open approach so that the participants were free to express their lived experience from within their different historically, culturally, and linguistically mediated understandings.

3.4.4 Role of the researcher

As I have previously discussed, the phenomenon of counselling through interpretation is part of my lived experience as a researcher. It both inspired me to conduct this study and had the
potential to cloud my interpretation of the collaborative interpreters' experience. Therefore, I had to carefully consider how I would situate myself in this research and monitor my responses to the participants’ descriptions.

First, I approached the topic by immersing myself in the extant literature on the topic of counselling through interpretation. As I read, I made notes regarding my responses to the material, especially when I reacted with surprise or disbelief. The purpose of this record was to highlight opinions and beliefs that were contrary to my lived experience and, thus, make my taken-for-granted understandings transparent. I then approached my potential participants with as clear a presentation of my intent and limitations as possible. Even though I had a personal history of trust with the collaborative interpreters, I was concerned that my interest in studying their lived experience might be perceived as more self-serving than genuine. So, I clarified during our initial conversations that my purpose was to bring their expertise into the dominant discourse on counselling through interpretation because I believed it was essential to a more holistic revision of current understandings. I also emphasized that our history in no way obligated them to participate in the study.

I continued to situate myself in this research, both as researcher and as the English-speaking counsellor, by writing down my reflections and reactions to the collaborative interpreters’ descriptions. During each interview I kept side notes of my thoughts and continued to do so as I transcribed and read the texts produced by those conversations. As I read and re-read the transcripts, I made notes in the margins about my questions and surprises, as well as my first speculations on the themes. Diagrammatically, I grouped and regrouped ideas and reflected on those which did not seem to fit anywhere. I also kept myself open to the possibility of mistakes, misunderstandings and surprises in my interpretations (Altheide & Johnson, 1998) and made notes of my reactions when these were pointed out in subsequent interviews with the
participants. Hence, as I continued in the hermeneutic circle, my writings and diagrams served to keep my pre-understandings in the foreground, maintain a strong orientation to the question, and support my interpretations.

Since hermeneutic phenomenology emphasizes that meaning is mediated through texts (van Manen, 1990), as a researcher I was also a writer. My task was to produce texts that were as accurate, sensitive and deeply reflective of the participants' voices as possible, and to maintain that responsiveness throughout a series of interpretations (van Manen, 1990). Each written interpretation I produced was brought back to conversation with the participant and subsequently revised. Each revision was written and re-written as I kept my pre-suppositions in the forefront. The credibility of my final interpretation rests in large part upon my ability to adequately express through writing the new meanings that arose from the intersection of my perspectives with those of the participants, and to engage the reader in further reflection.

3.5 Research Procedure

As previously discussed, hermeneutic phenomenological research does not offer a protocol by which to proceed. However, Max van Manen (1990) presents a type of structure that was useful to the present study. He proposes six analytic activities that co-evolve, the first two of which I have already described: the researcher orienting herself strongly to the phenomenon by coming from a vantage point of deep interest and personal experience; and, next, investigating the pre-understandings of the researcher.

The third activity van Manen proposes is to reflect on the essential themes. My goal here was to make explicit the structures of meaning contained in the lived experience. I did so by opening myself up to an evolving and creative apprehension of the meaning elements in the text. As van Manen explains, this was "not a rule-bound process but a free act of seeing" (p. 79, emphasis his). As I developed my relationship with the text, I became more and more involved in
the hermeneutic process of discovery and rediscovery. My search was for themes that represented the deepest point or essential aspect of the lived experience. Discovering the themes involved multiple readings where I remained curious about which words or phrases might “capture the fundamental meaning or main significance of the text as a whole” (van Manen, p. 93). Then, as themes emerged, I looked for possible commonalities or re-occurrences among the individual texts of each participant’s lived experience.

My next task was to describe the phenomenon through what van Manen (1990) calls “attentive writing and rewriting.” First and foremost, the act of writing creates the “reflective stance” of the researcher and transports it for the reader. Writing engages the writer and the reader in the act of discovery; it is the vehicle for bringing the subjective world of the participants and the researcher to the subjective world of the reader. As van Manen explains:

> Writing involves a textual reflection in the sense of separating and confronting ourselves with what we know, distancing ourselves from the lifeworld, decontextualizing our thoughtful preoccupations from immediate action, abstracting and objectifying our lived understandings from our concrete involvements…and all this for the sake of now reuniting us with what we know, drawing us more closely to living relations and situations of the lifeworld, turning thought to a more tactful praxis, and concretizing and subjectifying our deepened understanding in practical action (p. 129).

The fifth activity van Manen (1990) suggests is for the researcher to remind herself to maintain a strong orientation to the question. By this statement, he means to warn against delving too much into the abstraction of scholarly activity (p. 138). The researcher must not lose touch in the process of thematic analysis, nor in writing and rewriting. The antidote lies in retaining the perspective of curiosity rather than taking pride in discovery, and in returning to the
original question. Each time I wrote an interpretation, I re-read it with the research question in mind before I progressed. This activity also places the demand on the written form to be rich and deep in its description.

Finally, van Manen (1990) insists that a balance must be achieved in the research context by considering the parts and the whole. His emphasis here is on the human aspects of conducting such research and its ethical implications. Consideration must be given to the effect such research might have on the people involved, the effect of the context in which the study is conducted, and the manner in which the results are portrayed. In each phase of this research, I read my interpretations keeping in mind that they would be made public; hence, their lived experience, though anonymous, would be brought into a much larger discourse. My obligation was to respect the privilege I had been awarded as the interpreter of their experiences and to stay attentive to their intent as well as my own.

One more consideration that van Manen (1990) highlights was of particular importance to the current study. He argues that while much phenomenological research is seen as “merely descriptive,” hermeneutic phenomenology can also be a “critical philosophy of action” (p. 154). The process of hermeneutic phenomenological reflection, he explains, “deepens thought and therefore radicalizes thinking and the acting that flows from it” (p. 154). By becoming more aware of aspects of lived experience that were previously hidden or ignored, we are more likely to take the actions of social change. He reminds us that while phenomenological inquiry itself does not prescribe any socio-political agenda, it does lead to a deep thoughtfulness that may lead to change. As I have mentioned, my purpose for this research was to produce a text that brings the experience of the collaborative interpreters to light so that their voice could contribute to the discourse on counselling through interpretation and, perhaps, inspire new understandings that would benefit the practice of counselling non-English-speaking clients.
3.5.1 Participant criteria

Participants in this study were volunteers who had personal experience of the phenomenon under investigation, and who met the criteria of having a keen interest in bringing a better understanding of that phenomenon to light (Wachterhauser, 1986). When the participants agreed to participate in this study, all commented on the personal benefit they saw in articulating their experience as well as the hope they had that it would be of benefit to counselling practice. The participants consisted of four bicultural, bilingual women of mid-age, who had immigrated to Canada as adults and had lived here for the better part of three decades. Two of the participants emigrated from India. The other two were from Korea and Viet Nam respectively. Collectively, they spoke 7 languages in addition to English, which included Punjabi, Hindi, Gurjarati, Urdu, Korean, Vietnamese, and French. Also, all of them had worked as settlement counsellors and had social service experience.

The main criteria for the participants were: 1) that they had engaged in providing counselling to clients who share their first language by interpreting the words and intent of an English-speaking therapist; 2) that they had some familiarity with western counselling theory and practice; 3) that they had participated in such a role as a cultural and linguistic interpreter of the therapeutic process, rather than as a verbatim interpreter, and 4) that they were fluent in both English and their first language. There were no gender or age restrictions because of my expectation that the population of possible participants would be very small. In fact, I knew of only six people in the Lower Mainland who fit the criteria, but hoped I might discover others in the process of recruitment.

Though the main criteria seemed straightforward enough, I had to carefully consider certain aspects of my requirements as well as some that I excluded. First, I decided to include participants from various cultural and language groups because the practice of counselling
through interpretation is not restricted to one or two cultural groups. It is an ongoing practice in Canada inclusive of multicultural lived experience. As I have mentioned, the only study that I could find exist the collaborative interpreter's experience is restricted to one linguistic-cultural group. By including a diversity of experience I hoped to broaden the discussion about this practice.

The question of defining fluency can be difficult, as I reviewed earlier. For this research I considered the constructs of utility and bilingualism. As you may recall, fluency is often determined by utility; that is, how well one’s lexicon functions in a given area of knowledge (Myers-Scotton, 2002). For example, a person may be fluent in everyday conversation but lack the vocabulary for seeking legal advice. Someone who claims fluency in their parent’s first language may actually have a deficit in certain areas as well. I can relate an example of this limitation by way of my own experience counselling a young adult who moved to Canada as a child. This client expressed frustration at his/her lack of vocabulary in the parent’s first language because it severely limited her/him in being able to communicate emotional concerns. My concern was that the participants were fluent in the lexicon of emotional communication and western counselling so that they could adequately adapt terms and concepts. Beyond that, however, I wanted participants who were bilingual. As Edwards (1994) points out, one needs to know the culture in order to translate meaning. Bilingualism, therefore, is defined as the ability to share in the meaning system of each culture. The concept of bilingualism supported one of the main philosophical tenets underlying this research: that shared meanings are constituted through language. Thus, it was necessary for me to obtain participants who were capable of participating in the shared meaning-systems of both national cultures (home and host) and the culture of western psychology.
The task of addressing the criteria of bilingualism also involves the concept of biculturalism. I did not actively seek out participants who described themselves as bicultural because I was primarily concerned with their fluency in the shared meaning system of each culture rather than their self concept. It is my understanding that cultural identity is constituted by social relationships and, hence, is fluid and expansive. An individual may experience multiple cultural identities, foregrounding one over the other depending on contextual influences (Shotter & Gergen, 1994). Thus, the cultural identity that guides meaning-making emerges in response to the context. Interestingly, though, each participant did describe herself as bicultural as a way to explain the depth of their understandings about each culture.

### 3.5.2 Finding participants

This research was submitted to the University’s ethical review board and only after receiving their approval did I proceed to recruit volunteers. I began by writing a letter of invitation to solicit interest from social service workers who had provided or were providing counselling through interpretation. The letter contained information on my background and the purpose of the study along with the requirements for participation, and invited interested parties to contact the researcher (see Appendix A). I then sent the participant letter directly to individuals I knew had been involved in counselling through interpretation in the settlement and integration sector.

My search continued with investigating mainstream counselling agencies to see if they provided counselling through translation. While many offered counselling in a client’s first language, they did so through a bilingual professional in a one-to-one situation. I also made email contact with the program director and instructor of an interpreter training program offered through a community college without success. I then returned to the settlement and immigration sector. Since I had worked in the field, I had personal knowledge of settlement and immigration
agencies in the Lower Mainland. So, I was also able to draw upon professional contacts in that sector to provide information on possible sites where I might further solicit participation. I telephoned managers in the sector to see if any similar program had been or was being delivered by their agency. As I suspected, only one agency had run a comparable program. I telephoned the manager involved to arrange a meeting where I could provide him with a letter similar to the one I composed for distribution to possible participants and discuss any questions he had about the study (see Appendix B). I also provided him with a letter to distribute to his staff (see Appendix A).

When those who were interested in participating called me, I discussed with them personally about the purpose and requirements of the study, including availability and time required. I also inquired about their comfort with the final part of the data collection process which required them to meet as a group. Because each participant knew me from past professional association, I also clarified that they were under no obligation to contribute to this research, nor were they obligated to continue past their point of interest or availability. Although I had shared the experience of bilingual counselling with them as the dominant culture counsellor in the situation, I no longer had any professional connection with any of the participants and, thus, no power over their choice to volunteer. I followed the telephone conversation with a brief meeting where I answered any subsequent questions and had them sign a consent form, a copy of which I provided to them (see Appendix C).

Four participants were recruited over a period of three months. While I had hoped to include at least six persons in the study, the reality was that the population of possible contributors amounted to only seven individuals. Financial limitations excluded the possibility of recruiting nationally; however, I believe that further investigation in this area should include a larger number of participants.
3.5.3 Data Collection

The purpose of phenomenological research is to collect rich descriptions of individuals’ lived experience of a phenomenon. As van Manen (1990) explains, “lived experience is the starting point and end point...” of this kind of inquiry. Hermeneutical phenomenology is concerned with texts, which can be defined metaphorically as verbal and non-verbal accounts (Prasad, 2005). Thus, descriptions of lived experience become data, the analysis of which results in a written interpretation of the meaning of that experience (van Manen).

This research used the method of unstructured interviewing to gather descriptions of the collaborative interpreters’ experiences. According to Rubin and Rubin (1995), all qualitative interviewing techniques share the characteristic of being similar to ordinary conversation. However, the research conversation is modified from being a completely shared, back and forth responsiveness to a topic to one which clearly centers on the participant’s story. In this way, the onus is on the researcher to listen attentively for significant words, phrases, omissions, and non-verbal expressions in the participant’s account without sharing opinions as we do in casual conversations. Thus, I entered into a dialogue with the participants with the intent of staying open to new and unexpected elements in their accounts instead of focusing on my pre-suppositions (Polkinghorne, 1983).

Unstructured interviewing, however, is not entirely without form. This type of interview is grounded in a firm orientation to the research question, which acts as a plan (Bernard, 1994). At the same time, it is designed to exert the least possible control or influence on the participants’ accounts (Bernard). As van Manen (1990) points out, “to do phenomenological research is to question something phenomenologically”; that is, to ask “what is something really like?” (p. 42). Hence the purpose of questioning is to sustain the process of being open to possibilities (Gadamer as cited in van Manen; Bernard, 1994). I began each interview with a simple question...
inviting the participants to describe their experience. The question was, "What was your experience of being a collaborative interpreter?" The rest of the interview was focused on following the participant’s description by questioning for clarification and probing to explicate omissions or explore hidden areas.

Hermeneutical phenomenology views data as emerging from an ongoing dialogue where new meanings are interpreted. As a result, another important element of phenomenological interviewing is to treat the participants as partners in the quest to understand the meaning of their experience (Rubin and Rubin, 1995). To engage the participant as a co-researcher, I began each interview with an open question that emerged from the research question itself. Even so, collaboration can only happen from a basis of mutual trust that allows the participant to freely explore the phenomenon (Bernard, 1994). It has been well documented that race, culture and gender issues affect the way participants experience research interviews (Casas, Ponterotto, & Gullerrez, 1986; Clandinin & Connelly, 1994; Helms, 1984; Stanley & Slattery, 2003), and that the establishment of trust between the researcher and the participant in the beginning is foremost. In my case the participants already knew me, which contributed to a quickly established level of comfort. To anchor this trust, however, I clarified my intent and focus of the research, reminded them that participation was optional at every level, and explained the confidentiality of the process at the beginning of each interview.

3.5.4 Interview process

I alone conducted and audio-taped each interview for this study. The reason for this is that hermeneutical phenomenology views data collection as the initial way the researcher enters the hermeneutic circle (Polkinghorne, 1989). To begin, I interviewed the four participants alone in various settings of their choosing. Three invited me to come to their homes and one chose a public setting. Each one informed me that their choices of times and settings were in
consideration of their privacy and ability to talk without interruption. It was important that they chose the setting for the interviews because dialogue is contextually influenced (Prasad, 2005); thus, they needed to determine which context would allow them to feel free to enter an open conversation about their lived experience.

As mentioned earlier, I initially met with each participant in order to orient them to the study and to establish a common bond of trust. At that time I also clarified issues of confidentiality, including the use of a pseudonym in any written texts, and offered them a consent form to sign. We then set a convenient time and setting for the interview to take place. These initial four interviews varied in length, as I expected they might. Each participant was given time and encouragement to express herself fully. However, different first languages result in quite different styles of speaking English (Wehrly, 1995). For example, some languages use more indirect methods of communication, such as elaboration or digression, which can carry over to the way people express themselves in English (Wehrly). Therefore, I was prepared to listen attentively bearing this possibility in mind, and allow the unfolding of their descriptions to take the time that was needed. It was also important to be aware of this possibility rather than wrongly interpret their style as indicative of hidden meanings. The outcome was that the first interviews varied from between 40 minutes and 90 minutes in length.

After these initial interviews, I spent time listening and re-listening to the audiotapes. My purpose was to deepen my familiarity with their verbal texts, listening for explicit and implicit meanings in their accounts. Since transcription has been recognized as a “powerful act of representation,” I began the task of transcription by reflecting on the research question to determine which method might best serve its intent (Oliver, Serovich, & Mason, 2005. P. 1287). Because I was interested in the essential meaning of the experience, I did not use a naturalistic transcription method, which is useful for empirical-based studies such as those that focus on the
mechanics of speech interactions (Oliver et al.). As well, a naturalistic approach assumes that an unbiased transcription of speech by the researcher is possible (Oliver, et al.), while hermeneutical phenomenology requires that the researcher’s bias be made evident in the process of analysis. So, I chose to use a somewhat denaturalized method with the intent to produce a “full and faithful transcription” (Cameron, 1996, as cited in Oliver et al., p. 1277) that accurately represented the participants’ meanings and perceptions. In doing so, I kept in mind the reflective question offered by Oliver et al., which is, “Would the transcription look different if the participant were the transcriber?” This reflection prompted me to avoid completely neutralizing the data to the degree that all the idiosyncratic expressions of their individual lived experience were eliminated; thus, I kept their original syntax and grammar, and also chose to include response tokens, like “uh huh” when they signaled agreement or understanding, and non-verbal expressions, such as crying, when representative of the emotional content. As I proceeded with the transcription, I kept track of my choices and the assumptions involved by making side notes at the time and by writing down later reflections as they arose. This process continued while I interpreted the transcribed texts and composed a thematic interpretation to present to the participants to review.

The process of writing was sometimes slow, but often quite rapid as I felt myself more and more engaged with the transcribed text. When I found difficulty in writing, I would question whether or not I understood the text enough to know what to write. This hesitancy prevented me from pushing through with my ideas and opinions about how the written interpretation should be composed. Another consideration I had while writing those first interpretations was the effect they might have on the participants as readers. The demand of this type of research was that I write with sensitivity and integrity to the spoken words of the participants, while producing an interpretation that was rich and engaging (van Manen, 1990).
My next step was to employ these first thematic interpretations as “objects of reflection” (van Manen, 1990, p. 99) through follow-up interviews with the participants. My purpose here was to verify the accuracy and credibility of what I had written, but also to continue the hermeneutical process through ongoing dialogue and co-develop new understandings. I telephoned the participants and informed them that I would be sending them a copy of my interpretation to read. During our telephone conversation, I followed van Manen’s (1990) recommendation that participants reflect on the material in light of the question, “Is this what the experience is really like?” and suggested that they read it for authenticity (p. 99). I sent the written interpretations by email at their request and followed up within a week to arrange second interviews. Again, we met in a variety of public and private locations. Two of the participants who originally invited me to their homes did so again. The other two chose public settings where we could still achieve the degree of privacy needed. As these second interviews progressed I asked probing questions to elicit more description when possible. I taped these four interviews as well, and made brief notes as they spoke. The length of these interviews ranged from 10 to 30 minutes.

Responses to the first interpretation of their lived experience were all positive and confirming of the themes I had offered. Comments included statements such as: ”. . . when I was going through it I said, Oh my God you have read my mind”; ”. . . you have really really captured my spoken and unspoken words quite well”; “I think you understand me so well. . . .”; “I feel that you understand us. . . .”; and, “I think the three [themes] represent very well what I carried as my experience . . . .” All of the participants chose to elaborate on the themes that affected them the most. One spoke of her sense of disconnection in all her subsequent work as an interpreter because she has never again been asked to function in a collaborative manner. She, along with all the others, said that reading the themes had deepened their memory of the
experience and that they appreciated the opportunity of remembering such a rewarding and satisfying period in their lives. Another participant said she felt that when she read the interpretation she could recall the physical experience of being bicultural, of embodying duality. Two also commented on feeling amazed by their experience as they read. None of them requested any changes or remarked on any omissions.

I repeated the first process by listening and re-listening to the audiotape of the second interview. Then, I transcribed and reflected upon that text for meaning, and revised or elaborated on thematic content when necessary. At this stage too I continued to keep notes on my impressions, ideas, and curiosities to stay oriented to the research question and be aware of my assumptions. Once I felt I had gleaned everything I could from the transcripts, I wrote another interpretation of the second interview, which I used to re-reflect upon the initial themes. Once I had finished this part of the analysis, I wrote an interpretation of the participants' collective experience, which I had grouped into six themes. My purpose was to create a text that I could present to them as a group. The reason for this phase of data collection was that I wanted to bring their individual lived experience into a shared process of meaning-making consistent with the hermeneutical process of intersubjectivity between reader and text. To co-ordinate the group meeting, I repeated the same process of making telephone contact, providing each participant with a copy of my interpretation, and making the same suggestion that they should read for authenticity. The participants had consented at the beginning to meet with each other as a group. Though I had explained their right to confidentiality, each said they had no discomfort with the design because they had all worked together previously as collaborative interpreters and as a result knew each other quite well. In fact, they expressed excitement at the opportunity to meet with each other again. One of the participants volunteered to host the meeting in her home, to which everyone agreed.
As I have mentioned, the focus of this third interview was to present my interpretation of their shared experiences with the intent of continuing the hermeneutic process by engaging the participants in co-interpreting their collective new understanding. Thus, this interview functioned as a confirmation of my interpretation at the same time as it contributed to the creation of a revised text. As with the other interviews, I personally conducted, audiotaped and transcribed this meeting. My approach to conducting the meeting was to be as unobtrusive as possible, using probing questions to invite further description and occasional statements to re-focus the discussion on the topic. I took notes throughout the discussion to capture points of emphasis by the group as well as my own thoughts.

I was surprised at the depth of elaboration on the themes that was generated by this group meeting. All the themes were validated by the participants; yet, discussing them brought forth more metaphorical language such as, “mediating fear,” “story collector,” and “yin/yang.” They also emphasized the importance of certain themes over others, marking them as most significant to the level of satisfaction they felt from the experience. One participant clarified that she had not originally received the same training as the others, but had absorbed it while working in the program. As a result, she explained, she had begun her work as a collaborative interpreter with a strong level of mistrust in western therapy. This generated comments from the others about how strengthened they had felt in their work because of their shared training experience. All of them also said they were surprised at the degree of commonality they had in their shared experiences. One had even commented before the interview that she expected that they would be comparing differences more than similarities. Overall the participants felt that the description I had provided of their lived experience was true and enabled them to re-call that experience in a more deeply meaningful way.
3.6 Data Analysis

The data used in this study were texts produced from the written transcriptions of interviews with the collaborative interpreters. The act of transforming the spoken word into a written form carries with it a certain obligation: that the researcher must endeavour to re-present the verbal text as authentically as possible. The reason for this attentiveness is that meaning may be shifted and/or altered depending on the researcher’s assumptions and biases (Kvale, 1996; Lapadat & Lindsay, 1999). As Lapadat and Lindsay (1999) point out, “transcription is an inherently theoretical process that is dependent on the theories the researcher holds and that influences the analysis and interpretation” (p. 69). I addressed this concern in the following ways.

First, I personally transcribed all four audiotaped interviews verbatim and then listened again while reading the transcript to check for errors and omissions. I had employed a transcription service for the first two tapes, but discovered upon reading those transcriptions that a significant amount had been misconstrued or omitted, some of which occurred because of an apparent misunderstanding of the participants’ accented English. Because I was a “familiar listener” to their voices, I realized that by transcribing the tapes myself I was more likely to get a clearer text. Even more importantly, I also wanted to immerse myself in the data from the very beginning and, thus, create my point of entry into the hermeneutic circle.

After checking the transcripts for errors, I listened again and read along with the intent of noting non-verbal communications, such as tone and silence, as well as my initial impressions and reactions. At the same time, I found myself remembering certain parts of the interview as it happened more clearly and compared those impressions with the notes I had made at the time. By this means I was able to keep track of my opinions, assumptions and biases from the very beginning of the analysis.
3.6.1 Analysis of themes

To analyze the transcriptions produced from the interviews, I followed a reasonably
generic qualitative protocol (c.f., Marshall & Rossman, 1999; Rubin & Rubin, 1995). It is
important to emphasize, though, that "nearly as many analysis strategies exist as qualitative
researchers" (Crabtree & Miller, 1992, as cited in Marshall & Rossman, p. 151). Thus, while
using some generic strategies, I also followed the process of hermeneutic phenomenological
reflection as suggested by van Manen (1990). In general, all types of qualitative analysis require
the researcher to search for "relationships among categories of data" (Marshall & Rossman,
1999, p. 150), which are commonly developed into themes. The process of a qualitative analysis
can range from the researcher looking for theoretically-determined categories to ones where the
researcher relies on her intuition and interpretive skills. Obviously, hermeneutic
phenomenological reflection involves the latter, requiring the researcher to derive the essential
meaning of lived experience from the text itself (van Manen, 1990). That process, in part,
involves reading, reflecting and re-reading while maintaining a strong orientation to the research
question. As evocative words, phrases, expressions, and stories arise from the descriptions of
lived experience, the researcher groups them into themes, which are then incorporated into a
written, thematic interpretation of the experience.

It is important to clarify the concept of "theme" as it applies to hermeneutic
phenomenological analysis. At its core, hermeneutical reflection aims to make explicit the
essential meaning of the lived experience under study. Themes, therefore, are considered
structures of meaning, not categories (van Manen, 1990). More specifically, van Manen explains
that a theme is the meaning of the experience; it is a simplification of the experience; and it is a
description of an aspect of the structure of lived experience. Theme, he continues, is a process of
"insightful invention" (researcher interpretation), discovery (the product of the researcher's
dialogue with the text), and disclosure (the interpretive product from the text's relationship with the researcher).

I began my data analysis by reading each transcription of the first interviews several times. The first reading was done to obtain a sense of the text as a whole by reflecting on what might be its main significance (van Manen, 1990). I made notes on my thoughts and impressions and then progressed to a more selective approach. During my second response to the text, I underlined words and phrases that I found evocative and in the margins made note of possible topics or concepts. I also noted my reactions to the text separately. Then, I waited a few days to re-read a clean copy of the transcript and repeat the same process. Following this second reading, I looked at the notes I had made in comparison to the first reading. I discovered that many of the words, phrases, and concepts I had first noticed matched my second reading; however, I also discovered new ones.

The third reading took a more detailed approach where I looked at every sentence to discern the main concept. I wrote these concepts in the margins, paying particular attention to the previously highlighted descriptive words and phrases for coherence. With each text, I then wrote all the concepts out on a separate sheet of paper and reflected on possible clusters of meaning that may indicate themes. To identify these clusters, I used diagrams and figurative maps that suggested possible relationships among the concepts. Gradually, through my intuitive sense of the text, themes emerged to metaphorically represent these relationship clusters. As certain themes occurred to me, I reflected on the most appropriate word for them. I also checked my assumptions about the meaning of each word by cross-checking dictionary definitions of meaning with my sense of the word's evocativeness. My intent was to find the best English word possible to describe the structures of meaning in their lived experience. It was also important for me to distinguish between what van Manen (1990) calls essential and incidental themes. He
cautions that the researcher must remember to look for themes that are unique to the particular lived experience under study, as well as to the possibility that the themes are historically and culturally determined. Therefore, I maintained my orientation to the text and as themes emerged asked myself, as van Manen suggests, whether or not the fundamental meaning of the phenomenon remained the same if I changed or eliminated each theme.

Once I had identified the themes for each text, I re-read the first interview transcripts for the fourth time highlighting each previously marked phrase or word with a colour to match the different themes. This step allowed me to also see more vividly the marked quotes that were not represented by any theme; thus, enabling me to critically challenge the patterns I had found in the text (Marshall & Rossman, 1999). The benefit of this challenge was two-fold: because there are always multiple meanings possible in a text, I had to be able to describe and account for the differences that exist while presenting my interpretation as a valid description of the participants' common lived experience (Marshall & Rossman); and it once again reminded me to stay open to the text and be aware of the potential to impose meaning from my pre-understandings. Once all the phrases were either colour coded or set apart as different, I wrote out the direct quotes from the text under their respective theme headings. I also re-examined the phrases that did not match by returning to the text of each interview to look at the specific placement of the phrase in the context of the response. Then, I grouped those phrases by looking for any similarities, and followed by comparing them again to the phrases already grouped under themes. The result was that I revised some themes and realized some new ones.

Next, I went back to the list of concepts and rearranged them under the identified themes. Again, I looked for omissions and unmatched concepts, returning to the text for verification or revision. Once I had grouped the concepts under each theme, I compared those lists to the previous thematic list of phrases from the text. Then I revised themes once again based on the
matches and mismatches between phrases and concepts. My results were three to four individual themes for each participant interview. At this point I felt that I had gleansed all that I could from the first interviews and began the process of writing a description of their lived experience.

Of equal importance to a hermeneutic phenomenological analysis is the written text produced by the researcher. As van Manen (1990) emphasizes, “writing is our method” (p. 124), because it is the vehicle of the hermeneutical circle. Through the act of writing, the researcher moves from the part to the whole and back to the part, creating and re-creating a coherent sense from the text (Eagleton, 1983). Writing is also the act of engagement with the reader, the final part of the hermeneutical circle, whereby the interpretive process incorporates the emerging understandings of its audience. The process of reading (c.f., Wolfgang Iser, 1978) is hermeneutical itself, in which the reader “makes implicit connections, fills in the gaps, draws inferences and tests out hunches . . . . the text itself is really no more than a series of cues to the reader, invitations to construct a piece of language into meaning” (Eagleton, pg. 76).

Accordingly, the researcher, through writing, transforms the research text into a “public document,” which contains the researcher’s interpretations and self-understandings, “inscribed in the experiences of those studied” (Denzin, 1998). The act of writing becomes the intermediary, constructing the interpretive process for both writer and reader (Geertz, 1973).

Thus, my next stage of analysis was to present my participants with my written interpretation of their lived experience and tape their response to it. As with the first interviews, I personally transcribed the audiotapes and followed the same general process of analysis that I used with the first transcripts. Specifically, I read and re-read the text first for general understanding. Then I read again, underlining words and phrases that seemed most expressive, and made notes about tentative concepts in the margins. I also continued to make notes on my responses to the text. Next, I read for new and confirming concepts relating back to the themes I
used in my description. Because all the responses were confirming, I needed only to incorporate expansions to my description of the themes. Through writing I formed revised descriptions of the original themes and used this text as part of my reflective process as I began the third part of my analysis.

After re-reading both my first and second descriptions of the themes, I began to look more closely at all of the 14 themes I had discovered through the individual interviews. My purpose was to start constructing the common lived experience of the collaborative interpreters. First I summarized the main concepts from each of the 14 themes. Then, I looked for similarities and differences by grouping the themes and their concepts into clusters. For example, I grouped the themes “alliance,” “collaboration” and “connection” to explore whether or not they all represented some essential commonality. This process was deeply reflective, imaginative, and creative as I freely diagramed and repositioned the themes in each cluster. At this point I did not use writing to perform the analysis as much as visual “mapping”; however, I did write about my impressions, confusions, and frustrations, which served to keep my attention to the text separate from my own musings. The result of this thematic analysis was that I arrived at seven common themes, or meaning-structures that described the essence of the collaborative interpreter’s experience of translating therapeutic intent. Once discovered, I began to write about these themes in order to create a text to present to the group as a whole.

After the group meeting, I transcribed the participants’ responses, read for general understanding and continued again with marking the text for descriptive words and phrases. As with the other stages I continued with making notes about the concepts and then comparing the descriptions and concepts with my written interpretation of their common experience. In keeping with the first confirmation interview, the participants’ comments were largely confirming; however, they also made corrections to some of my themes by adding a deeper description or
including new information. I wrote about these revisions as a reflective process, keeping in mind that my pre-understandings and pre-suppositions could still impose meaning that may hinder a deeper analysis. As I reflected again on the themes, I looked for a further distillation of the experience that might bring me even closer to the essence of the phenomenon. The result was that I discovered three essential themes, which revealed the relational interpretation of meaning in the collaborative interpreter’s experience. Thus, my final document was a description of these three essential themes in reference to the interpretation of the participants’ common lived experience.

3.7 Criteria for evaluation

It has been well argued that quantitative concepts of reliability and validity are not useful in evaluating the rigor of qualitative research because they are inconsistent with the philosophical assumptions of the methodology. (eg. Johnson, 1997; Lincoln & Guba, 1985; Marshall & Rossman, 1999; Smith, 1984). However, the onus is still on the qualitative researcher to demonstrate that her research is “plausible, credible, trustworthy and, therefore, defensible” (Johnson, 1997, p. 282). Strategies used to demonstrate these conditions can vary according to the method and the theoretical underpinnings of the study. Thus, my strategies had to conform to the primary assumptions of hermeneutic phenomenological inquiry.

Overall, the evaluation of hermeneutic phenomenological research is based on the researcher’s ability to produce a rich and evocative interpretation of lived experience that illuminates the underlying meanings while, at the same time, is credible (Packer, 1989; van Manen, 1990). The truth of an interpretation, as Heidegger (1927) explains, is ‘a letting-something-be-seen,” a matter of revealing that which heretofore has been hidden from our awareness (cited by Packerp. 278). My purpose in conducting this research was to reveal the meaning of the collaborative interpreter’s experience of counselling through translation. To do
so, I had to produce a deeply evocative description that was demonstrably accurate to that lived experience.

According to Lincoln and Guba (1985), the term “trustworthiness” can be generally applied to test the rigor of phenomenological research. Trustworthiness implies that the research has such qualities as credibility, dependability and a clear audit trail (Lincoln & Guba; Marshall & Rossman, 1999). The assessment of the trustworthiness of a hermeneutical interpretation, Packer and Anderson (1989b) argue, relies on three essential points. First, the researcher must demonstrate that she or he approached the inquiry with an appropriate orientation (Packer and Addison, 1989b). The point here is that the researcher needs to show an awareness of the pre-understandings which guide the inquiry. Inclusive of an appropriate orientation is also the expectation that the inquiry demonstrates “reciprocity” (Lather, 1986). By this term Lather means that the inquiry produces “interactive, dialogic interviews,” which involve the negotiation of meaning through conversations with the participants, and which also include researcher self-disclosure. Finally, the trustworthiness of an interpretation may be discerned by its ability to offer a type of solution to the gap in understanding that began the inquiry.

To demonstrate the trustworthiness of my interpretation, I employed the following strategies. First, I indicated a strong orientation to the research question by making my pre-understandings and pre-suppositions transparent to myself and to the reader. By doing so, I addressed the threat of researcher bias affecting the process and the conclusions of this study. More importantly, by continuing this awareness as I reflected on the texts, I demonstrated how my understanding of the meaning evolved, which contributed to the dependability of my interpretation (Marshall & Rossman, 1999). Ultimately, this process made my entry into the hermeneutic circle and the process of uncovering new understandings in the return arc apparent to the reader.
Next, I satisfied the aspects of credibility and dependability by producing an audit trail for readers to follow. This process involved thoroughly describing the steps of my research method and analysis. On a larger scale, it also meant integrating my procedure and interpretations with the assumptions of my theoretical paradigm. I contributed to this audit trail as well by writing about my personal reflections and emerging research questions as the study proceeded. The benefit of this log was that it demonstrated how I co-developed the descriptions with my participants.

Another, strategy I used was to go directly to the participants for verification of my interpretations. After the first and the second interview I engaged them in a dialogue about the accuracy or inaccuracies in my interpretation of their experience. These dialogues satisfied the necessity of a negotiation of meaning between the researcher and the participants. By noting down my subsequent impressions I also demonstrated self-disclosure. The group meeting in particular allowed me to discover whether or not my collective interpretation of the multiple meanings of their experiences faithfully represented the essential experience of each participant.

Further, I created trustworthiness in my final interpretation by actively looking for alternate explanations (Marshall & Rossman, 1999). I started by paying equal attention to the word, phrases and concepts from the participants’ transcripts that did not fit with the themes I had discovered. In light of these exceptions, I re-read the texts keeping in mind that there are multiple meanings in every text and alternate explanations are always possible. However, I knew my goal was to uncover the meanings that were essential to the lived experience in question and not those that may be common to other everyday experiences as well. As I continued, I also questioned repeatedly whether or not another explanation would suit the material I had selected as similar and grouped into themes. This process prevented me from blindly producing a text that confirmed my pre-suppositions and was critical to developing a coherent description. By
showing how I selected aspects of the participants' texts, derived the themes, and then arrived at the meta-themes, I produced a path that the reader could trace backward to the original participant descriptions (Polkinghorne, 1988).

Finally, the condition of trustworthiness requires that I produce an interpretation that advances current knowledge and has a place within other knowledge about the matter in question (Packer & Addison, 1989b). To meet this requirement I first had to present the reader with a powerful and evocative interpretation that was convincing in its faithfulness to the lived experience of the participant, and that would invite that reader into the circle of interpretation. By that I mean the text must thoroughly engage the reader to the extent that the reader participates in the dialogue and continues the co-constitution of the meaning of the lived experience under study. I was also required to demonstrate how my interpretation would contribute new understandings and invite further inquiry within the body of scholarly discourse already extant in the literature. This aspect meant that I must compare my interpretation to others and consider alternate explanations.

3.8 Conclusion

This research was concerned with producing an interpretation of the meaning of counselling through translation from the collaborative interpreter's experience. The process involved the co-creation of that meaning through dialogue: the internal dialogue of the researcher; the dialogues between researcher and participants; the dialogue between the researcher and the text; and, ultimately, the continuing dialogue between new readers and this text. As a hermeneutic phenomenological study, the assumption is that new understandings will continue to emerge through the reader's circular process of interpretation. My intent, then, was to produce an insightful and engaging interpretation of the underlying meanings of the collaborative
interpreter's lived experience and, thereby, bring their voice into the larger discourse on the use of interpreters in counselling.

The results of this study are presented in the form of interpretive texts written by the researcher. Sections of the participants' transcribed descriptions are included with each layer of interpretation to fulfill the criterion of credibility, but also to engage the reader in his or her own hermeneutical process. Included, as well, are descriptions of the researcher's own hermeneutical process, such as the previous expectations and questions that arose during the interpretation of the data. What follows, then, is a series of thematic analyses, revised by the processes reading, reflection, and dialogue until the deeper meaning of the experience is revealed.
4 RESULTS

4.1 Introduction

Since the purpose of this research was to describe the essential aspects, which include actions, beliefs, socio-cultural contexts, and processes, of the phenomenon under study (Marshall & Rossman, 1999), the results are offered through a series of interpretive texts written by the researcher. These texts emerged from a hermeneutic phenomenological analysis of interviews with the participants. The transcriptions of these interviews were treated as the first layers of texts wherein lay a subtext or “expressive text” concerning the essential meaning of the experience (Prasad, 2005). My first responses to the texts were the products of a mutual exchange of meaning between the texts’ and my contextualized understandings. This hermeneutical process served to mutually revise the descriptions as I repeatedly engaged with the participants’ responses to those revisions. Subsequent readings of these later descriptions resulted in an analysis of the deeper meaning of the experience (Wachterhauser, 1986).

Because hermeneutics views all texts as emerging from a historical and socio-cultural context of common meanings, it was crucial that I maintain an awareness of the multiple influences, or pre-understandings, on the interpretive act and on the concluding written description. My goal, then, was to reflect on the texts deeply enough to create a circular revision process where my and the texts’ contextualized understandings could mutually negotiate new understandings, or what Gadamer termed a “fusion of horizons” (Grondin, 2003).

In order to discern which of my pre-understandings may hinder or help the analysis of the texts, I took two approaches. One was to keep a progress journal where I could note my reactions to the texts based on my prior assumptions. The other was to clarify my theoretical paradigms. Specifically, these results are also informed by my pre-understandings of multicultural
counselling theory and the constructivist, socio-cultural theories of identity. I approached the complexity of the collaborative interpreter’s experience with the philosophical assumptions that:

1. Our subjective experiences are the source of all knowledge.

2. The meaning of our lived experience is constituted through language.

3. The meanings we make out of our lived experiences (part) are situated in the common understandings (whole) within which we are born and about which we are largely unaware.

4. Our understanding of self arises from our sense of “connectedness and belonging” and our interpretation of difference (Brewer & Gardner, 1996, p. 83, as cited in Grant, 2008).

5. Because an individual can belong to multiple social groups, different socially interpreted identities can coexist and be in the foreground or background, depending on the context (Grant, 2008).

6. The interaction of these socio-cultural identities and the relative attributions of power they may have in a given context shape the process of meaning-making about events and experiences (Grant, 2008).

Woven into these assumptions, were my understandings of culture and the complexities attached to providing multicultural, multilingual counselling. I applied my view of culture as a ubiquitous, external, collaborative and public system of shared meaning, while at the same time finding value, especially from the perspective of phenomenology, in considering culture as an innate, internal process of imposing order on experience (Keesing, 1981). Adding to the overwhelming evidence that counselling success is largely dependent on the counselling relationship, I also brought into view the evidence that the counsellors’ multiple and intersecting cultural identities would have an impact on the client/counsellor relationship (Baruth & Manning, 1999). Moreover, I took into consideration that the cultural identity location of each
person in the triad would contribute to the negotiation of relationship and perceptions of meaning (Helms & Cook, 1999).

What follows, then, is a sequence of interpretations and descriptions, which lead to some new understandings about the collaborative interpreter’s experience of translating therapeutic intent across languages and cultures. It begins with a biography of each participant and then proceeds with each analysis, including the researcher’s considerations as they arose during the process. The analyses are thematic and result in a trio of three meta-themes as the concluding contribution. All identities are protected by either a pseudonym or substitution. As with all phenomenological research, my interpretation of the collaborative interpreter’s experience was meant to illuminate its essential meanings. My intent in conducting the present research was to reveal the heretofore unexplored structures of this experience so that it may become open to further reflection. Thus, it remains with the readers of this text to continue the interpretation.

4.2 Participant Biographies

4.2.1 Mary’s Biography

Mary was born in Korea to a well-educated family in the early 1950’s. The family immigrated to Montreal when Mary was a young adult and she attended graduate school there. Mary was taught English during her school years in Korea, but says she did not really learn English or French until moving to Canada. Her mother and a few of her eight siblings remain in Montreal, while others have moved to the United States and Australia. She remains strongly connected to her family, especially her mother. Mary waited until her early thirties to marry someone of her own choice and does not have any children. After obtaining her master’s in library science, Mary worked for a while in Montreal before deciding that she wanted a career that required more interpersonal contact.
Upon moving to Greater Vancouver, she secured a job in the settlement and integration sector, where her language and cultural skills made her ideal for work with Korean immigrants. Mary’s task as a settlement worker was to link newcomers to social resources such as English-language classes, employment programs, child-care and schools, health care, and community networks. Along with being the immigrant’s first link to life in Canada, Mary also provided advocacy and emotional support to those who found their adjustment difficult. Another part of her work was to provide educational groups in order to reach those immigrants who had been in Canada longer but remained somewhat isolated in their ethnic communities. The subjects of these group meetings varied from presentations on Canada’s legal or educational systems to meetings for parents of young children or teens, and were determined by community need.

Because of her language skills, Mary would often be called to interpret for her clients in various settings. Mary trained for and became a professional interpreter, which allowed her to serve as a medical and legal interpreter. As a result, Mary interpreted for a variety of social service, medical, and legal professionals including social workers, doctors, psychologists, school counsellors, teachers, and lawyers. She also provided written translations of English and Korean texts.

The opportunity to participate as a collaborative interpreter in a clinical counselling program for immigrants was unique to her agency. Mary started to work at that agency after the settlement counsellors’ training for this program had taken place. So, she took on cases slowly at first, learning as she went along, and soon became an important and insightful member of the counselling team. Altogether, Mary worked frequently as a collaborative interpreter for seven years. When the co-counselling program ended, Mary returned to work in the field of library science.
4.2.2 Sharan’s Biography

Growing up in a large city in the north of India, Sharan was part of a well-educated and respected family. She still speaks with emotion about loving parents who supported her decisions and dreams, and especially of a mother who, through her good works in the community, became a role model for Sharan. She learned English through her education and, after completing a master’s degree in the social services, she married though arrangement and immigrated to Canada with her husband. During her 30 years plus in Canada, she too has created a loving and supportive family with her husband and four daughters.

Although her degree was not recognized in Canada, very soon after her arrival Sharan began to work in her chosen field. She did this by becoming involved in the formation of a new settlement agency in Greater Vancouver, where she was a board member for many years and worked as a settlement counsellor for over 25 years. To support her growing family, she also took on part-time work with the school district as a multicultural liaison counsellor where she facilitated the relationship between immigrant families and the school staff. Later she trained to be a professional interpreter, and so provided communication access for many social service, health care and legal professionals who were providing services to immigrants. Through her work and extensive involvement as a volunteer in the immigrant sector, Sharan became both well-known and trusted in the South Asian community.

When the opportunity arose in her agency to participate in a clinical counselling program as a collaborative interpreter, Sharan was very enthusiastic. She, along with seven other settlement counsellors, took part in the planning and training that initiated the program. Following that, Sharan worked as a collaborative interpreter and a creative, valuable member of a multicultural counselling team for almost 10 years. Presently, Sharan is a multicultural liaison
for a local school district and is the South Asian community outreach worker for a hospital transplant program.

4.2.3 Ann’s Biography

Ann was born and raised in Viet Nam and fled her country, as did thousands of others, at the end of the Viet Nam war in the mid 1970’s. She was in her late twenties when she came to Canada and speaks very little of her time in Viet Nam and of her early years in her new country. Most often her response to questions about her life then is to say simply, “It was hard. It was very hard.” and look away. At some point just before or shortly after she left Viet Nam, she married and had one son. She learned English in Canada.

A woman of remarkable energy, Ann created a multifunctional and successful 30 year career out of helping Vietnamese refugees in Greater Vancouver. For many years she worked as a multicultural liaison counsellor for a local school district to help immigrant families communicate with school staff. At the same time, she hosted a Vietnamese radio show, and worked part-time as a settlement counsellor. During her work as a settlement counsellor, Ann made many contributions to community education and advocacy issues as well as providing one-to-one support to newcomers. Ann also trained as a professional interpreter and assisted communication between legal, health, and social service professionals and their immigrant clients.

Her part-time work as a settlement counsellor for Vietnamese refugees led to her participate as a collaborative interpreter in the agency’s clinical counselling program. She entered the program right at its beginning, contributing to the planning and taking the same training as her colleagues. Then, for almost 10 years as a collaborative interpreter, Ann courageously and caringly provided counselling to a community scarred by war and refugee camps. To this day when she speaks of those clients she can easily slip into tears. Presently, she
maintains her radio program and multicultural school liaison position, while also co-managing an English-language and tutoring school for immigrant children and teens.

4.2.4 Jas’s Biography

Jas was born in the Punjabi region of India and grew up in a large city. Her family was middle-class, hard-working, loving, and reasonably permissive, allowing Jas and her two siblings to make many of their own choices in life. Like many children in India, Jas learned English at school, but did not become fluent in it until after she immigrated. She went to university in India to obtain her bachelor’s of education and then chose to move to the south of India to start her teaching career. While she was there, her parents arranged a marriage for her with a man who lived and worked in England as an optician, and whose family lived in Kenya. She gave birth to her two children in England and worked there as an English language teacher. In the early 1980’s, when her children were still small, she and her husband moved the family to Canada and they settled in Greater Vancouver.

Once in Canada, Jas obtained employment as a settlement counsellor and began a career helping South Asian families that has spanned over 20 years. As a settlement counsellor, Jas was involved in community education and advocacy along with one-to-one support for newcomers from India. She also worked as a counsellor for South Asian women in violent relationships. As well, she, like her colleagues, trained to be a professional interpreter and so spent a considerable number of years helping court, social service and medical personnel communicate with their clients.

Jas was involved from the beginning in the development of a clinical counselling program for her agency. She was one of the seven original settlement counsellors who acted as consultants to the mainstream mental health professionals who originated the program. Throughout her training and over the next ten years, Jas met the challenges of being a
collaborative interpreter with a great deal of acumen and confidence. She counselled hundreds of South Asian individuals, couples and families and brought a wealth of ingenuity and wisdom to the multicultural counselling team. When the program ended, Jas continued to counsel Canadian and immigrant women in violent relationships through a mainstream women’s program in another agency. Presently, she works for a large, mainstream health care agency where she provides outreach and support to South Asian families who have a child with a disability.

4.3 The first analysis

Those were the women with whom I had the privilege of working as an English-speaking counsellor. At that time I felt I had an open, trusting relationship with all of them despite my position, at first, as the only professionally registered clinical counsellor and, later, as their clinical supervisor. Six years passed before I invited them to participate in research about their experience. By that point all of us had dispersed and, for the most part, lost contact. So when I met with them again to conduct this study, I could simply be a past colleague and a researcher. Proof of my changed status was their candor in these interviews. They spoke of thoughts and feelings that had never come up when we worked together. Perhaps time and distance played a part in this expressiveness, time to reflect and collect meaning. However, the openness with which they spoke about their relationships with English-speaking counsellors and clients, about western therapy, and about their sense of self at the time was profoundly different also, I believe, because I had no power over them. So it was incumbent upon me to resist claiming power in my analysis, not only because the methodology requires self-awareness of pre-understandings, but to honour the voice of the lived experience I was finally allowed to hear.

When I first approached the texts from the interviews I soon became conscious of the need to put my assumptions about the participants’ experience aside and form a new relationship
with the texts themselves. As I read, I was immediately aware that, because of working with each participant, I had my own version of what their experience was. Each time the text challenged me by including or omitting information that was different than what I thought it might say, I felt disappointed or confused or irritated. These feelings were similar to those I had when, in the past, I had analyzed literary texts. Back then, I would come to expect a certain focus or style from an author and would be caught off guard when reading a different text by her or him. The remedy was to get to know the text only and leave aside my “relationship” with the author. I did so with the texts for this research first by reading the text as a whole and then asking questions: about my reactions, about my theories, about my difficulties. From there, I went back to the text and tried to meet the words instead of seeing the person who uttered them. As I re-engaged with the material, I began to ask the text questions about what was there and why by staying aware of the cultural and historical context from which it emerged. I also paid attention to the text by noticing its patterns and turns, its emphasis and absences, and how they contributed to the meaning of each segment and of the whole. From this point I was able to see the links in the chain of meaning and avoid forging my own.

4.3.1 Mary’s first interview

To begin, I read the text of Mary’s interview several times to tease out the evocative phrases contained in every response. I then read again to isolate the concepts contained in those responses. Once I had these two lists, I started to examine the concepts to see whether they could be contained under broader topics. My initial topics were:

- responsibility
- following and leading
- learning
- acting or representing
- integrating client to the west
- integrating two cultures in session
- providing knowledge
- building trust
• nature of helping
• explaining difference
• biculturalism

I then returned to the longer list of concepts and began to see possible clusters that I could gather under tentative themes. These concept clusters involved her awareness of being in-between cultures; of acting the part of each culture to assist communication; of integrating cultures and roles; and of her various locations of power or submission in relationship to the dominant culture. I called these neophyte themes: betweenness, acting, integration, and relationship to power. Then, I went back to the text to compare these initial clusters with quotes I had drawn for the text. In that process I teased out more concepts and re-determined the themes based on the metaphorical or most expressive phrases in the text.

As I came up with these themes, I sought out their meaning in the Oxford English Dictionary (OED, 2005) to see if the words accurately represented the sense I had of the meanings in the text. The result was a list of concepts attached to themes (Table 4.1). Included here, as well, are some of the quotes that also suggested these themes. While some may be clearly indicative of only one theme, others also contain elements of different themes.

1. Agency:

Sometimes I got to take my role as a leader of that session. Sometimes I have to, you know, find even more extended information in order to make [the clients] understand what is going on. . . .I would like to, kind of, submissively sit there to help [the English-speaking counsellor] out, but when. . . .I faced my clients I feel I got to lead, I got to lead this session [because] that's the way I could help them more.

. . .sitting there sometimes, I feel kind of how can I help [the clients], how can I help them. . . .not only just between the English-speaking counsellor and. . . .the clients themselves, but I sit there and want to help the clients to get more information. . . .more possible ways to getting out of, you know, get through this trouble issue.

. . .when [Korean immigrants] are here I would like to see them getting deeper and deeper into mainstream culture. . . .In order to make [their] way it's very difficult for them, you know, to ask them, 'Hey, you got to walk into the
mainstream. . . go, go, move, move." It's very difficult and so it's got to be the other way, I think, out of mainstream. They got to reach their arms out in order to bring [the immigrants] in. . . in order to touch each other.

. . . [counselling] could be very new to them. That's why I got to give them an introduction... saying that, you know, this English speaking counsellor is here and why I am here, what kind of help I would do. . . I would say. . . out of the counselling session you don't expect decisions from us. . . we are here in order to help you find out how you can get through. . . we are here to guide you. . . you got a very heavy, wet blanket on your head or on your shoulders. Say there are three or four heavy blankets but since you are under those blankets you wouldn't be able to see which one might be lighter that the others. But we are sitting out [here], so we can see the second one on the top might be the lightest one to you. So we could see that. We can guide that, you know, make you to put your arms out and remove that lighter one first so you can breathe a little bit easier. So, you know, that kind of thought, explanation.

2. Duality:

So here [co-counselling] the relationship with culture is quite interesting, Just to see myself while I was sitting there, I thought I was quite westernized, you know (general laughter), helping the very new to Canada, totally Korean person. But I actually think I was still kind of not westernized. . . not completely away from Korean.

It was quite interesting, you know, my experience because even though I was sitting between two parties, I took my role as kind of dual role. One is towards. . . the English speaking counsellor [who] I could intentionally [let] be the leader of the session. By doing that I put myself totally as assistant. So that means I put myself as saying that I don't have to make a decision. . . I was free from that, I would say, burden or stress. But when I faced our client I had to take a kind of different role from being assistant [to being] even a kind of representative of my clients.

[Clients] were not used to come in to sit in front of an English-speaking counsellor to talk about their feelings or their issues and they show that. I could feel that they still had some kind of suspicion. . . "What are you going to do to help me?" . . . "Why are we sitting here?" So I have to use. . . my skills as a Korean before being a counsellor.

When I am about to help my clients, I don’t think I would behave as westernized Korean woman. No, no.

3. Acting:

It is acting. . . sometimes I take it as kind of acting because when my clients make a. . . statement in Korean, I had to try to put in emotion, not only the verbal
statement...if they feel...when they are making a statement and if they put also facial expression...or movement, I try to copy. I try to put [in] that emotion and the body movement as much as possible...copying their way. And the other way when the English-speaking counsellor says [something] it’s the same thing, integrating into Korean, I try to put even any kind of tone...So that way...it could even be acting.

When I interpret...the contents of both parties I actually personally don’t have to put my emotional at all, but I copy.

I got to show [the clients] you can...trust me and the English-speaking counsellor. I have to actually say out verbally that you can trust us...or by acting, by showing what kind of person I am from facial expression to body language...

Certain aspects of these themes surprised me and challenged my expectations. I realized that I was vulnerable to error not only based on my familiarity with the participants, but also because of my parallel experience in the program. For example, as I paid attention to the text, I noticed that I had expected a theme based on collaboration. This assumption came from my experience of unity and creativity as well as from my knowledge of the program design. Instead, the text emphasized leadership, advocacy, and singularity of purpose. My predictions also led me to think that I would find some sort of theme about the cognitive difficulties involved in conveying language and intent across cultures. I well remember sitting through many sessions where the collaborative interpreter asked me to describe what I meant because there was no comparable term. Also, I knew from the research that retrieval from one lexicon to another can prove difficult depending one whether one is translating from first to second language or second to first. However, the theme of acting emerged, with all its attendant emotional and physical content. As a result, I realized that I had only noticed the surface aspect of interpreting and not the holistic, mind and body experience that the text revealed.
Table 4.1 Mary’s themes

<table>
<thead>
<tr>
<th>Agency</th>
<th>Duality</th>
<th>Acting</th>
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<tbody>
<tr>
<td>“the means of action through which something is done” (OED)</td>
<td>“composed of two parts” (OED)</td>
<td>“to serve temporarily as a substitute; to portray by actions” (OED)</td>
</tr>
</tbody>
</table>
| - responsibility  
- leadership  
- integrating  
- informing  
- helping  
- trust-building  
- educating  
- alliance building  
- promoting  
- explaining | - identification with east and west  
- identification with immigrant and acculturated experience  
- mistrust from client/trust from client  
- too western/too eastern  
- biculturalism  
- neither east nor west  
- doorway to and container of cultural knowledge | - acting  
- role playing  
- presentation of self to facilitate trust  
- verbal and nonverbal copying  
- representing  
- emotional copying  
- adding or enhancing  
- maneuvering |
More challenging were the thematic elements which contravened my expectation that power and race issues would comprise a negative part of the experience. I anticipated that the presence of a white English-speaking counsellor or the use of western therapy would contribute to an experience of suppression or subversion. So determined was I to find racial/cultural oppression, I even blurted out a question to that fact in the interview. What I asked was if the experience of building trust in the client had been different when working with an English-speaking counsellor who was a person of colour. My participant politely replied that the client would have the same amount of distrust for an English-speaking counsellor of any racial background other than Asian. The key to trust-building was in the collaborative interpreter’s portrayal of cultural norms, of still being more eastern that western, and in portraying the English-speaking counsellor as having cultural knowledge. Moreover, there was even a positive value placed on acculturation in so far as it would help clients adjust to their new home. Finally, I was also surprised by the experience of feeling neither eastern nor western. Even though I understood the concept of biculturalism, I still anticipated that the collaborative interpreter’s experience would invoke feelings of allegiance to one or the other culture. Instead, the text asked me to consider the experience of cultural fluidity and separateness.

Once I had finished the analysis, I began to write the thematic description of Mary’s experience that I would present to her for confirmation. The final description I presented to Mary follows.

4.3.2 Mary’s themes

The experience of agency, that is, the power to make things happen, seemed to be a very strong theme in Mary’s description. She spoke of having a sense of responsibility to make both parties understand each other, which she did by taking the position of leadership when necessary during the sessions. At first, Mary felt uncomfortable taking on responsibility because it brought
with it the burden of stress. As an Asian woman, she explained, she grew up “knowing her place” and was content to be the assistant to the expertise of the English-speaking counsellor. However, she felt very quickly that in order to make her clients understand what was going on, she had to take the lead in educating and explaining, particularly about the purpose and process of counselling. During sessions, she often found herself having to “add on” to what both client and English-speaking counsellor were saying in order to clarify and expand the ability of each to understand the other. She said it was a very different experience than being an interpreter, where she would simply translate the English into Korean. In this role she felt that she had to integrate the words and worlds of both sides. Being involved in counselling also required her to use her cultural skills to evoke emotional content from the client’s stories as well as correct the English-speaking counsellor’s suppositions. Mary also felt that she needed to be foremost in creating the therapeutic alliance by promoting trust in the counselling process, the English-speaking counsellor’s ability, and in her ability to represent them appropriately.

A second theme of duality, that is, experiencing oneself as composed of two parts, is also strongly represented in Mary’s description. She spoke often about feeling that she moved from one perspective to the other, not just empathically, but through her shared experience of both worlds, eastern and western. She explained that she would easily identify with the client’s confusion about the counselling process, for example, and just as quickly find herself being a western-style counsellor who was strongly allied to the western method of helping and would block client discussions that she judged to be irrelevant to the process. Fundamental to her experience of duality, it seems, was her deep identification with the immigrant experience and the experience of becoming acculturated. When working with immigrant clients, she would re-experience the first few years of her arrival to Canada, relating to their current sense of suspicion, confusion and alienation. At the same time she was aware of experiencing herself now
as an integrated Korean-Canadian, fully able to enjoy and participate in western culture. It was this duality that increased her sense of urgency that she must help her clients; she must help them build alliances with the mainstream culture and increase their ability to function in their new home. This feeling was very strongly expressed in Mary's description. For example, she said she wanted to urge them to "walk into the mainstream...move, move." She also said she took pleasure in being able to build a bridge between the mainstream culture and the immigrant experience and possibly make the integration process less difficult. Another aspect of duality lies in Mary's experience of being "neither." She explained that she often felt that she was perceived as being both trusted and not trusted by the clients, depending on whether or not they identified her as being "westernized." This shifting of perception by others was also part of her everyday experience: in some contexts she was too Western and in others too Asian. Being bicultural seemed to be a confusing experience for Mary insofar as to how others chose to interpret her. She was also aware that it gave her the privilege of being able to create her own alliances with both the English-speaking counsellor and the clients. She felt that as much as she could be confusing, she could be comforting. Finally, in sessions she was aware that she had full access to both cultural worlds and the meanings created within them. From this came her sense of urgency and duty, bravery and confidence to speak for both sides in the sessions.

The third theme that emerged from Mary's interview was "acting." In this case the definition of acting is to serve temporarily as a substitute and/or to portray by actions. Mary said the most surprising experience of this work was that she found herself at times to be acting. Since acting was a childhood dream, Mary felt excited by this opportunity to act as a means to more thoroughly represent the clients and the English-speaking counsellor. She also used the term "role-playing" often in reference to this experience. She spoke first about using non-verbal "copying" to facilitate the exchange of trust and meaning. For example, she said she used to
“maneuver” her body language so that she could translate the English-speaking counsellor’s question accompanied with a culturally appropriate attitude. Equally, she would use her body language to portray herself as more Asian to the clients when they were suspicious of her alliance to the English-speaking counsellor. She said she would “show what kind of person she was” to the clients by adjusting her facial expressions, stance, and so on so that they would know that she did not mean to be intrusive. This skill seemed to greatly enhance her ability to translate the counsellor’s intent without offence. Equally she would adjust her manner to facilitate the counsellor’s understanding and experience of the client. She also spoke about changing her verbal tone when translating back and forth, so that each party’s intent could more easily be recognized. Most interestingly, she spoke of emotional copying to represent the depth or importance of the client’s response. This copying might mean enhancing the expression to meet Western expectations or, similarly, enhancing the good intentions of the English-speaking counsellor. Here she said she truly felt she was acting, taking on the emotional representation of another’s world.

To summarize, all three themes, Agency, Duality and Acting, seem to be interrelated and facilitative of the others. Mary’s experience seemed to be that of a powerful and fluid inter-relationship with self and others.

4.3.3 Sharan’s first interview

This text was far longer and more involved than any of the others. As I read through it carefully, identifying concepts and phrases in every response, I produced somewhat daunting lists. As a consequence, I had to read the list of concepts over many times before I gained a sense of possible groupings and themes. The first list of topics I generated was:

- relationship with western therapy
- credibility
- collaboration
- challenge

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Again, I went back to the list of concepts to reflect on possible clusters and themes. This time I discerned three possible themes that might express the most salient points of the experience. The first theme was challenge, under which I grouped the experiences of being lost or stuck; of preparing the clients; of managing the relationship with the English-speaking counsellor; of forming the relationship with the client; and of educating both parties about cultural differences.

The next tentative theme was credibility. Under this theme I grouped the experiences of engaging in western therapy; of relating to mainstream health services; of collaborating; and of feeling a stronger sense of autonomy. Lastly, I grouped the experiences of learning, acculturation, reassurance, and validation under the theme of satisfaction.

This early formation of themes was quickly abandoned as I culled through the text again to match phrases and words. I realized that certain aspects of this participant’s experience could just as easily be related to her general experience of being a social service provider. Although the experience of credibility did occur within sessions, it was more strongly related to her experience with mainstream service providers who would make referrals. Satisfaction as well did not adequately distinguish the experience the participant had within the process of a session from her experiences of team meetings and external consultations. With these considerations in mind I went back to the lists of concepts and phrases to seek out only those relating to session work. What arose were four new themes, each comprised from a list of concepts and phrases. Below, is a table (Table 4.2) to demonstrate the themes and the concepts by which they were produced.

Next are a few of the most salient phrases captured by these themes. Please note again that I have
made an attempt to isolate them under one theme only, when in fact they often contain ideas from other themes as well.

1. Adaptation:

(speaking about adapting western therapy) I would definitely bring the cultural perspective in there and try to create a balance, where the [client's] need is met and at the same time...also convey to my co-therapist that...this is what is more appropriate in this situation.

When I'm speaking to the client I just don't want the client to totally disqualify this western [approach] because actually, deep down at the bottom of things we all think alike. It's only our ways that are different. So culturally, not only I'll be just mediating, but I'll be educating both ends and bridging that gap.

(speaking about preserving the English-speaking counsellor's credibility) Yes, very important, very important. That's the whole idea of co-therapy. [These clients] are not living in isolation. They have to be contributing members of the mainstream community. So in order to put both cultures together, I think it's important that the credibility remains intact so that [the clients] eventually are going to take something back home with them.

It's a great learning experience for me as well. I was learning many things on the spot, which I was trying to synthesize....

2. Solitariness:

You have to do a lot of thinking right on the spot...I mean, for me to communicate with the co-therapist and communicate with the client simultaneously right on the spot, I think it requires a lot of...Sometimes you have to rely particularly on quick thinking but sometimes it can become very difficult...where you need a little more time to sit and wonder, sort of weigh both cultural philosophies – uh – cultural norms....

...not to my satisfaction were some of the – that were lost in translation...And it's in both languages. It's the same thing, you know, sometimes bringing the client's point of view to the co-therapist with the strength that it was said in that language and [return] with that empathy that the client needed. When it was translated and brought back [it] was not at the same platform, I would say, so that part was sometimes, um, could leave some gaps, which again...I would try to cover...
Table 4.2  Sharan’s themes

<table>
<thead>
<tr>
<th>Adaptation (adapt v.) “to make or become suitable for a new use or situation” (OED)</th>
<th>Solitariness (various) “sole, alone, without assistance” (OED)</th>
<th>Alliance “a union or association formed for mutual benefit” (OED)</th>
<th>Achievement “an accomplishment gained or reached by effort”(OED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• bring in cultural perspective</td>
<td>• difficulty with language and cultural interpretation</td>
<td>• undoing automatic alliance expected by client</td>
<td>• successfully communicating on the spot</td>
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<tr>
<td>• create balance between east/west</td>
<td>• weigh both cultural philosophies</td>
<td>• building trust</td>
<td>• quick thinking</td>
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<tr>
<td>• collaboration</td>
<td>• challenging to maintain both relationships</td>
<td>• relationship with English-speaking counsellor</td>
<td>• creating ways to participate</td>
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<tr>
<td>• create and maintain English-speaking counsellor’s credibility</td>
<td>• getting stuck</td>
<td>• relationship with client</td>
<td>• getting client participation</td>
</tr>
<tr>
<td>• bridging the gap</td>
<td>• thinking on the spot</td>
<td>• co-counselling</td>
<td>• satisfying to bring together two points of view</td>
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<td>• negotiating</td>
<td>• educating</td>
<td>• supporting each other’s expertise</td>
<td>• empowering clients to make their own decisions</td>
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<tr>
<td>• acculturation</td>
<td>• need to preserve own credibility with client</td>
<td>• educational for everyone in triad</td>
<td>• collaborative learning</td>
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<tr>
<td>• brainstorming</td>
<td>• need to diffuse potential offensiveness</td>
<td>• discussion time very important</td>
<td>• satisfying that client receives help</td>
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<tr>
<td>• preserve western therapy intent</td>
<td>• incorporating own ideas</td>
<td></td>
<td>• validation of own expertise</td>
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<tr>
<td>• using examples</td>
<td>• dissatisfaction when things lost in translation</td>
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<tr>
<td>• finding common ground</td>
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3. Alliance:

...at times it was a very challenging role. ...because we [co-therapists] have a certain goal to achieve in this session and sometimes it was quite difficult to right away tell the client that we’re going to find other ways to deal with the situation. ...many times it was easy for me, but sometimes I would be stuck too, you know, to tell you very frankly. ...the most helpful thing in there was that [the client] would sometimes brainstorm and find ways once I would tell them the intent of my co-therapist. So then they would be helping me sometimes to brainstorm and find out what are some of the other ways where we can achieve this intent.

...sometimes I would go back to the co-therapist and talk about [the situation] so that we find common ground to help the client. At other times, having this [cultural] knowledge and having gained that [western] knowledge for myself as a counsellor, then I would find my own way back to the client.

4. Achievement:

The satisfying part was actually that my client had received counselling from a cultural counsellor and also from the expertise point of view. ...so it was quite rewarding.

First of all, [the clients’] expectations that they have walked in with need to be revisited. So I used to spend a lot of time doing that and once it was done. ...I would empower them so that they. ...[are] ready to make their own decisions.

The second interview text presented me with a different set of questions. As I read, I did not experience the same level of surprise at the content as I had with the previous text. However, as I indicated, I had to remain much more mindful of the possibility that I would isolate experiences as particular to the situation without noticing that they could also be applied to the wider experiential world of the participant. This awareness was especially important, not only because the participant had a wealth of experience as a social service provider, but also because she had been a long-time peer counsellor in the community. For example, as a result of her standing in the South Asian community some clients came to her with a sense of automatic trust and respect. Thus, I had to distinguish between what might be a client-counsellor alliance built on reputation and what was engendered in the co-counselling process. I did this by reading the text in segments and then as a whole repeatedly until I could appreciate her alliance with clients.
as a whole as well as in the part encompassed by the collaborative interpreter experience. Specifically, I heightened my awareness of the whole in order to understand the parts.

To complicate things, this participant told many stories to describe her experience, stories about the community, about her birth culture, about cases, about what others thought or did. I read these stories carefully for their meaning and placement in her responses until I understood their thematic coherence with the direct statements made about the bicultural experience. The beauty of these stories, I eventually came to realize, was their metaphorical quality, which illuminated the deeper emotional meanings in the rest of the text.

With this text, as with all the others, I also questioned whether or not the positive comments about the English-speaking counsellors occurred because I was present. At this stage of the research I did not know if the description of this alliance was determined by the values of politeness, or saving face, or not. Further along in this study it became clearer because the participants’ candor increased. However, at this point, I drew out the descriptions only when I could find proof elsewhere through other details in the text.

The strongest emotional reaction I had to the text was toward the expression of feeling alone in the process. Although similar to the previous participant’s sense of separateness, again this quality was not what I expected. I had anticipated that there might be experiences of frustration, confusion, or even anxiety among all the descriptions; but I thought that the experience of collaboration would likely prove remedial. I was wrong. Because I was already sensitive to my desire to see unity, I wondered in a deeper way about how my remembered sense of excitement in those sessions might be influencing my reading of these texts. The result of this reflection was that I went back and re-read all the descriptions concerning connection and satisfaction to make sure I was understanding the text and not referring to my own meanings.
Once this part of the analysis was complete, I wrote the description of Sharan’s experience for her to read.

4.3.4 Sharan’s themes

Sharan’s experience of re-creating therapeutic intent is captured by four main themes: Adaptation, Solitariness, Alliance, and Achievement. The first theme, adaptation, or “the result of making or becoming something suitable for a new use or situation,” is very strong throughout Sharan’s interview. She experienced herself adapting the content and process of therapy as well as encouraging an adaptive process in her clients. Primarily, as the collaborative interpreter, Sharan had the task of bringing in the clients’ culture so that the help offered was appropriate to both the clients’ beliefs and the therapeutic intent. To do so, she found herself negotiating a common ground between the parties to find a balance between east and west where the risk of taking offense or refusing to consider difference was greatly reduced. In this role she was a negotiator and a diplomat. She called it ‘bridging the gap’ and said it was possible because she believes that humanity thinks alike, with the only difference being the way we do things.

The main difference to adapt was western therapy itself. Here she was challenged to preserve the therapeutic intent while, as she put it, “making it fit” into a South Asian perspective on what would be helpful. The first part of this challenge lay in trying to explain how western therapy could be helpful without giving clients the advice they expected. She said there was really no close word in Punjabi for “counselor.” In fact the best translation was a word that meant “one who gives you suggestions.” So, it took a lot of time for her to explain western therapy’s emphasis on empowering them to find their own solutions, and that she could not create trust without the clients understanding the “true concept” of it, nor could she preserve her own credibility. Also, she found that Western therapy’s assumptions about the origin of problems could often be vastly different than her clients’, and, because of this, some of the
western assumptions about what might be helpful could even bring more problems for South Asian families. So she was continually challenged to keep the credibility of western style therapy by adapting the intent of the western perspective through the use of examples. For instance, if the western therapist suggested to a couple that a solution to their arguments might be found by having the husband help out more around the house so his wife can get some time to herself, Sharan would have to explain to the clients that the English-speaking counsellor's intent was to reduce stress for the couple, not to create disrespect in the home. At this point, she explained, she could often engage the clients in brainstorming with her about their way to achieve the same goal by doing something that would be more suitable to their cultural norms. Once a satisfactory adaptation was reached, she would bring it back to the English-speaking therapist. At this point, a second collaboration would take place between her and the English-speaking therapist until they developed a common ground from which to help the client.

The second way she felt herself to be involved in adaptation was through encouraging an adaptive process in her clients. One of the main reasons she believed in the helpfulness of western therapy was that she felt strongly that her clients needed to become contributing members of mainstream society. This perspective meant that they had to find new ways to solve their problems in alignment with western culture. She said that through the therapeutic process she felt that she was bringing new ideas to them so that they didn't remain in isolation. When asked about how she came to feel comfortable in both value and belief systems, she said that she felt her acculturation process came "knowingly and unknowingly" through the processes of time and exposure to western ideas.

A second theme in Sharan's interview was solitariness, or "the experience of doing something without assistance, as a lone task." She explained that there were many instances where she felt alone with the burden of preparing the ground and creating understanding. With
each new client, she said she had to work very hard and take extra time to explain to them the value of western counselling. This preparation took place before she brought them into the therapy session and she felt it was 2/3rds of the work because it helped them see beforehand how they could apply their ways to the therapeutic goal. The preparations also, in her experience, greatly reduced the potential for western therapy to be seen as offensive. Her means of educating and persuading clients to try western therapy would vary depending on the nature of the clients themselves as much as on cultural determinants. So it was left to her to create an alliance with the clients that could be transferred into the different context of western style co-therapy. On the other hand, it was also exclusively up to her to educate the English-speaking therapist about clients’ cultural expectations. This process also happened in and outside of sessions.

Ultimately Sharan had to maintain an honest and trust-building transparency between the two parties. Only she knew the intent of both. Even more, Sharan was the only one who could transfer the ideas linguistically. She emphasized that if she were simply doing interpretation, exchanging one lexicon for another, she would not have felt pressured to think as much or as quickly. As the collaborative interpreter, Sharan said it was sometimes very difficult to think on the spot and be able to include the cultural interpretation as well. Often, she explained, it felt effortless and quick. Other times she found herself needing time to think, to wonder and weigh different cultural philosophies. Sometimes she would simply be stuck, incapable in the moment to explain the intent of the western therapy or the views of the client. Sometimes too she would find that the only way was to incorporate her own ideas. When there was simply no way to translate a culture bound idea, she would impart the information anyway to keep things transparent. These situations could make her feel wary about how to maintain the relationships and not say something that would annoy or spoil the trust. Finally, she experienced solitariness when she knew that things were lost in translation. For example, when empathy became
impossible between client and English-speaking therapist, when perspectives were untranslatable, when she was unable to bring the English-speaking therapist to the same level as the client, and when she saw awareness in the clients’ eyes that they were not being fully understood.

Alliance was another important theme in Sharan’s experience, especially in regard to her relationship with the English-speaking therapist. For the therapy to be successful at all, she emphasized the need for a trusting, mutually respectful relationship between herself and the western therapist. She also stressed the importance of the western therapist being open to different ideas and new learning. She said she felt that her credibility and expertise in language, culture and as a helper was validated because of the co-therapy relationship. Equally, it created trust for her in the western therapist’s creativity and ability to come up with new ideas once redirected. Because she trusted the value of western therapy, she also felt supported by the western-trained therapist’s expertise and encouraged when her thinking matched her co-therapist’s. Sharan found the co-therapy relationship to be full of learning for both of them, which they discussed and processed together. With respect to her alliance with the clients, Sharan said that she needed to “undo” the automatic alliance expected by the clients because she knew their culture. She also had to preserve her credibility with them and let the English-speaking therapist in on how she was doing that. Ultimately she felt her strongest alliance to be with the English-speaking therapist and the goals and helpfulness of western therapy, while remaining sensitive to her clients’ experience and culture.

Finally, the theme of achievement was very present in Sharan’s experience. She expressed a great deal of satisfaction gained through knowing the client was being helped from the expertise of western therapy. She said she felt happy to know that the clients were being empowered to make their own decisions and live successfully in their new country. She also took
pleasure in successfully communicating for both parties on the spot and creating ways in which both sides could participate in setting and achieving goals. She also said she found it rewarding as a learning experience for her as much as for her clients. As well, Sharan gained satisfaction from having her own counselling expertise validated, both by the process of integrating with the English-speaking therapist’s ideas, and by the mainstream respect she gained by working in a western therapy model.

In summary, Sharan experienced herself as creative, collaborative, and uniquely situated to help the west and the east understand and gain from the other. It was a place that was as rewarding as it was challenging, exciting as it was nerve-wracking, and always a place of personal growth.

4.3.5 Ann’s first interview

The first themes I saw in my lists of concepts and phrases from this text were somewhat more difficult to arrive at then the themes in the other texts. The interview process itself had been interrupted a few times because it took place at the participant’s office. So right away the text presented some leaps and unfinished thoughts in the responses. To deal with this presentation, I read the whole text more times than the others to get a solid sense of its underlying continuity. I also relied more heavily on the descriptive phrases to identify the early themes.

My first sense was that the text spoke about the theme of connection. Tears and pauses had punctuated the interview, which I transferred to the text, whenever the participant described her relationship with the clients and with the English-speaking counsellors. The emphasis of these emotional but silent descriptions was on the experience of mutual understandings and shared situations. Closely allied was the theme of good work, which encompassed the sense of meaningful endeavours linked to happy outcomes. In contrast, the theme of difficulty was also a strong element in the text, representing empathy for the clients’ past and present situations and
the task of bringing two worlds together. A fourth theme, I loosely termed presence to try to represent the sense of self in the process. Through diagrams, I later divided this theme into the experiences of being active or passive during the work. Still later, I reflected on the text’s use of the word transformation and its relevancy to both the experience of self and the experience of the process. The result was the list of themes and concepts reproduced below (Table 4.3). Some of the phrases that inspired these themes were:

1. Connection:

I don’t know but when I work there I feel like I’m one of them, not an outsider.

I don’t know why, but then I knew [the English-speaking counsellor didn’t] know much about our culture...but I still think why did we have a really good connection? The bonding, I don’t know...I don’t feel worried or scared when I talk to [the English-speaking counsellor]...I feel confident....

On the one hand I try to make [the English-speaking counsellor] understand them. On the other hand I had to-- I try to make them understand [the English-speaking counsellor]. So it’s a big gap. So if I...just do things normally like just interpret what they say and just interpret what [the English-speaking counsellor] say, I don’t feel good because it goes nowhere.

2. Representation:

I tried to put myself in [the clients’] shoes so I can express their feeling, their concern, their worry. You know I am not just an interpreter for them but I want to let [the English-speaking counsellor] talk to [them] through me....I want [the English-speaking counsellor] to see [their] feeling through me.

What I was doing is trying to use many ways [to] go around, to make [the English-speaking counsellor] really understand what it means....what the client said to me and then...transform into English.

Knowing your culture and understanding my culture, I had to put two together to find a way to help the client understand. So, it’s not just talk....I had to do acting to make that person understand and accept it.

3. Difficulty:

Researcher: How was it for you to try to interpret emotions?

Participant: It’s very hard....It’s not easy (crying)....Some cases it’s really difficult.
the English-speaking counsellor and the client are the main person. I am here but I am not here. It's not just me sitting there because I had to be in between [them]. That's the difficulty.

4. Good Work:

I remember, you know, this was a good time, even if it's difficult. It's hard but it's good work.

I always tell the client, well we live here in Canada. We have to learn what they're doing. We have to think what they're thinking because otherwise we will be in another world and we can never feel belonging.

This was a good time. I'm so happy I did that. I wish one day we could continue to do that job again, even if it's hard. It's not that easy but it's meaningful.

This interview text presented me with two challenges. The first I have already introduced— that being the difficulty I had with the interruptions in the text. Here, I had to set aside the assumption, formed by my experience in the interview, that the text would be impoverished by the breaks in the interview process. Instead, I had to set aside that prediction in order to read the text with the perspective that every text produces a whole.

What made things more complicated, though, was the fact that I was starting to see commonalities among the texts, such as the allusions to acting, satisfaction, and feeling in between. Even though I was keen to discover them because it was my research goal, I realized that these were important observations occurring at an inappropriate time. What I needed to do was to read this text for itself, without bringing in expectations from my readings of the others. In order to keep these observances for another time, I wrote them out and set them aside, adding as I went along. So, each time I read something I believed was similar, I had a physical place to remind me that in that moment I was thinking outside of the text itself. As a result, when I came to write the description of Ann's experience, I felt true to her voice.
<table>
<thead>
<tr>
<th>Connection</th>
<th>Representation</th>
<th>Difficulty</th>
<th>Good Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;a joining or being joined; union&quot; (OED)</td>
<td>(represent, vt.) “to present a likeness of; portray, depict; describe; to stand or speak for” (OED)</td>
<td>(difficult, adj.) “hard to do, make, manage, understand” (OED)</td>
<td>(good, adj.; work, n.) “suitable to a purpose; effective” and “purposeful activity” (OED)</td>
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<tr>
<td>• Empathy</td>
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<td>• emotional communication</td>
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<td>• relationship with English-speaking counsellor</td>
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<td>• creating mutual understanding</td>
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<td>• merging cultures</td>
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<td>• representing both</td>
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<td>• bridge, channel (passive)</td>
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<td>• lens, mirror, reproduction (active)</td>
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<td>• transforming language</td>
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<td>• crying</td>
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<td>• gender power difference with home culture</td>
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<td>• using own knowledge and experience</td>
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<td>• meaningful</td>
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4.3.6 Ann’s themes

It seems that Ann’s experience of recreating therapeutic intent across languages and cultures can be expressed by four main themes: connection, representation, difficulty, and good work.

Ann’s experience of connection begins with her empathy for the clients. She says that she really felt “like I’m one of them, not an outsider.” Thus, she was able to communicate for them emotionally, “express their feelings, their concern, their worry.” Sometimes the depth of her emotional connection with the clients created a type of identification with them, where she found herself working to help the English-speaking counsellor “understand us.”

The “us” brought forward through her emotional connection also refers to Ann’s role as cultural interpreter. In that role Ann experienced the weight of translating a culture, the context within which the clients’ emotions were generated, in order for the English-speaking counsellor to understand. Her confidence in being able to do so, Ann explains, arose from her strong connection with the English-speaking counsellor. This connection, she emphasizes, is very important because it created a sense of safety for her from which she felt free enough to challenge ideas or ask for help. In her experience, she emphasizes, there needs to be mutual understanding and trust shared between the bilingual and the English-speaking counsellor, a strong connection that sometimes needs no words. From this place, she found that helping the English-speaking counsellor understand the cultural differences was much easier.

Emerging from her sense of connection is the experience of representation. Here, Ann’s experience takes two forms: the representation of therapeutic ideas and the re-presentation of self in the process. In the therapeutic sense, Ann explained that her role was to create mutual understanding between the English-speaking counsellor and the clients. To do this she found herself using many ways to translate western ideas into helpful suggestions that were more
appropriate culturally, and to transform the client’s words into English. She would also explain to the English-speaking counsellor why the original ideas would not be perceived as helpful by the client. Always, however, she made a point of supporting the English-speaking counsellor’s intent. The way she incorporated the western ideas was to “sometimes push some of my ideas to support [the English-speaking counsellor’s] and sometimes explain longer, bigger to support [them].” Specifically, Ann acted to influence and create understanding by transforming two cultures into a mutually understood context of helping.

The second part of Ann’s experience of representation relates to her own sense of self in these sessions. She says that she felt that she had to represent both human beings, counsellor and client, and that by doing so she retreated to second place in the process. As she explains, she felt herself to be more of a bridge or conduit that allowed the English-speaking counsellor to “talk to [the client] through me” and provided the path “to see [the client’s] feelings through me.” Ultimately she describes this experience as “I am here but I am not here,” a transformation of self from antonymous influence to a self in pure support of the client-counsellor relationship.

The next theme is that of difficulty. Ann spoke with emotion about how difficult the task of creating mutual understanding was and, even more, how hard it was to hear the difficulty in clients’ lives. The experience of their stories stays with her even now, long after her role as collaborative interpreter has ceased. Listening to them was where Ann felt the true burden of responsibility to represent and create a way of helping. From the beginning of a session, Ann explains, it was tremendously difficult to even explain counselling, much less gain the trust of the client in Western helping strategies. Moreover, she found it difficult to be in the “in between” position, knowing both cultures and trying to facilitate understanding. Ann also found it difficult in particular when the client was a man. In her culture there is a definite gender power
difference. So when she and the English-speaking counsellor, both being women, approached a male client she was challenged to create gender authority as well as trust in western strategies.

It is perhaps under this theme that Ann makes the strongest point about how the work involved her personally. To represent human thought and emotion across cultures was, for her, profoundly involving, much more so than simple interpretation alone. As she explains, ‘you cannot be like a machine and do [that work].

The last theme is good work. Despite the difficulty, Ann experienced value in her efforts to bring western strategies to her clients. Without hesitation she says “it’s hard but it’s good work.” She says that she tried to make her clients understand that even if the help they needed was coming from a different culture, it was still important that they try what the English-speaking counsellor was suggesting. The reason she emphasized this, she explains, was because “we” (she and her clients) all live in Canada now and so “we have to learn what [westerners] are doing, we have to think what they’re thinking because otherwise we will be in another world and we [will] never ever feel belonging.” The good work lay in helping her clients to bring their culture into this one and discover new ways of solving their problems. She says she also worried that if her client’s didn’t adapt, they would lose the chance of a close relationship with their children. As she explains, “If they keep thinking our old way...they never ever understand their children and there’ll be a big gap later.” She also found that the work brought good things to her life: new knowledge, the experience of deeply sharing, and greater self understanding. Overall, she found her experience in this role pivotal in creating new bonds between the cultures. She says if she had just interpreted what each was saying, she would not feel good because “it goes nowhere.” What she experienced was that her efforts were truly meaningful for all involved.
In summary, then, Ann’s experience was deeply personal and deeply professional. She felt connected to the people and the process, to her birth culture and to western culture, to ideas and emotions. She transformed words, ideas and emotions into mutual understanding, and she felt herself transformed by the work. Ultimately, though it was hard, Ann experienced lasting meaning in her experience as a collaborative interpreter.

4.3.7 Jas’s first interview

To some extent this interview text was even richer in detail than the others. The participant wove an exacting story about her therapeutic process, which was often intricately wound into her descriptions of relationships. In fact, the sense of “we” in the text almost overwhelmed any sense of self. Hence, as I gathered phrases and concepts, I started to make a diagram of the collective descriptions versus the individualistic ones. What I arrived at were experiences from “we” as collaborative interpreter/English-speaking counsellor “we” as collaborative interpreter/client; and “we” the triad. To explain, I offer the following examples (table. 4.4). Obviously, I noticed that some concepts were the same in all three categories. As a result, and despite my earlier awareness that I was expecting certain themes, I felt justified in calling one of this text’s themes, collaboration. The other two themes that arose were discovery and difference. Some of the concepts in support of each are listed below (table 4.5). I have also selected a few phrases that represent these themes. As with all these analyses, themes are often interconnected or multiply present in some of the phrases.

1. Collaboration:

(speaking about the English-speaking counsellor) I think we always felt as an equal...when we worked as a co-therapist, we knew why we are here and I think that’s what gave us...a very clear picture that we are both here to listen to our client’s stories and then to discuss and support that family. So I did not feel at any place...that we both were not able to understand each other because the questions all the time come from both therapists...that’s why we both work at the same level.
I don’t know, I mean as the three of us worked, you never felt that there was inequality.

Researcher: If...this kind of co-therapy session situation came up where you couldn’t position yourself as an equal in the room, how helpful do you think it would have been?

Participant: Then I wouldn’t be a co-therapist. I’d be an interpreter....because that was the model which was developed and if I think about that model not existing and someone who’s coming in with this power, thinking ‘I’m more qualified’...I’m not talking white or non-white. I’m saying, ‘I have a degree’ .....it wouldn’t start with trust. I don’t think it would function.

2. Discovery:

...many times in co-therapy where the questions are very word based. ...and if we’re talking about the feelings. ...I used to like using a metaphor. ...So that, that helped my clients because they talk about metaphors not like wordy, you know, sentences. So I think that was more the way I developed [it] when I was there. ...I would tell my co-therapist this is. ...why I’m asking this question because that’s what you are looking for. That’s where sometimes it’s very challenging because it doesn’t fit into the people’s society. ...so it was like [coming]. ...back with something which happens in life or some of the stories which....they heard when they were raised. And then...saying the intent of it [is] what we’re looking for was very helpful to us. ...that’s one thing. I used a lot of metaphors.

I remember. ...the hundreds of questions between me and my client. And then I think I would go back to this, many times I remember saying to [the English-speaking counsellor], ‘I will come back to you’....I would give her feedback and you know update her on the situation but would go back and so like [there was] a lot of intervention between me and the client in the meantime before we came back to [her].

...after a whole session we used to say this is what I have gathered because there were chances that we missed because of our language interpretation. ...so we used to discuss what. ...needs to be done to help that client. ...[For example] thinking about the suicidal statement. Is that a cultural statement? ...because it has this culturally, you know, what’s quite acceptable, or does it have a deep meaning? We used to look into all those. ...challenges and. ...we used to discuss. ...

3. Difference:

...if there’s a language which doesn’t fit into the language of the client that we are serving, how could I put those questions in such a way where I could corner the culture part of it and also find information which [the English-speaking counsellor] is looking for. So those were very mixed experiences for me.
Table 4.4  Jas’s “we” experiences

<table>
<thead>
<tr>
<th>“We” with English counsellor</th>
<th>“We” with client</th>
<th>“We” with all three</th>
</tr>
</thead>
<tbody>
<tr>
<td>“we would/were….”</td>
<td>“we would…”</td>
<td>“we would…”</td>
</tr>
<tr>
<td>Direct</td>
<td>Highlight for west therapist</td>
<td>experience comfort</td>
</tr>
<tr>
<td>discuss</td>
<td>adapt west ideas</td>
<td>build trust</td>
</tr>
<tr>
<td>equal</td>
<td>discuss</td>
<td>form</td>
</tr>
<tr>
<td>laugh</td>
<td>revise</td>
<td>correct</td>
</tr>
<tr>
<td>adhere to counselling model</td>
<td>collaborate</td>
<td>revise</td>
</tr>
<tr>
<td>create comfort</td>
<td></td>
<td>define</td>
</tr>
<tr>
<td>revise</td>
<td></td>
<td>synthesize</td>
</tr>
<tr>
<td>collaborate</td>
<td></td>
<td>collaborate</td>
</tr>
</tbody>
</table>
### Table 4.5  Jas’s themes

<table>
<thead>
<tr>
<th>Collaboration</th>
<th>Discovery</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;working jointly on an activity or project&quot; (OED)</td>
<td>&quot;the action or process of discovering or being discovered&quot; (OED)</td>
<td>&quot;the state or condition of being dissimilar&quot; (OED)</td>
</tr>
<tr>
<td>• relating with both</td>
<td>• discovering</td>
<td>• capturing “the cultural part”</td>
</tr>
<tr>
<td>• revising, forming</td>
<td>• gathering information – verbal and non-verbal</td>
<td>• establishing oneself differently – clarifying role with client</td>
</tr>
<tr>
<td>• trial, modification</td>
<td>• looking for suitable strategies/solutions</td>
<td>• western (narrative) therapy very word-based – need to bridge</td>
</tr>
<tr>
<td>• adding</td>
<td>• listening for the story</td>
<td>• deliberate effort in sessions to adhere to western concept of help</td>
</tr>
<tr>
<td>• creating comfort</td>
<td>• imagining/picturing the client’s world</td>
<td>• neither completely eastern or western presentation of self</td>
</tr>
<tr>
<td>• equality</td>
<td>• getting the whole picture</td>
<td>• difficult to get the picture</td>
</tr>
<tr>
<td>• synthesis</td>
<td>• creativity</td>
<td>• hard work</td>
</tr>
<tr>
<td>• adapting</td>
<td>• finding/using metaphors</td>
<td>• different value systems</td>
</tr>
<tr>
<td>• transparency on both sides</td>
<td></td>
<td>• start with client’s thinking and then introduce the new</td>
</tr>
<tr>
<td>• discussion</td>
<td></td>
<td>• gender mistrust</td>
</tr>
<tr>
<td>• collaborative thinking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• moving through “stuck” places</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• building trust</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
whenever I was asking the question which was coming from a person who has been trained in our western philosophy. I used to ask for clarification. I remember I would say, ‘This is what I am going to ask this client. Is that what you are looking for?...because...they will not find what you are asking this way.’

though many of my clients would do that [use titles of respect]....even though I told them not to...I made it very clear that they could not...either you were a person of more respect than they, or they were a person of more respect than you and that would have changed the counselling relationship...so that might be for them to know, I will not collaborate with their stories even though I’m a part of their culture.

because our culture’s expectation is that you’re my therapist, you’re my sister. You come to my home for dinner or lunch or something. You know, all those things. I needed to make them very clear even in the beginning so that they know that they’re not looking for allies in those sessions.

Aside from the challenges the text presented regarding the descriptions of collective experience versus individual, I found that I had an even more complex task. Despite my determination to relate only to the text and not my pre-understandings of the person or place, the fact was that I had done the most work with this collaborative interpreter and had many memories of our co-therapy relationship. Thus, I often found myself being pulled away from the text into my own recollections. As I read, I would automatically try to remember the situation described and just as automatically place myself in the middle of it even though this participant had worked with four different English-speaking counsellors. My perspective also contributed to some confusion about what the text was really saying because I would “fill in the blanks” with my expectations and then have to go back and read it again. The only way I could remedy this situation was to go back and read it again and again, pretending that I was a stranger. Of course, I kept notes initially about my reactions to the text, which alerted me to this problem. Even so, I steadfastly had to ask myself the same question with every interpretation: Is the text saying this, or is it me? By attending in this way, I began to see the text’s own coherency, as I had with the others, and found the answers in the text itself. The result was that I was able to write the following description to present to the participant without fearing that I had done her an injustice.
**Jas’s themes.** A considerable part of Jas’s experience seems to fall under the theme of “collaboration.” Throughout the interview, Jas often spoke of her experience from the perspective of “we,” as if much of it had been mutually created. This sense of a collaborative self occurred in three ways: in relationship with the English-speaking therapist, in relationship with the client, and as part of the triad.

When describing her experience with the English-speaking therapist, she stresses the sense of equality she had and how necessary it was in order for her to feel trust in the therapeutic process they were trying to create. She credits this equality to the narrative therapy model from which the co-therapy approach was developed. However, it is very clear from her descriptions that she at first gained reassurance from the “expertise” of the English-speaking therapist and then evolved a sense of competency that arose from their collaboration. More specifically, Jas experienced herself as an equal contributor to a evolving process of interpretation and action that created what was helpful for the client. Through this mutuality, she was empowered to clarify, correct, revise and even add to the English-speaking therapist’s questions and considerations, sometimes to the point of directing where the therapy should go. Thus, she found herself transforming the “foreign-based” questions of a Western therapy model into adaptations of their mutual curiosities and concerns about their client.

At the same time, Jas was forming a collaborative self in relationship with the client. She said that she felt clients would quickly ally with her based on the familiarity of language and appearance. However, she deliberately ignored her first assumptions based on the same factors, and drew instead on her more generalized familiarity with the environment, the sounds and sights, the peoples and places of India; the context in which common cultural stories were formed. The reason was that India has so many different regions or states, each with their own customs and expectations, Jas could not possibly know all the cultural nuances of each.
Moreover, there are quite literally hundreds of Indian languages so communication could only happen through her knowledge of four of the official ones (Punjabi, Hindi, Gujarati, Urdu). By eliciting cultural stories and metaphors, Jas created a more truly mutual territory for the client and herself in which to determine goals and intentions, and to identify needs and hopes. Again, through these collaborative conversations, she was able to modify and adapt ideas with her clients, and then capture and highlight them for her co-therapist.

These simultaneously collaborative experiences resulted in Jas feeling in the midst of a space defined by all who were present. She saw this space as one of mutual comfort and trust that allowed her to feel immersed in the process of creating transparency and synthesizing perspectives. This fully collaborative space was where she experienced herself as being truly helpful, competent, and dynamic.

A second theme in Jas’s experience is “discovery.” She felt challenged to capture the “culture part” of her client’s problems and find a way to “make it fit” with the intent of western therapy. She found herself looking for more information in order to come back to the client with a solution or strategy that was suitable. She also said she always felt some mystery about her client’s culture and had to find a way to enter their world rather than go on her assumptions of similarity. Jas searched for what would be meaningful, what would elicit a response, what might be the “deeper world” of her client. She spoke of gathering information, looking at non-verbal communication, and listening until she could imagine the client’s world, until she could “get the whole picture.” Once she had it, she felt she could enter into the creative process of helping.

Another discovery process that Jas experienced was her sense of herself as a therapist. She explained that she had previously done only peer counselling with stopping the violence and settlement programs and had long wished for more skills to help her clients. By engaging in co-therapy with a western trained, master’s level therapist, she felt confident to explore more areas
of concern with clients and discover herself as a therapist in new ways. She not only felt that she developed new skills through the narrative therapy model, she also felt that her own expertise was contributory to the point where she felt herself to be working at the same level as the western therapist.

The third theme is about “difference.” At the same time as Jas experienced herself as collaborative, she found that she had to establish difference. Firstly, she found herself challenged to reconcile the “very word based” narrative therapy style with the expectations and understandings of her clients. To do this she chose metaphoric language based on cultural stories to transform the meaning of the English words into something appropriate and useful, (a difference which she made transparent to her co-therapist). Underneath the words themselves, Jas had to adapt thinking styles based on different systems of values and beliefs. She said she had to start with the client’s thinking and then introduce the new (western) ideas and values. It was here she emphasized the need to respect the laws and ways of their new country. She also had to establish the value of a different kind of helping, one which did not give advice but, instead, linked the client with his or her own strengths.

This process highlighted her own difference from her clients, one which she used to establish the therapeutic relationship. So, secondly, Jas was challenged to present herself to her clients as just different enough to reconcile trust with relationship limitations. She said that she used the western model of helping to establish her difference and show, as she explained, that “I will not collaborate with their stories even though I’m a part of their culture.” While she knew that she needed to retain cultural respect to build trust, she also found that she had to create a way to present her self as neither western nor eastern in order to adhere to the western model of helping and avoid dual relationships. Partly she was able to do this by using the clients’ names rather than addressing them with proper terms of respect, such as “sister.” She retained their trust.
instead by modifying her tone to convey the appropriate level of respect. Lastly, her experience as a co-therapist in this model made her acutely aware of the difference in respect her work with clients garnered. She said that while she felt equal in the process, she was always aware that her work only had mainstream credibility because of the presence of the western-trained therapist.

In summary, Jas’s experience was one of growth, change, relationship and efficacy. Even now, she feels that the experience of being a collaborative interpreter provided skills that are still useful in her independent work with clients.

4.4 The second analysis

After each participant had an opportunity to read the thematic description I devised, I interviewed them again for confirmation or for any changes they may wish to make. These interviews were also taped and transcribed to produce texts from which I could interpret meanings. The responses I gathered were tremendously confirming, as these excerpts from each of the four interviews show:

As I said. . .that was the experience which I think I felt at that time and it has been summed up quite right.

Actually, Karen, to tell you very honestly you have done such a wonderful job, even when I was going through I said, ‘Oh my God’, I said, ‘you have read my mind’.

I think you understand me so well. Yeah, really good. . .You know the four theme is really good. . .

. . .you analyze really well, grouping the statements that I made, out of my statement very well. So I was impressed.

Even with this approval, however, I again read the transcripts with care to determine what themes or elements within a theme were emphasized or enhanced. To accomplish this reading, I followed the same process I had used before, determining concepts and highlighting expressive phrases. I then compared these notes to the original groupings of concepts and phrases for each
participant. As I did this step, I looked for differences, similarities, and possible generalities. To complete this process, I wrote a brief description about what each of the second interviews emphasized.

4.4.1 Mary’s second interview

Mary strongly confirmed that the description was accurate to her remembered experience. In fact she said she appreciated being able to read it because it brought back so many memories of that time. She said that because she was now in a completely different profession she at first thought that she wouldn’t be able to be of much help to the research project. However, she said she found that during the interview it was like opening an “old chest” that was full of memories.

The description, in turn, felt to her as a very accurate representation of those memories and she was particularly pleased with the identified themes, especially duality. She explained that beyond having a double role because she knew both languages and cultures, she experienced duality in representing each party’s social and emotional understandings. Specifically she found herself representing the different social expectations about the role of the client and the role of a helper, the Asian view tending to see the counsellor as a “teacher” and the client as the “learner.” She also tried to show or transfer the feelings associated with those expectations as much as possible. She summarized by saying that “I put the dual role in one body. . . . I had that double kind of duality in one body.” which she found to be “quite an interesting experience.” Over all, Mary thought the three themes “represent very well what I carried as my experience as a counselor.”

4.4.2 Sharan’s second interview

Sharan validated all four themes from the interpretation of her interview. She also enriched the description of her experience by commenting further on all four of them.
With regard to adaptation, Sharan emphasized the challenge of bringing western ideas of counselling and helping to the point of acceptance with her clients. In particular this involved getting them to understand and use their own decision making abilities. One obstacle, she explained, was often her clients' social class and educational level. Many of the clients who came to see her had emigrated from rural communities where the education level was very low and people were reliant upon those who had education to tell them what to do. Sharan said she had to divest them of the idea that she could or would give them advice while slowly moving them towards seeing that they could make decisions for themselves. She felt strongly that this understanding would not only empower them in counselling, but would serve them well in their process of integration with western society. Another obstacle was that many came to western counselling as a last resort after everything else they had tried did not work. As a result, she explained, they would often come with a feeling of hopelessness, which in turn could make Sharan initially feel hopeless as well. Here, she said, she had to be very careful to introduce western strategies in a very subtle way to reduce the chance that the clients might view it as forced upon them.

Next, she spoke about the importance of alliance. She emphasized that the safety she felt to explore different strategies and to honestly reflect the clients’ true feelings and responses came from the co-therapist relationship. Without a sense of trust that her ideas and knowledge would be received openly, Sharan felt that the collaboration could not have worked. In her words she explains, "...there was such a great trust and collaboration there that I never felt even twice that whether I should resist talking to [the English-speaking therapist] about this matter." The trust and collaboration between counsellors, she felt, created a context where the clients too felt "a sense of comfort" and, thus, were willing to come back.
The trust also enabled Sharan to feel “helped” in the process of translating therapeutic intent. “I would get that help from [the English-speaking therapist] first and then sort of sit down and start converting that information--how best can I filter it. . .” Here, Sharan is talking about how the solitary responsibility for bringing two worlds together was helped by the opportunity to discuss and collaborate both before and after the sessions. The availability of consultation aided in reducing the experience of “the solitary part where I would be sitting there and pondering over what can really apply. . .” Ultimately, Sharan felt that the mutual creation of a “common platform where a dialogue would start. . .” was one of the most positive and rewarding experiences of her life and was at the heart of her sense of achievement.

4.4.3 Ann’s second interview

Ann felt all the themes represented her experience very well. She said, .” . .the four theme is really good. . .I think you understand me so well. . .” She then went on to elaborate on the theme of connection. She stressed the importance of the connection between the English-speaking therapist and herself because it was there that Ann found the safety and trust to speak freely: “I feel that [the English-speaking therapist] understand us, [she] allow me to say, to explaining. Because [she] understand I don’t feel shame, hurt, difficulty when I had to tell. . .something.” Ann said that she had and still does work with many English-speaking therapists but is limited in that to work to just being an interpreter because of their typical unwillingness to be open to collaboration and cultural adaptation. “If someone understands, it allows me to say everything the client say and then we find a way to help them. But [when] some don’t understand it’s like I found a big gap there. I don’t mention our client gaps, you see?” The disclosure that she would feel compelled to censor some of what the client says because it wasn’t safe to bring it in has serious implications for the efficacy of therapy conducted through verbatim translation alone. In fact Ann stressed that if the English-speaking therapist’s attitude was, “this is the
western way and you have to follow me” it created a huge disconnection in the therapy’s ability to help the client.

The difference between collaboration and interpretation, she felt, was best described through the theme, representation. She found the experience of representing the clients’ concerns in order to form a collaborative relationship with the English-speaking therapist to be the most satisfying of all. Here she stressed that ultimately it was the connection between the English-speaking therapist and the client that was the most important of all because through it, she believed, the client could truly have their concerns addressed at the same time as promoting trust and acceptance of western culture

4.4.4 Jas’s second interview

During Jas’s second interview she validated the thematic interpretation of her experience. However, she did speak more about the experience of collaboration, particularly around the importance of creating an equal partnership among the English-speaking counsellor, the collaborative interpreter and the client. She emphasized the importance of the client being part of the “we” and her role in “creating an understanding that we are in equal partnership here.” Jas credited the experience of equality among all with reducing the opportunity for everyone to be swayed by individual assumptions or opinions, particularly in the cultural and racial realm. She also felt that by creating the “we” her role was clearly defined as different from an interpreter, a way in which her clients may have expected her to function. Jas also emphasized her collaborative roll as a “clarifier” where it was her responsibility to determine what each side truly meant by their questions and answers so that she could then translate the message verbally and intentionally as accurately as possible.
To summarize her experience of reading the description, Jas said that she felt amazed thinking back now about how it all worked, but that the description had quite accurately reflected her memory of being a co-therapist in that situation.

4.5 The third analysis

My task now was to determine what themes might be common to the collaborative interpreter's experience. After comparing the first and second interviews, I made some slight corrections to the main concepts and then re-summarized them under the 14 individual themes. Next, I grouped what seemed to be similar themes into clusters. For example, I matched achievement with good work and discovery, and listed the original concepts beneath each. Once I had these initial clusters mapped out, I began to highlight the similarities and differences among the original concepts in each cluster. Then, I extracted the distinct concepts and compared them with the concepts in other clusters. Some of these were already represented in other clusters, while others remained isolates. In this way I was able to determine which experiences were common and which were exclusive to the individual. Interestingly, this process of cross-comparison resulted in one original theme, acting, and the concepts attached to it being completely discarded.

After repeated comparison of the concepts among themes, I determined the final clusters:

Cluster one: Alliance, Collaboration, Connection.


Cluster three: Adaptation, Acting, Representation.

Cluster four: Achievement, Good Work, Discovery.

The next layer of interpretation involved more comparisons of the many concepts listed in each cluster in order to find the main ideas. As I did so, I started to see patterns of common experiences across the themes in each cluster. For example, there were many concepts about the
relationship with the English-speaking counsellor in cluster one. Once I had segregated the patterns in each cluster, I then compared across clusters. Altogether, I found seven patterns inclusive of most of the concepts among all the original 14 themes.

As I reflected on them, I began to see that these seven areas of experience could be captured by the sense of relationship. Hence, I decided to view these seven areas as the new themes demonstrated below (table 4.6). In this process, I found that the themes and concepts in cluster three (adaptation, acting, representation) repeated those now included within the seven relationship themes. The exception was the theme of acting and its concepts, which proved to be unique to one participant. The same kind of repetition occurred with cluster four (achievement, good work, discovery). I then proceeded to write the description of themes in common for the group to read.

4.5.1 Common themes for group interview

There were many common experiences among the four interviewees even though they came from different language and cultural groups. These experiences emerge from the collaborative interpreters’ engagement with both the people and the work involved. As such, they can be said to fall into seven broad categories of relationship: 1) the relationship with the English-speaking counsellor, 2) the relationship with the client(s), 3) the relationship with western therapy, 4) the relationship with the therapeutic process (how it happened), 5) the relationship with work (what needed to be done), 6) the relationship with culture, and 7) the relationship with difference.

4.5.2 The experience of their relationship with the English-speaking counsellor

While some had worked with only one counsellor and others with more, they all felt a strong connection with the English-speaking counsellor. This connection formed from the sense
### Table 4.6  Cluster matches

<table>
<thead>
<tr>
<th>Cluster One Matches: Alliance, Collaboration, Connection</th>
<th>Relationship with English counsellor</th>
<th>Relationship with western therapy</th>
<th>Relationship with process</th>
<th>Relationship with client</th>
</tr>
</thead>
<tbody>
<tr>
<td>• connection</td>
<td>• trust western therapy will work</td>
<td>• interpretation and action</td>
<td>• credibility</td>
<td></td>
</tr>
<tr>
<td>• trust/safety</td>
<td>• value of western therapy</td>
<td>• re-visioning</td>
<td>• connection</td>
<td></td>
</tr>
<tr>
<td>• mutual respect</td>
<td>• empowered when ideas matched</td>
<td>• creative</td>
<td>• preparation</td>
<td></td>
</tr>
<tr>
<td>• collaborative</td>
<td>western therapy</td>
<td>• transparent</td>
<td>• establish trust</td>
<td></td>
</tr>
<tr>
<td>• equality</td>
<td>• empowerment</td>
<td>• dynamic</td>
<td>• establish role</td>
<td></td>
</tr>
<tr>
<td>• mutual understanding</td>
<td>of clients good</td>
<td>• emotional communication</td>
<td>• teach</td>
<td></td>
</tr>
<tr>
<td>• unique</td>
<td>• connected</td>
<td>• empathy</td>
<td>• acculturate</td>
<td></td>
</tr>
<tr>
<td>• supported by Eng. counsellor expertise</td>
<td>• learning</td>
<td>• equality in triad</td>
<td>• motivate</td>
<td></td>
</tr>
<tr>
<td>• experience own credibility</td>
<td>• when ideas matched</td>
<td>• stories/metaphors</td>
<td>• empower</td>
<td></td>
</tr>
<tr>
<td>• Eng. Counsellor open</td>
<td>• understanding</td>
<td>• context of trust</td>
<td>• collaborate</td>
<td></td>
</tr>
<tr>
<td>• trust Eng. counsellor's knowledge and creativity</td>
<td>• dynamic</td>
<td>• collaborative</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• emotional</td>
<td>• being apart/being a bridge</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Cluster Two matches: Duality, Solitariness, Agency, Difficulty, Difference |
|-------------------------------------------------|---------------------------------|---------------------------------|------------------------|
| Relationship with Culture                        | Relationship with Difference    | Relationship with Work          |
| • knowing both worlds                            | • being neither                 | • mutual learning               |
| • biculturalism                                  | • shifting perception           | • connect Eng. counsellor       |
| • moving from one perspective to another         | • of others                     | • with client                   |
| • motivated to integrate client                  | • only one who knows both       | • responsibility                |
| • value of acculturation                         | • being in between              | • reconciling                   |
|                                                 | • being different               | • creating                      |
|                                                 | • alone with impossibility       | • teaching                      |
|                                                 | • different thinking            | • leading                       |
|                                                 | • styles                        | • explaining                    |
|                                                 | • different values and beliefs   | • negotiating                   |
|                                                 | • different help                | • satisfaction                  |
|                                                 | • collaboration vs. interpretation| • acknowledgement              |
|                                                 | • different kind of             | • meaningful                    |
|                                                 | • helper for client             | • growth                       |


they had that their co-counsellor was open to new ways and ideas and was collaborative. They felt their ideas were respected and valued and that they had the freedom to express themselves according to their own sense of what help was needed. Instead of being hesitant, they experienced a great degree of trust and safety where their own credibility was nurtured and supported. They also trusted that the English-speaking counsellor’s knowledge and creativity could support their ideas. Each one also expressed the sense that their experience as a collaborative interpreter in this therapeutic model was a unique one, and doubted that the nature of their relationship to the English-speaking counsellor could be repeated easily within other models of therapy.

4.5.3 The experience of their relationship with the client

In this area, all of them experienced the need to transform the client’s perception of them and of the kind of help they would receive. First they experienced having to create a different role for themselves even while preserving some of the interpersonal expectations of the culture. Specifically, each used subtle verbal and non-verbal cues to signal to the client that they were neither completely eastern nor western in this role. Some would change terms of respect common to that culture while still letting the clients know they understood the clients’ world. Others would shift tone of voice and body language. All felt the task was a delicate one where they had to maintain credibility while creating trust in a new helping relationship. They all spoke to some degree of needing to motivate the client to try western strategies and to enter into collaborative problem solving, rather than rely on advice as was the cultural norm. They also spoke of having to re-orient their own perspectives of the clients, relying on the individual’s experience rather than on assumptions they might have from their cultural knowledge. This freedom from assumptions allowed them to feel more connected to their client’s personal stories
as well as the client’s personal strengths and abilities. Finally each felt a high degree of satisfaction when they saw their clients being empowered to speak and make choices for themselves.

4.5.4 The experience of their relationship with western therapy

Each of them experienced a great deal of confidence in the ability of western therapy to be helpful for their clients. They felt the focus of western therapy on self knowledge and accountability were important new skills for the clients to have, especially now that they had emigrated. They also felt empowered by learning western therapeutic techniques, which they thought enhanced their original skills as a counsellor.

4.5.5 The experience of their relationship with the therapeutic process

They felt the process emerged from a context of trust and equality among all present, where all communication, verbal and emotional, was transparent. Within this context the collaborative interpreters felt engaged in a collaborative process that was dynamic and intensely creative. They experienced themselves involved in a circular process of seeking understanding, uncovering assumptions, and transforming action to produce what was helpful for the client. All also mentioned that they experienced this process continuing outside of a session through consultation with the client or the English-speaking counsellor. They all felt pivotal to the process, while at the same time somewhat immersed in it, becoming a “bridge” between two worlds.

4.5.6 The experience of their relationship with the work

The key word here is “responsibility.” To some degree, all felt the burden of being the only one who could create the communication clarity that was needed for the process to be helpful. At the beginning of their work each spoke of having to create trust for the client in western therapy and in the intent of the English-speaking counsellor. To do this, they
experienced taking on the tasks of teaching, explaining, negotiating and even leading at times in
the sessions, all in the effort of reconciling differences in linguistic and cultural understandings
between the client and the English-speaking counsellor. Each spoke of the need to create
transparency to maintain trust. This task required them to quickly communicate emotional
information, which was often complicated by linguistic difficulties and cultural influences, and
to just as quickly re-create the intent of the communications between the client and the English-
speaking counsellor. They all made the point that there was a huge difference between what this
work asked them to do and straightforward interpretation. They felt that what they did was create
a collaborative communication between the English-speaking counsellor and the client,
connecting them in a therapeutic relationship based on mutual equality. All had outside
experiences as an interpreter for helping professionals and explained that the work there was to
relate as accurately as possible the words of the therapist with no inclusion of cultural
considerations. When their work as a collaborative interpreter was successful, all said they
experienced a great deal of satisfaction and real validation of their own knowledge and skills as a
helper. Finally all felt that the work was important and deeply meaningful.

4.5.7 The experience of their relationship with culture

Here their shared experience was connected to a similar self-awareness. As the ones who
"knew both worlds," they often became more aware of being bicultural. During a session they
felt their perceptions shift from one cultural perspective to another, sometimes experiencing
themselves as the English-speaking therapist and sometimes as the client. Understanding
themselves as bicultural, they also felt motivated to help to integrate the client. They shared the
belief that the counselling process could provide the client with the knowledge and skills that
would make adapting to life in the west more successful.
4.5.8 The experience of their relationship to difference

In this area too, their shared experience involved their perception of self. Just as they connected to their bicultural self, they simultaneously were aware of being the different one. They spoke of feeling neither eastern nor western, of being in between the western experience of the English-speaking counsellor and the eastern experience of the client. This part of their experience as the ones who "knew both worlds" emphasized the singularity of that perspective, the only oneness of it. They also felt their difference created ambiguity for their clients about what cultural perspective they might be taking. This temporary confusion was one they had to address and negotiate in their role as the collaborative interpreter. An equally strong part of their experience with difference was their heightened sense of being alone with impossibility; that is, occasionally being the only one who knew that the words and the intent of the others could not be translated.

4.6 The fourth analysis

The group interview began with some necessity to clarify the theme concerning the relationship with the English-speaking counsellor. During the first and second interview, each participant had been quite clear that they were speaking from their experience of working with an English-speaking counsellor, whether that was one individual or a few. Two of the participants had worked with four different counsellors, while the other two participants had only experienced one counsellor. The common denominator for all was their past work with me. So, when the group met one of the participants who had only worked with me asked if the theme was related to everyone’s work with me or did it extend to include other mental health professionals. I realized that the way I had written the theme’s description could easily be interpreted as referring to me, despite my intent not to create that focus. The description also caused confusion for this participant about whether or not to include times when she had offered consultation to
other English-speaking health professionals, with or without the client being present. These latter experiences were focused on her ability as a verbatim interpreter and not on a collaborative role. The participants who had worked collaboratively with more than one English-speaking counsellor did not express any confusion after reading the theme’s description. However, what ensued was an important conversation that served to re-orient everyone to the focus of this research; that being, their experience of translating therapeutic intent with respect to whoever was the English-speaking counsellor.

Once the research focus had been reaffirmed, the interview progressed smoothly. All the themes were generally agreed upon and validated. Still, the interaction of the group produced some new thoughts and different elaborations, which were tremendously helpful to the final analysis. These new understandings were precisely what I had hoped for when I designed this part of the research: an intersubjective voice that would prove fruitful for a deeper, more essential understanding of the meaning of the phenomenon. As a result, I re-wrote the original group themes, which are offered here.

4.6.1 The experience of relationship with the English-speaking counsellor, revised

Despite a variety of experiences with different counsellors, all spoke of the same core elements existing in this relationship. These elements were not discrete components, but a complex mosaic of emotional, cognitive, and cultural connections that produced a holistic sense of mutual presence. This mutuality, of purpose, of regard, of spirit, was essential to their perception of meaningful action. To describe these elements in a linear fashion does them some injustice as the intersections between them are multiple and intersubjective. Therefore, this theme is not a recipe for the most suitable English-speaking counsellor, with all the necessary ingredients listed. Nor is it descriptive of any one English-speaking counsellor’s personal style. It
is meant to be evocative of the emerging and sustaining relational qualities that imbued their experience in the most meaningful way.

After reading the description, all emphasized that the relationship to the English-speaking counsellor had been key to their experience. One participant who had worked with four English-speaking counsellors talked about feeling diminished, even dismissed, in one of her partnerships; however, no one else who worked with that same English-speaking counsellor felt similarly. Still, the exception seemed to prove the rule: that a positive co-counsellor relationship was pivotal to a meaningful experience. As they elaborated on my description, they agreed that the multiple aspects of this experience could be encompassed by the sense of “openness.” Everyone emphasized how important is was that they experienced the English-speaking counsellor as “open,” open to new ideas, to cultural differences, to shared power, even to mystery. The following comment, which emerged from the group meeting, wonderfully summarizes this perception:

...I felt that openness, that safety, that trust that I would not be [challenged] if I asked this question or if I present my client and what their different needs are at this point that I will not be misunderstood...and at the same time I felt that openness where ever [the English-speaking counsellor] felt the need that [she/he didn’t] understand what our cultural sensitivities was...and [the English-speaking counsellor] never gave me the impression that [she/he knew] it all. It was always Ok, you know, and always taking suggestions. We would sit together...and discuss... . . .

In the larger sense, they saw this openness as necessary in order to mutually create a platform for collaboration, mentorship and support.

What emerged from this sense of openness, then, was the foundation for trust, wherein they felt the freedom to be themselves, to educate, to contradict, to explore, and even to lead. They elaborated on this sense of freedom in the group interview, from which the following excerpts are taken:
Sometimes I can see the English speaking counsellor’s face was kind of, how do you say, ‘How could these things happen, right? So I had to add some kind of description: ‘Over there this is kind of common’, whatever. Then I help the English-speaking counsellor to understand and move the process forward.

I was talking about the cultural and [the English-speaking counsellor] was bringing [his/her] western perspective and I’d say, no this [will not] work.

...the best part that I enjoyed was learning more and more with experience and through this where I would sit with the [English-speaking] counsellor and listen to some of those ideas.

The experience of leadership was particularly emphasized by the group as an aspect that they had not truly recognized at the time. As one participant explained,

...when I was sitting yesterday and I thought of it...even though the English-speaking counsellor was sitting there as kind of the leader of the session...myself I think I was the one who actually led the session.

Though the experience had been described in their first interviews and, thus, included in this theme when it was presented to them for accuracy, the group meeting brought forth a deeper and richer mutual understanding of it. The metaphor that arose was that their responsibility as a leader was to “balance” the fear between the client and the English-speaking counsellor.

I mean English-speaking counsellor could have some fear to sit in there...saying that far remote country client we got in, no, [I] don’t have any idea...even though the English-speaking counselor...could have lots of knowledge about counselling but cannot work here...and also the client could have fear. So that kind of fear the collaborative interpreter can balance out. So the bilingual, collaborative interpreter was actually the one who led.

To which another participant immediately replied,

You have said that very well and that was a very tough role to get into but it was very natural. I noticed it came very naturally and the reason for, personally I think it is because...when [the English speaking counsellor] was on the scene I felt that openness, that safety, that trust...

The experience of freedom in this relationship also involved a sense of professional and cultural equity where they felt respected and valued for their knowledge and ideas. As one participant commented, “...we always not only felt but experienced that we are co-
Finally, the group again confirmed that they felt their experience as a collaborative interpreter in this model was a unique one, far away from any experience they had working as interpreters for other mainstream health care professionals.

4.6.2 The experience of relationship with the client, revised

Again, this experience was part of the more complex, multi-relational triad of English-speaking counsellor, collaborative interpreter and client. Therefore, this theme is only descriptive of one intersection among the triad, which was continually influenced by all present. However, all the participants quite clearly delineated some common features of their relationship with clients that were unique to their role as a collaborative interpreter. My description of this shared experience was validated by the group and, again, deepened through collective discussion.

Fundamental to their experience was the sense of self-transformation, which involved the intersection of their identity as a helping professional and their cultural identity. First, they described the complex experience of transforming their helper role from advisor to collaborator. All the participants spoke of having to create a unique role that was different from what their clients expected. To begin that process, they all stressed the importance of preparing the client for a different type of help.

I think [an] introduction to that model I think was very essential for the client because otherwise they’re not trusting. They’re coming from a [western] system sometime where they have been belittled or felt not listened to, so I think the prep work was quite important. That’s what is between you and your client. . . (All: yeah, yeah).

The participants also emphasized the importance of finding a way to explain to the client that their function in this western counselling process was different than that of an interpreter.

Absolutely there’s a big difference as an interpreter and as a collaborative interpreter. As an interpreter, the first thing I say is, ‘If you don’t want to have the English speaking agent hear from you then don’t tell me.’ So that is the first sentence. But in a counselling session you could tell anything to me.
They felt that this distinction was often confusing for the client and heavily determined by the level of trust they had managed to achieve.

...before we come to the room, you know, the three of us together, usually I prepare...my client. I would clearly [give] the picture like we are co-counselling there. But I want my client to understand this is confidential...I go over with them everything...so when they come...they're not fear or hiding, or why you there, why the English-speaking counsellor there? You know that's really important for us because they open their inside out.

Even after establishing these initial understandings, creating enough trust for the client to come back was a difficult process. All felt that the task of maintaining a trusting relationship was a delicate one where they had to sustain their credibility as a helper while motivating the client to try western strategies and enter into a collaborative process, rather than expect advice as was the cultural norm.

...they were coming to [us] with the advice model thinking, 'you will give us advice and fix that problem up.' (All: yeah, yeah) I think the challenge at that time was we were telling them to find their own strength...that is a unique situation for them (All: yes, uh huh).

...our role was very unique again because they would come for a quick fix...to continue to have that client coming...was the biggest challenge.

As a result, the collaborative interpreters found themselves having to shift into many roles in order to provide the best kind of help for their clients.

The collaborative interpreter's role facing clients was much more kind of multi-roles compared to English speaking counsellor. I mean collaborative interpreter's role towards...the client is more back and forth different ways as it could be educator, helper, could be kind of big sister...(All: general assent)...also if I see the client just so much submissively sitting there not even asking questions...at that point I become a seeker for the information...sometimes I could be the advocate.

They felt these shifts not only challenged the clients' perceptions of them as helpers, but also their own perceptions. The necessity of taking on multiple roles required them to relate to the
client from various positions of power, some of which were drastically different than their cultural norms.

The second transformation, then, is cultural, where they experienced the need to shift their cultural identity in relationship to their client. Despite their actions in many roles, they all felt the need to preserve some of the interpersonal expectations of the culture for the sake of, again, maintaining credibility and trust.

\[\ldots\text{we're looking into bringing out the information or creating trust with the client without telling the client that we're walking away from the culture. \ldots\text{that's one thing. And the second thing was that client questions what's [the English-speaking counsellor's] role there. \ldots\text{the client was thinking because you [collaborative interpreter] could be allied with that.}}\]

\[\ldots\text{you can never forget, you know when we were doing counselling, the core values of the client and the culture because that was. \ldots\text{the whole thing that the clients would bring their trust because they felt that their core values are understood (All: yes, yes) even though we brought the western therapy there. \ldots\text{but we could never ask them to do [what] a western person could have done. \ldots\text{not at any point you could leave your client's. \ldots\text{cultural values out the door. You have to walk in [with them].}}\}

The core values, this was the common ground between the client and the [bicultural] counselor. \ldots\text{in order to have trust in me as a counsellor that has to be not only valued but highly respected, put on a high pedestal, and then you can work with them. \ldots\}

They also had to carefully balance cultural expectations of relationship, such as respect, authority, and familiarity. Specifically, they spoke about the importance of using verbal and non-verbal cues to signal to the client that they were neither completely acculturated to the dominant culture, nor strictly allied to their home culture. They also spoke of having to re-orient their own perspectives of the clients, relying on each individual's experience rather than on assumptions they might have from their cultural knowledge.

4.6.3 The experience of relationship with western therapy, revised

The group interview served to correct a serious misconception put forth by the description. Politely, but firmly, the group explained that none of them had experienced any
confidence in western therapy, nor did they especially trust it even now. When I asked if they would trust sending a client to a western therapist, they all emphasized that they would not. As we talked further, it became clear that their relationship with western therapy had always emerged from within the relationships they had with the dominant culture and the English-speaking counsellor. So, even though this theme is similarly a description of particular elements continually influenced by a multi-relational context, it differs in that they could not delineate any features of this experience without speaking of another relationship.

One aspect of their experience of providing western therapy was determined by their longstanding experience as an immigrant with the dominant culture. First and foremost they felt that whether they trusted it or not, western therapy was their only choice.

I am also an immigrant, right? When we work here, the English-speaking counselling model or whatever is the kind of major mainstream stuff. So when we are here, when even I am here as a co-counsellor, this is the ball you’ve got to take. This is the food you got to take it. That kind of basis is there already... without even questioning is it going to be good to trust or not. It’s right there.

They did, however, take some satisfaction in the credibility they gained with other mainstream health services by being involved in a western therapy program. As well, they all agreed that incorporating some western ideas was important for the client’s successful adaptation to their new country, and felt empowered when they saw their clients benefit from adopting some western solutions. However, they felt that no type of western counselling could work unless it involved the values of the client’s culture.

...sometimes in...western therapy there is no value you can find. ...As a counsellor you’re convinced about this yourself, ‘Yeah, this is going to be helpful to the client once the client understands and tries to adopt’ and [if] put into the context of the core values. ... because otherwise counselling would not have been successful at all.

Another, more positive aspect of their experience with western therapy was heavily reliant upon the type of western therapy in which they were involved. Again, the model they
worked in was designed to make the most of their language and cultural knowledge by encouraging their full participation in the co-development of a therapeutic discourse between cultures.

I think the model, when we were trained, it was a clear model... and that was, I think, even for the western concept and everything. So it didn’t bother us.

In fact they stressed that the type of western therapy they were trained to use was actually quite amenable to cross-cultural communication and problem-solving because of its emphasis on the human practice of story-telling.

When I think of it we were all trained in narrative therapy, and to me, you know, you listen to people’s stories (All: laughter). .. so that they have brought everything to the table and that history gives you where the person’s strength was and then you start talking about it.

While the model was important, they also again emphasized that the model could only work if they had a good relationship with the English-speaking counsellor. The one participant who had not been involved in the initial training summed up this point as she described her process of learning western therapy through this model.

... by learning I began to build a [trust] with the English-speaking counsellor and also the counselling method. . . .

The others who went through training also said that the trust they felt for the English-speaking counsellors during and after that time greatly influenced their confidence in the model.

... I think in the beginning [name of English-speaking therapist/trainer] was like a mentor. .. .so perhaps it could be that the relationship was ready right away. . . .

To conclude, their experience with western therapy was sometimes ambivalent, sometimes empowering, but always embedded in their relationship with the larger, dominant culture context.
4.6.4 The experience of relationship with therapeutic process, revised

This theme was completely validated by the group, but the discussion again gave rise to more evocative description. As with the other themes, this experience resides within the complexity of multiple relationships. They described this context as one of trust and equality among all present, where all communication, verbal and emotional, was transparent. Within this context the collaborative interpreters felt engaged in a collaborative process that was dynamic and creative. One participant referred to her experience as being that of a “story collector” where she felt her communication between the English-speaking counsellor and the client was “like writing” because she had to find the best way to re-tell their experiences. This metaphor resonated with everyone present as they validated the experience of being involved in a circular, if you will, hermeneutical process of discovering, transmitting and revising meaning until, “…everything came to a common platform,” or, as another stated, until “we were all at the same frequency level.” They also again spoke of feeling that the process extended beyond the counselling room and into their way of being with the English-speaking counsellor whenever they would consult about the client.

Another part of this experience became clearer because of the group discussion. This aspect was the element of feeling pivotal to the process, while at the same time feeling somewhat immersed in it. On the one hand the process was one in which they experienced themselves in a less personal way. They described this part as feeling like an object that connected two worlds, like being a “gate” or a “bridge. But in that same moment they also experienced themselves as uniquely important in the process, as another explained:

I was very surprised when I thought of my role was sitting there as a kind of a concept of yin/yang. It couldn’t be more or less. I tried to keep the balance between two extreme parties. . . .On the one hand I am the one making a connection with the English-speaking counsellor and the other way is the client. But the client and the English-speaking counsellor cannot have direct [contact] (Interviewer: Except through you.) Yeah, so that was in my point of view. . . .
Overall, then, their experience of therapeutic process can be described as one of “union,” where they created and supported a common ground for understanding.

After analyzing the group interview, I completely omitted the theme about work. The reason was that it had become clear that everything previously mentioned under this theme was actually embedded in their experiences of relationship with the counselling triad and the western therapeutic process. Following, I also combined the two remaining themes, culture and difference, based on the group’s confirmation and expansion of them, into one that more truly represents their self-awareness of having a unique identity as a bilingual, collaborative interpreter.

4.6.5 The experience of relationship with cultural and linguistic identity

Here, their shared experience was connected to a similar self-awareness. During a session they felt their perceptions shift from one cultural and linguistic perspective to the other as they tried to convey the meanings of each world. In part, they took some satisfaction at being able to understand both cultures. However, as the ones who “knew both worlds,” they often became more aware of being bicultural and with that came the sense of being different from either. In their first interviews they described this sense of difference with phrases such as “in between’, “feeling neither eastern nor western,” and “both but neither,” which I repeated back to them in the group interview.

Researcher: ...I was very curious about how all of you talked about that sense of being both and neither. Almost every one of you used that phrase. I was both and then again neither.

Participant A: I think that is the expression that could replace the one, the phrase I spoke [today]: ‘It’s not westernized and it’s very far away from Korean culture’. It’s both but neither (All: laughter).

Participant B: Yeah, it’s a good one.
As they spoke more about being aware of their singularity, they emphasized being “the only one” and of having a heightened sense of being alone with impossibility; they were the only ones who struggled with the reality that sometimes the words and the intent of the others in the session could not be translated. The best description of this both/neither self-awareness may be to say that the collaborative interpreters stood alone, alone with a wealth of knowledge about two cultures, and alone with the sense that they truly did not belong to either one.

4.7 The fifth analysis

My final step in this research was to reflect on the revised descriptions from the group interview. Even as I wrote the revisions, I was increasingly aware of the deeper, contextualized experiences of self located within the process of counselling through interpretation. At this stage, I returned once more to the framework of hermeneutics to inform my readings. What I determined were three core or meta-themes grounded in the hermeneutical phenomenological premise that all understanding emerges through contextualized relationships (being-in-the world), and that all understandings of self are realized in the same manner.

I began by reflecting more deeply on three descriptions of self that came from the words of the collaborative interpreters themselves: “we,” “only one.” and “bridge.” These words resonated in all the participants’ texts from the first analysis through to the fourth. As I reconsidered the themes, I drew some speculative diagrams in order to visualize the sense I was getting of the deeper aspects of their experience. My last attempt was to draw three intersecting circles. As I looked at the areas of intersection, the first representation I made was the experience of self as “we,” which was comprised of three relationships: collaborative interpreter/English-speaking counsellor, collaborative interpreter/client, and the triad. I called this theme, the collective self. Next, I conceived of the sense of self as the “only one,” which I termed the distinct self. Lastly, I drew the theme of the merged self, which comprised the
experience of self as an instrument, a “bridge,” or a “conduit” subsumed within the relationship between the English-speaking counsellor and the client. This final image was more difficult to represent because it existed within the intersection of the English-speaking Counsellor/Client relationship; hence, I chose to visualize it as a “bridge.” These images produced my final image (fig. 4.1) of the complexity of the collaborative interpreter’s experience. Thus, I was inspired to return to the concepts and metaphors in the group text and in my revised description of their common experiences and write my concluding description. I chose to use the pronoun, she, to represent the collaborative interpreter in general because all my participants were female.

4.7.1 The collective self

One of the essential aspects in the collaborative interpreter’s experience of translating therapeutic intent across languages and cultures is that of a collective self. The meaning of the experience is imbued with feelings of connection: connection of purpose, of ideas, of emotions. This quality is more than mutuality, where there is reciprocity of feelings among individuals. It is the experience of unity, of self as “we,” where meaning is created by and understood within the relationship of those present. As such, the meanings attached to the experience are much dependent upon the quality of these relationships.

While acknowledging that all of the interpersonal relationships in the counselling triad are co-created in relation to the others, it is helpful to artificially separate out the collaborative interpreter’s fundamental experience of a collective self in three ways. The first is the collective self experienced with the English-speaking counsellor. With a necessary foundation of trust and openness, the collaborative interpreter experiences a unity of purpose and power in which an eagerness for learning and creativity is reciprocated. In this “we,” the collaborative interpreter feels confident that western therapy can be helpful to the client by showing them a new way of problem-solving, and, in turn, enabling a more successful adaptation to their new home. Through
this synthesis, she also experiences an incorporation of different knowledge, the sum of which proves to be of even greater benefit to clients than either of the parts. This “we” is the metamorphosed counsellor who is able to integrate different understandings into helpful new ones. Ultimately, the deep connection of this “we” is fundamental to the meaning of engaging in the work. Without this sense of unity, the collaborative interpreter does not have faith in the helpfulness of the process, nor a reason to engage in it at all.

The second collective self is the relationship of the collaborative interpreter to the client. This “we” begins in familiarity, but must be reformed to suit the process of western counselling. Thus, it contains both the experience of comfort and discomfort for the collaborative interpreter; there is a “we” that is composed of empathy and memory, and a “we” that is negotiated within the dominant culture context. Another way of describing it is as a transformation of trust, from the client’s assumed trust in an allegiance against the dominant culture values, to a new trust that together they can make western ideas workable. At its deepest level this experience of “we” is the collaborative interpreter’s source of hope and satisfaction, of faithfulness and honour.

The third collective self is the experience of being a triad. This “we” is the sense of “all,” of being comprised of three in the process of creating understanding. It is the unifying experience of equal contribution and transparency that results in a dynamic flow of ideas that will become everyone’s. This experience is also understood as circular, where vision becomes revision becomes new vision. Without the “all” the work is fruitless and stagnant. Within it the work is exhilaratingly unique, an experience mourned when it was lost.

4.7.2 The distinct self

A second essential aspect of the collaborative interpreter’s experience is the understanding of self that comes from comparison to others. As the “only one,” the collaborative interpreter finds meaning in her uniqueness of purpose and skill. However, at the same time she
Figure 4.1 The realm of the collaborative interpreter’s experience

2. Collective Self: Coll. Interp./Client
3. Collective Self: Triad
4. Distinct Self
5. Merged Self
becomes more acutely aware of her difference, defining herself as "being both but neither" and not truly belonging to any.

More specifically, the collaborative interpreter experiences her singularity in a positive way by being the only one who is able to create the common platform upon which the counselling can take place. In this context, she is the manager of the English-speaking counsellor/client relationship, taking the lead when necessary, eliminating the potential for conflict, clarifying intent, and remaining non-partial. She is also a mediator who is able to reduce fears and create balance between the two parties. So, in this sense, being the "only one" is an experience of effectiveness and validation. Still, with this experience also comes the weight of responsibility and impossibility. She is the only one who knows both worlds, who has the task of reconciling them, and who realizes the losses incurred through translation.

Simultaneous to the positive meaning that being the only one awards her, is the sense of aloneness. Despite the everyday exclusionary experiences of being bicultural, the meaning of it is more keenly felt in the process of building and maintaining a counselling relationship. In this context, the collaborative interpreter sees her reflection in the eyes of both cultures at the same time. The result is a heightened sense of not belonging to either world, and of the potential to be unsuitable to both. Thus, as she sees herself in her client's eyes, she is acutely aware of the adjustments she must make to her presentation of self in order to gain and maintain trust. She must appear as the repository of their shared culture, even though she understands herself to be much changed by life in the dominant culture. At the same time, she must also subtly present the image of being acculturated to the dominant culture to facilitate the client's understanding of her different role as a helper and of the western counselling process. The same is true of the way she sees herself in relation to the English-speaking counsellor. Even the act of sitting with the English-speaking counsellor in a session can shift her perception of herself from being fairly
westernized to being much less so. Still, to maintain a functional trust in this relationship she must demonstrate a deep understanding of western helping strategies and a belief in their value. Overall, the distinct self creates meaning in the collaborative interpreter's process of translating therapeutic intent by underscoring the pivotal and private nature of her role.

4.7.3 The merged self

The third essential aspect of the collaborative interpreter's experience is submersion into the process itself. Interestingly, this experience is highly valued because it is most directly related to the act of helping. Here, the collaborative interpreter experiences herself as an instrument of empathy and understanding and resolution. Here, she is the bridge or the conduit that provides the access through which the English-speaking counsellor and client can have a therapeutic relationship. The meaning comes from being in-between; but, unlike the experience of being pivotal where meaning is found in action, the merged self has the quality of being almost invisible, of passive existence in the service of others. There is a sense of ease and habit in this experience too, an experience of all the structures being in place and momentum sustained. Here, there is no sense of 'we' or 'me,' only of "them" and the functionality that affords a successful alliance.

The merged self is also experienced as different from that of being an interpreter, often described by the collaborative interpreter as being a machine, because an interpreter's function is felt as a separation of self from the process. The interpreter is duty-bound to remain neutral and relay exchanges verbatim. Thus, the collaborative interpreter believes that functioning as an interpreter would not at all serve the counselling process. Instead, for her, meaningfulness comes from total inclusion.
4.8 Conclusion

This interpretation sees the essential meanings of the collaborative interpreter’s experience as being co-interpreted within the therapy triad. As such, these meanings evolve from the understandings of self that are created by the therapeutic relationship among everyone present. A hermeneutic phenomenological method was used to uncover these meanings and the perspectives of multicultural counselling and constructivist theory gave them form. It is hoped that these descriptions will create more questions and other relationships with texts that express the collaborative interpreter’s experience, thereby continuing to contribute to a deep understanding of this unique role.
5 DISCUSSION

5.1 Introduction

The intention of the present research was to contribute to the discourse around multicultural counselling and the use of interpreters. Since research in this area has been meager, my goal was to open new questions for discussion by investigating the experience of collaborative interpreters who work with an English-speaking, dominant culture counsellor to deliver culturally and linguistically appropriate therapy. Inspiration for the research topic came from my personal experience as an English-speaking counsellor in this situation and from the few studies previously done on the interpreter’s experience. I was also aware of the increasing need for language-specific counselling services in Canada in contrast to the minimal research resources that exist to inform this endeavour.

I chose to use hermeneutic phenomenology as the method for the current research because of its unique ability to uncover the meanings in lived experience while at the same time addressing the contextual complications of interpretation. Not only did it mirror the collaborative interpreter’s act, as I understood it, of reconciling the multiple, contextual meanings possible within and across languages and cultures, it also addressed the influence of the researcher’s perspective on the results. In short, it could reveal the process of co-interpreting meaning from experience for all involved in this study.

Because of the approach used, the results of the present research are intended to provoke questions more than provide answers. However, these questions, I believe, offer some significant new perspectives on extant knowledge about counselling through interpretation, and especially on the collaborative interpreter’s experience. In order to introduce these perspectives to the larger discourse, the discussion follows the areas of knowledge outlined in the literature review. For each area, I comment on the contributions and any new questions this research might offer. At
the conclusion of the discussion, I present the limitations of the current study and offer some recommendations for further investigation and action.

5.2 Review of the themes

Before beginning the discussion on the contributions and questions offered by the present study, it may be helpful to summarize the findings. Through a series of interviews and analyses, three meta-themes emerged from the collaborative interpreter’s experience: the collective self, the distinct self, and the merged self. These themes evolved from the hermeneutical phenomenological perspectives of the current research, which similarly hold that all understanding is created through contextualized relationships. Thus, the meta-themes described the deeper, contextualized experiences of self located within the process of counselling through interpretation. At the same time, these themes were grounded in the actual descriptions of self that came from the participants, which included the curiously evocative expressions “we,” “the only one,” and “bridge” used repeatedly throughout the interviews.

5.2.1 The collective self

This meta-theme expresses the essential connectedness felt by the collaborative interpreter during the counselling process. It is the self-referential sense of being “we,” wherein a unity of purpose and vision is composed. The collective self is revealed in three, mutually occurring relationships. One is the collaborative interpreter/English-speaking counsellor relationship, which offers the experience of the “metamorphosed counsellor” who is the integration of differences in power and knowledge. A second one is the collaborative interpreter/client relationship where the experience of “we” is transformed from traditional expectations and allegiances to one that is united for the purpose of integrating culture-bound ideas. It is through this “we” that collaboration with the dominant culture counsellor is possible.
Lastly, there is the “we” of the triad, with “all” equally contributing to a dynamic, circular process of discovery.

5.2.2 The distinct self

Diametrically opposed is the simultaneous experience of the distinct self. This meta-theme is the essential experience of being the singular self, or the “I” who is the “only one” with a deep understanding of both languages and cultures. As “the only one,” the collaborative interpreter finds meaning through her distinct purpose and ability, which is to initiate, mediate and manage the relationship between the English-speaking counsellor and the client. At the same time, this sense of difference heightens her sense of being bicultural, of “being both but neither” and, thus, alone. From an appreciation of the pivotal and private nature of her role, the collaborative interpreter experiences the enormity of responsibility, the failure of impossibility, and the triumph of success.

5.2.3 The merged self

Perhaps the most interesting meta-theme is that of the merged self. It is the co-occurring experience of passive existence, of being the instrument through which connection is obtained. In this experience, the collaborative interpreter finds meaning from being the “bridge” or “conduit” by which the English-speaking counsellor and the client engage in relationship. In contrast to the distinct self, which is the experience of individual action, the merged self is the sense of being “in between” the action of others. It may also be described as the experience of total inclusion in the process, where the self is dissociated in “them.” The meaning of this experience is in being the method through which empathy, understanding, and resolution are created.

As described earlier, all three themes emerged simultaneously from the collaborative interpreter’s experience. Therefore, they are descriptions of the parts which comprise a complex
whole, and so must be understood as co-existing and co-created rather than as discrete episodes in the collaborative interpreter’s process of counselling through interpretation.

5.3 Multicultural counselling theory

The results of the present study are partly informed by multicultural counselling theory’s [MCT] epistemology, which considers knowledge to be socially determined, and emphasizes the importance of culture in determining perspective. Thus, culture is viewed as a system of meanings produced through the interpersonal exchange of communicating groups (e.g., Sue, Carter, Casas et al., 1998). Although the variety of cultures is considered evidence of “multiple realities,” MCT is not so decided on how deep these realities go. There remains an argument for universal therapeutic approaches based on the possibility that there may be universals in the human experience that are linguistically coded for meaning in specific ways (Lee & Ramirez, 2000; Fischer, Jome & Atkinson, 1998; Cheung, 2000). At the same time, MCT also highlights the cultural embeddedness of therapy approaches and points to the effects of culturally-based assumptions and statused discourses on the therapeutic process.

Within these frameworks, an individual can be understood as having multiple cultural identities interpreted by the common understandings of the varying groups to which she or he belongs. Hence, the collaborative interpreter’s experience was viewed as a complex interaction of understandings that were contextually and linguistically devised through previous cultural meaning systems and the emerging social agreements of the therapy triad.

5.3.1 Multicultural counselling and the therapeutic relationship

That being said, the collaborative interpreter’s experience seems to confirm much of the research on multicultural counselling, but in some rather unique and intriguing ways. Of the three themes, the collective self offers the most interest in this regard. Within this theme are descriptions of three collaborative relationships that give rise to feelings of unity, efficacy and
satisfaction, experiences that are often hard won in any multicultural counselling situation. Moreover, this theme speaks of the non-dominant culture counsellor’s experience within the dominant culture context and in doing so offers a rare glimpse into the meaning of multicultural counselling from that standpoint.

5.3.1.1 The collective self of the collaborative interpreter/English-speaking counsellor relationship

To begin, the “we” formed by the bilingual/English-speaking counsellor relationship proposes two additions to the scholarly discourse on multicultural counselling. Obviously, the experience of this dyadic relationship concurs with the research in general on co-therapy, which emphasizes the necessity of an equitable relationship between the two therapists (Roller & Nelson, 1991; Carpenter, 1993). More importantly, though, the collaborative interpreter’s experience of unity with the English-speaking counsellor contributes to other multicultural counselling research that underscores the effect differences in power and privilege have on dominant/non-dominant culture therapeutic relationships (Baruth & Manning, 1999; Helms & Cook, 1999; Pedersen, 1995; Wehrly, 1995). While most of the research in the past has been understandably directed at the therapist/client relationship, the collective self experienced in this co-therapy relationship speaks directly to the negotiation of an equitable relationship between culturally different counsellors.

Specifically, it suggests that the intersections of power, especially educational, professional, and language privilege can and must be addressed in order to achieve successful, culturally and linguistically appropriate therapy. However, the nature of the present research precludes it from being able to say much about how this unity might be achieved. Clearly, the collaborative interpreter’s experience of trust and equality in the co-therapy relationship is based on the perception of openness and respectful curiosity on the part of the English-speaking
counsellor. This attitude is understood by the collaborative interpreter as evidence of a willingness to collaborate rather than assert the priority of western ideas and credentials. As a result of this perception, the collaborative interpreter experiences a sense of liberation from the dominant culture context, at least, that is, from the oppressiveness of thinking that western ideas are the standard to which every other idea must conform. In other words, this experience of a collective self offers a different reference point for the collaborative interpreter’s knowledge, skills, and creativity than does the larger context of the dominant culture. For the collaborative interpreter, this sense of unity is essential to the formation of a common ground upon which a revision of ideas can take place. It means that she can contribute freely to the process by discussing differences instead of invalidating them, by offering knowledge instead of staying silent, by sometimes leading instead of always following.

The second suggestion that this aspect of the collective self makes is that western therapy earns credibility across languages and cultures primarily through the quality of the co-therapy relationship. Without this sense of “we,” the collaborative interpreter does not trust that western therapy modalities can be helpful across cultures, even after receiving training in them. The one contradiction to this experience is the collaborative interpreter’s belief that the integration of western strategies with more traditional methods of help is a necessary positive in the client’s ability to adjust to a new culture. However, this sense is related much more to the general experience of their own integration process than the specific process of translating therapeutic intent. In the therapeutic context, it is only through the act of co-creating helping strategies from a non-power based collaboration that the collaborative interpreter experiences the help offered the client to be meaningful. Commonly, the participants in the current research reasoned that this sense of unity was facilitated by the program design and therapeutic modality in which they worked. Of course that is possible and may even be confirmed by research that concerns program
evaluation. Still, the deeper meaning of the experience, uncovered by the present research, indicates a relational core. Hence, it is interesting to consider that no matter which therapeutic modality or even which culture-specific adaptation is used, its ultimate effectiveness may rest solely on the relationship between the English-speaking therapist and the collaborative interpreter.

5.3.1.2 The collective self and the collaborative interpreter/client relationship

Paralleling the co-therapy relationship is the collaborative interpreter’s relationship with the client. This experience of the collective self strongly supports the research on the effect of the counsellor’s culture on the therapeutic relationship as well as that which highlights the effect of ethnic matching and within group differences (Atkinson & Lowe, 1998). Past scholarship emphasizes the necessity for dominant culture counsellors to understand their cultural identity and relationship to power systems in order to effectively help a culturally different client (eg., Laird, 1998; Pedersen, 1995). Equally, the research on ethnical matching has indicated that, while clients prefer ethnically similar counsellors, perceived similarity of values and beliefs was as important (Atkinson & Lowe). Further, intersections of differences between acculturation levels and socioeconomic status also complicate the client relationship with an ethnically similar counsellor. Charged with establishing the initial bond with the client, the collaborative interpreter goes through a process of addressing these issues for herself before facilitating on behalf of the English-speaking counsellor.

The importance of this preparation is paramount, in the collaborative interpreter’s experience, to the success of the therapy. From a deep appreciation of her different familiarity with western culture, and of the cultural assumptions about her status that may be involved, the collaborative interpreter initiates a process of temporarily re-constructing the common understandings that exist between her and the client. It becomes a delicate maneuver as she
disrupts the clients' initial assumptions about her role and status at the same time as she confirms their trust in her because of ethnic similarity and cultural knowledge. Her task becomes even more complex as she locates herself in relation to the English-speaking counsellor: neither the ally, nor the traitor. By creating these new social agreements about her purpose and her platform, the collaborative interpreter experiences the freedom to fluidly engage in multiple roles, which she feels are more helpful to the client and more satisfying for her than being an adjunct to the English-speaking counsellor.

It would be interesting to consider if, by addressing issues of power and cultural identity with the client, the collaborative interpreter creates an advantage for the establishment of the English-speaking counsellor/client relationship. In other words, are the new social agreements between her and the client, which are created from an awareness of dominant culture influence, a catalyst for new understandings about the intent of the English-speaking counsellor? Certainly the collaborative interpreter experiences the emergence of a deep, new connection with the client from within which they, as “we,” can help the English-speaking counsellor adapt ideas. Only studies on the client’s experience in this situation would confirm if this perception were shared. However, the literature shows that one of the main reasons culturally different clients leave therapy is because they experience the dominant culture counsellor to be biased and value-bound (Sue, D.W. & Sue, D., 1977; Sue, D.W., 1981). It may well be that the benefit of the collaborative interpreter’s involvement in the therapy process is not restricted to providing language access, but is also relational.

5.3.1.3 The collective self of the triad

Finally, the theme of the collective self speaks of a sense of unity among all present in the session, from which satisfactory solutions evolve. In doing so, it concurs with the much repeated research that emphasizes the importance of trust and collaboration in any successful therapeutic
relationship (e.g., Mahoney, 1991; Orlinsky & Howard, 1987). However, this sense of “all” hints at a deeper collaborative experience: the co-creation of a temporary, group culture that is a fusion of the culturally informed but individually realized value and belief systems of each person in the triad. Rather than a linear transfer of culturally infused ideas, such as communication through an interpreter, the “all” of the collective self seems to point to a united and purposeful amalgamation of difference that co-creates an idiosyncratic culture of help for the client. Such a possibility is in agreement with research indicating that the cultural identity location of each person in the counselling session contributes to the perception of meaning (c.f., Helms & Cook, 1999; Stanley & Slattery, 2003). However, the experience of the collective self goes further by implying that a context of equitable power distribution is temporarily created through this relationship. I suggest this possibility with caution because much more research on the negotiation of relationship within the triad would need to be done before making such a claim, and because I personally question the idea that one can even temporarily step outside of the overarching dominant culture influences. That being said, it might still be interesting to consider the possibility of a temporary culture wherein the equitable distribution of power, so necessary to the success of dominant/non-dominant culture co-therapy (e.g., Baruth & Manning, 1999; Helms & Cook, 1999; Pedersen, 1995; Wehrly, 1995), may be facilitated by the presence of a collaborative interpreter. Moreover, if further research supports this possibility, it may also inform the prevailing discussion on the use of culturally adapted modalities and indigenous practices versus contextually and relationally devised approaches.

5.3.1.4 The distinct self, the merged self, and the therapeutic relationship

The themes of the distinct self and the merged self have much more to contribute to the other areas of knowledge upon which the current research draws. However, they also confirm previous research on the multicultural counselling relationship. The distinct self, which includes
the experience of being bicultural, emphasizes the impact of intersecting cultural identities on the therapy process. In the act of translating therapeutic intent, the collaborative interpreter has a heightened awareness of contextualized identities and the possibility of integrating different cultural meaning systems. Her sense of being “both but neither” allows her to create different representations of herself in order to facilitate the beginnings of a common ground for the relationship between the English-speaking counsellor and the client. The distinct self also highlights the importance of a sense of belonging in the emergence of new understandings. At the same time, the merged self contributes to the conversation concerning power differences between a dominant culture counsellor and a culturally different client. This theme describes the experience of being the process, the method, through which an equitable distribution of power can exist between the English-speaking counsellor and the client. By bridging language and cultural issues, the merged self provides access to better understanding between the two, thus contributing to a successful therapeutic relationship. Another way of thinking about both themes with regard to power differences is that the distinct self is the experience of being the power (the only one who can and must renegotiate) and the merged self is the experience of being the conduit for power to be renegotiated.

5.3.1.5 Questions raised by the collaborative interpreter’s experience of the therapeutic relationship

In summary, the three themes of the collaborative interpreter’s experience pose some interesting perspectives on multicultural counselling and the therapeutic relationship. First, they suggest that the presence of a collaborative interpreter may be advantageous to the mediation of power issues and cultural identity locations between the English-speaking counsellor and the client. They also suggest that language access alone may not be as effective at facilitating new understandings as is access to the cultural meaning systems that the languages create. However,
further research on the experience of everyone in the triad is needed to confirm whether or not the presence of a collaborative interpreter is significant to the formation of a therapeutic relationship.

Secondly, the present research suggests that the essential meaning of the collaborative interpreter's experience is relational, described by the sense of collaboration, isolation, and facilitation. That is, the value given to the experience came from the perception of new identity locations and unique relationships. The question must arise, then, is this experience restricted to the idiosyncratic features of the program in which the collaborative interpreter worked, or the unique combination of personalities involved? Or is it again indicative of the importance of relationship to language access? Obviously, research on a larger number of collaborative interpreters would be needed to form an answer.

Finally, the current research offers the idea that the presence of a collaborative interpreter may contribute to the formation of a temporary culture among the triad, which produces unique understandings about helping strategies for the client. If this is so, then is an extemporaneous revision of western therapy that is linguistically and culturally mediated more efficacious than the cultural adaptations devised for more general use with specific populations? Efficacy studies on this type of multicultural counselling would enlarge this conversation. Overall, then, the importance of the present research to multicultural counselling theory lies in the questions it proposes by illuminating the collaborative interpreter’s experience.

5.3.2 Multicultural counselling competencies and training

Multicultural counselling theory [MCT] also addresses competencies and training for dominant culture counsellors who work with culturally different clients (c.f., Sue, D.W., Brenier, Durran, Feinberg, Pedersen, Smith, & Vasquez-Nuttall, 1982). These recommendations concern the knowledge, beliefs and attitudes required of dominant culture counsellors and generally
emphasize the need for, 1) cultural identity awareness, 2) understanding of the effects of dominant culture power and privilege on diverse groups, 3) comfortableness with difference, and 4) knowledge and skills to effectively communicate with different cultural groups. Even though the present research is not concerned with dominant culture counsellors, the collaborative interpreter’s experience is infused with descriptions that support the recommendations made in this area.

5.3.2.1 The collective self and multicultural counselling competencies

As discussed earlier, the themes of the collective self and the distinct self highlight the influence of cultural identity awareness and the necessity of addressing dominant culture influences. In addition, the theme of the collective self emphasizes the importance of the dominant culture counsellor having an attitude of openness and comfort with difference. The collaborative interpreter’s experience of “we” between the English-speaking counsellor and herself is based on the perception of openness to difference. From this sense of trust and acceptance, the collaborative interpreter experiences confidence in the English-speaking counsellor’s ability, even if specific cultural knowledge is absent, as well as the freedom to impart cultural knowledge as needed even if it contradicts the dominant value and belief system. The experience of “we” between the collaborative interpreter and the client also supports the importance of openness and cultural knowledge. In order to create a trusting relationship with the client, the collaborative interpreter balances her portrayal of sameness and difference. By doing so, she also creates a relationship between the two different meaning systems of the English-speaking counsellor and the client where each may perceive the other as open and having the knowledge they need to understand each other. Finally, for the experience of “all” to happen, the perception of openness and knowledge access among everyone in the triad is key.
5.3.2.2 The distinct self, the merged self, and multicultural counselling competencies

In part, the distinct self describes the experience of holding the key to the knowledge both the English-speaking counsellor and the client require to negotiate meaningful therapy. While this theme expresses the experience of being different, at the same time it emphasizes the importance of creating meaning from an integration of difference. Thus, the emphasis here is also that competent multicultural therapy demands familiarity with the value and belief systems of different groups. Additionally, this theme underscores the necessity of appropriate verbal and non-verbal communication, which in this case is provided directly by the collaborative interpreter. Paralleling this emphasis is the theme of the merged self, which describes the experience of being the exchange of knowledge and communication skills between the dominant culture counsellor and the client.

5.3.2.3 The three themes and multicultural counselling training

With respect to training modalities in particular, the collaborative interpreter’s experience seems to compliment the intent of Pedersen’s (1977; 2000) Triad Training Model. This model is designed to train future counsellors to be aware of their own and their client’s multiple cultural identities and the potential impact on practice. In consideration of the complexities of communication, Pedersen’s training model emphasizes that a multicultural counsellor needs to understand the client’s explicit verbal exchange and implicit dialogues, as well as being aware of one’s own self-talk, in order to consider multiple perspectives. These internal dialogues, Pedersen argues, take a positive and negative role in our attempt to reconcile our self-concept in contexts of sameness and difference. In the training situation, these internal voices are represented by two people taking the roles of “anticounsellor” and “procounsellor” (Pedersen, 2000, p. 77). Combined with a culturally matched client, they form a triad that presents the
culturally different trainee with the opportunity to practice cross-cultural interviewing in a situation where explicit and implicit dialogues are evident.

In a sense, the collaborative interpreter’s experience is that of the members of Pedersen’s triad. First, the theme of the distinct self describes her experience of containing both the anticounsellor and the procounsellor voice, and of being the external voice for the client. Because she contains the implicit and the explicit dialogues of the client, she alone feels the responsibility to mediate them and make the client more fully understood by the English-speaking counsellor. At the same time, however, her role is complicated by also having access to the anticlient/proclient voices of the dominant culture counsellor, which she also sees herself as mediating in order to help the counsellor be better understood. Secondly, the theme of the collective self highlights the importance of externalizing multiple perspectives to create a new context for relationship. Finally, the theme of the merged self speaks of the experience of open and transparent communication between the internal and external languages of cultural difference. So, perhaps the present research on the experience of the collaborative interpreter will inspire more research on the value of experiential training in cultural identity locations, such as offered by Pedersen’s model.

In general, then, the collaborative interpreter’s experience compliments the requirements set for multicultural counselling competencies in regard to dominant culture counsellors. It speaks of the importance of relationship, knowledge, and communication skills to therapeutic process. But it does so by describing them from the viewpoint of the collaborative interpreter who is both a culturally different co-counsellor and an ethnically similar counsellor with a different cultural identity than her client. This perspective seems to invite further investigations into competency requirements for co-therapy with culturally different counsellors. As well, it
seems to indicate the importance of expanding our knowledge concerning competencies for counsellors who are ethnically similar to their clients, but differently acculturated.

5.3.3 Counselling immigrants and refugees

Research in this area of multicultural counselling has spanned many years (c.f., Arthur & Merali, 2005 for overview) and has resulted in considerable consensus on the requirements necessary for dominant culture counsellors to provide appropriate counselling with these populations. Results from the present research are obviously drawn from the experience of working with immigrants and refugees and, as such, offer support for many earlier findings. However, the current study also adds to the existing knowledge by presenting the rare view of a culturally similar but differently acculturated counsellor who has also immigrated to Canada. To expand on how this research is situated in relationship to the larger discussion on counselling immigrants and refugees, I will discuss it in reference to Bemak and Chung’s Multilevel Model of counselling refugees as described by Arthur and Merali (2005). Even though the model specifically addresses the needs of refugees, Arthur and Merali point out that its main concerns are equally applicable with immigrant clients. The four levels in this model offer the dominant culture counsellor an integrated approach, which includes consideration of psychoeducational training, western psychotherapy, indigenous healing methods, and cultural empowerment, to address the multiple needs of refugee clients. Interestingly, the collaborative interpreter’s experience includes all these areas and seems to describe the process of integrating them.

5.3.3.1 The multilevel model

Briefly, the Multilevel Model’s emphasis on the client’s need for psychoeducational training requires the dominant culture counsellor to facilitate the client’s understanding of western approaches to mental health, counselling practices, and counsellor roles. The focus is on the importance of recognizing immigrant clients’ potential unfamiliarity with these concepts and
on preparing them in order to foster trust and participation. With regard to western psychotherapy, the model discusses the necessity of adapting western approaches to the client’s value and belief system and incorporating that view in assessment and intervention practices. It also underscores the importance of understanding the power structures in the client’s home culture. Lastly, the need for the counsellor to consider the settlement needs of the client and their impact on counselling is stressed. The model also recognizes the value of incorporating, when possible, indigenous healing practices, which include health, social, and spiritual beliefs. However, as Arthur and Merali (2005) point out, there is still a debate in the literature about how dominant culture counsellors should initiate the topic of indigenous practices. Finally, the model encompasses the concept of cultural empowerment. The discussion here is two-fold: one aspect is the adaptation and acculturation process of the client while the second focuses on the role of the counsellor as “cultural broker” (Arthur & Merali, p. 352). By promoting group and family counselling for immigrant clients, the model acknowledges the importance of the social context in facilitating the client’s successful integration with the host culture. At the same time, it proposes that the dominant culture counsellor assume multiple roles in the helping process, such as advocate, to aid in building crucial support networks for the client. As a cultural broker, the counsellor is also urged to form connections with settlement programs both to support the client and to increase the likelihood of immigrant and refugee clients choosing to access mental health services.

5.3.3.2 The themes of the collaborative interpreter’s experience and the multilevel model

Much about how the collaborative interpreter’s experience reflects multicultural counselling competencies has already been discussed. Even so, the additional element in the Multilevel Model is the importance of a fluid integration of these competencies within the contexts of settlement and acculturation, contexts with which the collaborative interpreter is
intimately familiar and arguably still involved. The description that highlights this unique
situation best is that of the distinct self. By being "the only one" who has knowledge of both
cultures, the collaborative interpreter feels that she alone can and must take the responsibility to
prepare and educate the client, establish counsellor roles, and reveal cultural power structures
that may impact the counselling process. Furthermore, she takes these responsibilities on behalf
of the English-speaking counsellor as well, thereby facilitating the trust needed to form the cross-
cultural therapeutic relationship. Her experience of being the "only one" is not simply that of
being the means to alleviate verbal communication difficulties, but of being the key to cultural
understanding and the resolution of difference. Located in both languages and cultures, she is the
cultural broker who has experienced the social and personal factors involved in resettlement, has
intimately dealt with her own cultural identity in the face of dominant culture influences and
expectations, and has the connections to support systems. As such she views herself as an
example of integration and a facilitator of the client’s process.

The collective self expresses the process of integrating the levels of the Multilevel Model
as well. First, the "we" of the counsellor dyad is the experience of the metamorphosed counsellor
who is a synthesis of helping strategies and cultural meaning systems; thus, producing a more
holistic view of the client. Similarly, the "we" of collaborative interpreter/client relationship is,
in one way, the experience of the metamorphosed client whose experiential world, which
includes cultural and settlement factors, is fully visible in the counselling process. Lastly, the
"all" of the triad can be seen as the experience of the holistic approach promoted by the
Multilevel Model, where there is a process of unifying approaches and goals to develop
appropriate counselling. Peripherally, the theme of the merged self speaks to the holistic
approach as well by illuminating the depersonalized but deeply meaningful experience of being
the network that the model intends to produce.
5.3.3.3 Questions raised by the collaborative interpreter’s experience in comparison to the multilevel model

Questions raised by these parallels to the Multilevel Model concern the efficacy of the collaborative interpreter’s involvement with immigration and refugee counselling. Is the presence of a collaborative interpreter an advantage for dominant culture counsellors working with these populations? Obviously they provide the link to settlement services that the model encourages. But do they enhance the dominant culture counsellor’s ability to incorporate all the cultural and systemic issues that need to be considered? Also, is the collaborative interpreter’s presence an effective substitute for the provision of cultural empowerment when group or family counselling is unavailable? These questions might be answered, and certainly more questions would be raised, by investigating the experience of the others in the triad. More so, it seems, additional research on the collaborative interpreter’s experience of working with these populations might deepen our understanding of the integration process involved in bringing to bear all the considerations emphasized in the larger discussion of counselling immigrants and refugees.

5.4 Language and therapy

The current research takes a postmodern view on language, as is emphasized by multicultural counselling theory. Briefly, this perspective argues that language does not represent objects that exist apart from us; rather, it is our relationship with the world, created through social agreements. This view coincides with the earlier, hermeneutic position of Gadamer, who argued that language is the world in hermeneutical relation to us (Grondin, 2003). From this position, attention has been directed to language as the means by which social patterns of power and privilege are reflected and reinforced (Foucault, 1980; Gee, 1999).
With specific regard to therapeutic language, a considerable amount of attention has been paid to its rhetorical function (e.g., Bandura, 1969). More recently, the focus has been on the therapeutic conversation and the co-creation of meaning in the therapeutic relationship (de Shazer, 1994; White & Epston; 1990). Therefore, part of the discussion on therapeutic language has shifted to the consideration of therapeutic discourse and its potential to reinforce dominant culture concepts of psychological functioning and mental health (Bankhart, 1997). In addition, research has also indicated that cross-linguistic interpretation of psychological concepts, such as emotional states, is complex and difficult (Slaney, Chadha, Mobley and Kennedy, 2000).

Despite these perspectives, however, there is still a lack of research on the effects of language in the design of culturally sensitive therapies (Santiago-Rivera, 1995). By offering a description of the collaborative interpreter’s experience, the present research, in part, joins the discussion on language and therapy. More importantly, though, it contributes to the rare conversation on language in the design of culturally adapted modalities.

To begin, the importance of language access in the formation of a culturally different counselling relationship is described by the collective self. This theme brings forth the experience of collaborative language-building, where new metaphors of helpfulness and well being that transcend the limits of both languages are co-created within the intersecting relationships of the triad. In order to accomplish this collaboration, the collaborative interpreter conveys the rhetoric of dominant and non-dominant therapeutic discourses so that both contribute to constructing the social agreements of the therapeutic relationship. Thus, language access facilitates equity. The power of the dominant language to persuade is mediated by revealing the alternative discourse of the client. Thus, cultural adaptations of therapeutic interventions are not silently dictated by the dominant culture, nor restricted to the limits of English-based constructs; both cultural meaning systems are actively engaged in reconciliation.
The result is that a new relational context emerges wherein client-specific, cultural adaptations of therapy are devised. As mentioned previously, these adaptations may be more meaningful to a culturally different client than ones generated through culturally sensitive modalities where language access is minimal, or where a session is conducted entirely in English despite the client having a different first language.

The importance of language in the multicultural counselling relationship is equally emphasized by the theme of the distinct self. This theme underscores the importance of deeply understanding the differences between languages in order to engage in the difficult process of comparing and renegotiating meaning. It also describes the impossibility of lateral comparison or substitution of words in certain situations. Even more so, the distinct self also emphasizes the necessity of language access in order to reveal dominant discourses of power and privilege, mediate between competing discourses, and redistribute power in a therapeutic relationship between differently acculturated or culturally different counsellors and clients.

Lastly, the merged self provides a metaphor for the process of restructuring relationship through the conveyance of language. Here, the sense is that the pitfalls of lexicon insufficiencies, discourse locations, and cultural constructs are resolved through connection. In summary, the current research reaffirms the importance of language in the cultural adaptation of therapies and provides new questions about language difference and the therapeutic relationship.

5.5 Biculturalism and bilingualism

The current study does not directly apply to research in these areas; however, all the themes indirectly confirm some of the theories by describing the lived experience of bilingualism and biculturalism in the therapeutic process. To begin, a good number of inquiries into bilingualism and biculturalism have indicated that the two concepts often intersect (eg. Atkinson, Morten and Sue, 1998; Edwards, 1994; Helms, 1990). Interestingly, the collaborative interpreter
also expresses a symbiotic sense of being bilingual and bicultural. Neither is experienced separately, but described as her understanding of culture through language and language through culture. For the sake of clarity, though, it is helpful to discuss the aspects of this experience separately.

5.5.1 The collaborative interpreter’s experience and bicultural identity

First, the collaborative interpreter’s understanding of her bicultural identity in the therapeutic context coincides with the research that bicultural individuals experience each culture as taking turns in guiding cognition rather than it being a simultaneous process (Hong, Morris, Chin, & Benet-Martinez, 2000). Also, research has shown that turn-taking is determined by context; thus, consideration of the context in which interpretation is offered is crucial (Hong et al.). The distinct self is the deeper lived experience of this turn-taking, which is both facilitative of and determined by the therapeutic context. At the same time, however, the collective self describes a relational context where a synthesis of cultural identities is formed to simultaneously guide meaning-making. It also seems that since the merged self is the experience of being the method by which two cultures come together, it also alludes to the possibility of a temporary feeling of integration. Further investigation into the collaborative interpreter’s experience, then, may reveal more about bicultural identity in the therapeutic process.

Any discussion of biculturalism is also infused with the concepts of acculturation and cultural identity. Racial and cultural identity locations have been linked to the meaning dominant culture constructs have for the individual (Helms, 1990). As well, acculturation differences related to values and beliefs have been shown to affect therapeutic process and client outcomes even with ethnically similar counsellors (Atkinson, Morten & Sue, 1998). The collaborative interpreter experiences herself as mediating between the different power locations of all three in the triad, and revealing how acculturation affects understanding. Again, the theme of the distinct
self illustrates the shifts in cultural identity and the different portrayals of acculturation necessary to form trust between members of the triad, while the other themes emphasize the relational contexts in which these shifts occur. Interestingly, the distinct self also describes the emotional impact of being differently identified and of seeing oneself deliberately shifting from one portrayal to another, just as the merged self relates the sense of neutrality. Hence, the collaborative interpreter’s experience also hints at how biculturalism might affect a counsellor’s process.

5.5.2 The collaborative interpreter’s experience and bilingualism

Acculturation is also sometimes assessed by fluency, with some researchers urging that more studies need to be done in this area (eg. Atkinson, Morten & Sue, 1998). The point is that fluency is linked to our ability to understand a culture and cultural knowledge is needed to deeply understand the language. Thus, the discussion of biculturalism turns to one about bilingualism. Research in this area is extensive and complex, but some of its main points are evident in the collaborative interpreter’s experience. The first of these points is that fluency may not be equally developed in both languages (Edwards, 1994). Often utility will determine which areas of fluency develop, such as having a work vocabulary over an emotional one. From a sociopolitical view, every language contains power discourses; thus, linguistic exchanges, or choices of expression, are determined by considerations of power and privacy (Edwards; Myers-Scotton, 2002). As a result, the literature also recommends consideration of the contextual influence on meaning (Edwards). Furthermore, neuropsychological studies point to different areas of language access, which may indicate a possible difference in the conceptual quality of each language (Dufour & Kroll, 1995). While languages may differ in lexicon and conceptual understanding, other research emphasizes the importance of non-verbal fluency in addition to verbal (Sue & Sue, 2003).
All the themes from the present study illustrate the importance of cultural and lexicon fluency to the formation of an intercultural therapeutic relationship. The expanse of fluency needed is suggested by the theme of the merged self as it describes transporting the flow of meaning exchange. As the bridge, the merged self closes the gaps between concepts, lexicons, non-verbal communications, and cultural discourses. At the same time, the distinct self describes the processes of comparison and transmission required to form the building blocks of that bridge. The “both but neither” experience describes the depth of bicultural knowledge needed to interpret the worlds of the client and the English-speaking counsellor. It also speaks to the necessity of understanding and communicating discourses of power, conceptual differences, and individualized cultural interpretations in order to produce clarity. Lastly, the collective self highlights the level of language fluency necessary for relationship and the level of relationship needed to create understanding. Specific to the proposal that there may be differences in the conceptual quality of translations (Dufour & Kroll, 1995), the themes all seem to indicate that cultural identity is key to conceptual understandings and that open discussion is crucial to resolving differences.

5.5.3 Questions raised by the collaborative interpreter’s experience of biculturalism and bilingualism

All together, the collaborative interpreter’s experience brings forth questions about what level of bilingualism and acculturation is optimum for the use of interpreters in therapy. Is there a difference, say, between using an interpreter who has emigrated from the client’s culture of origin versus someone who was raised in Canada but learned the parent’s first language? The quality of the therapeutic process may be affected by the origin of the interpreter’s access to cultural meaning systems or by which language is actually their first. Also, how important is a bicultural identity to the understanding of cultural concepts and lexicon from both cultures?
Furthermore, how vital is it that the interpreter have a deep understanding of the specific discourses of each culture, such as those on mental health, well being, and helpfulness? More research is needed in these areas and would contribute greatly to the efficacious use of interpreters in therapy.

5.6 Counselling through interpretation

Previous knowledge on the use of interpreters in mental health settings is extremely limited and what does exist has arisen almost exclusively from information based on the therapist’s experience. The result is that recommendations for practice have evolved from a basis of understanding that has virtually ignored the experience of the interpreter (Granger & Baker, 2002). As Granger and Baker point out, the absence of the interpreter’s voice in the development of these guidelines is a serious omission, and that its inclusion is required to produce a full understanding of what makes good practice. My own efforts to uncover research on the experience of the interpreter, similar to Granger and Baker’s, produced only six studies, including their own. I also found one paper on the subject of practice guidelines written by an interpreter (Razban, 2002). The present research is an important addition to this small number of contributions not simply because it supports some of those earlier findings, but because it also differs from all previous efforts and thereby offers new insights. To demonstrate, I will briefly review the five previous studies.

5.6.1 Previous research on the interpreter’s experience

As mentioned in the literature review for the current study, it seems the first investigation into the interpreter’s experience was done by Harvey (1984, cited in Granger & Baker, 2002; Raval, 2002) who looked at the interpreter’s experience with deaf populations. His work brought to light the potential difficulties involved in the therapist-interpreter relationship due to the clinician’s perception of reduced power. As well, Harvey pointed out that if the interpreter
functions only as a neutral language facilitator, she or he is more likely to be the recipient of the counsellor’s and the client’s negative projections. On the positive side, Harvey reported that the interpreter felt satisfaction in being able to empower the client by facilitating his or her real voice.

Then in 1991, Tribe (as cited in Granger & Baker, 2002) investigated the effects of working with political refugees and victims of torture. Her inquiry indicated the potential for interpreters to be deeply affected by their client’s stories; thus, the need for specialized training and supervision. Another study by Miller and his colleagues looked at the experience of 15 interpreters from Eastern Block countries who worked with culturally similar refugees in torture therapy centres and mental health clinics (Miller, Martell, Pazdirek et al., 2005). Most of these interpreters were refugees themselves, with only two being native born Americans. As well, only three of the 15 interpreters in Miller’s research had formal training in counselling. Like Tribe’s earlier discovery, Miller et al. also found that the interpreter’s own refugee trauma was triggered by the client’s stories. In addition, their study also looked at the emotional experience of refugee trauma on the triad and the interpreter’s influence on the therapeutic alliance.

During research on the therapist’s view of working with interpreters, Raval (1996) included the first single case study of an interpreter who worked with Bangladeshi families in a child mental health centre. From what I could discover, Raval’s study is the only one that involved an interpreter who worked as a bilingual worker, which Raval defined as someone who provides cultural and language access and who functions as a cultural broker and advocate. From that case study, Raval determined that the interpreter gained satisfaction from helping each side understand the other, giving the client a voice, and creating confidence in the client to talk about difficult issues. He also found that the interpreter valued flexibility in her role, thought neutral
interpretation limited the therapeutic process, and felt that the counsellor was sometimes threatened by her alliance with the clients.

The most extensive research on the interpreter’s experience was undertaken by Granger and Baker (2002) whose study involved 64 survey participants from a variety of cultures. Half of the 64 had received no professional training as interpreters, but all had worked as one for at least five years. One-third of the respondents worked in mental health settings and the other two-thirds in social welfare and general medical settings. Again, all saw their role as providing neutral language access rather than cultural consultation. The interpreters in Granger and Baker’s study brought forth their concerns about the training necessary for work in counselling sessions, and the difficulties encountered in their relationship with the counsellor and in the mainstream work setting, such as lack of recognition and support.

Last, is the contribution by Razban (2002) who made recommendations for practice based on her experience of being a registered public service interpreter in Britain. Her role was also as a neutral figure in the provision of language access; thus, she focused on the requirements for fluency, techniques of interpreting, briefing needs of clinician and interpreter, and the determinants of impartiality.

5.6.2 Comparison of the present research to earlier studies

In comparison, the current research offers the experience of four collaborative interpreters who were intimately involved in the counselling process as well as in providing language and cultural access. Thus, the present study is the only one that provides an extensive view of the interpreter’s experience in this role (c.f., Raval, 1996). Moreover, all of the participants in this study were professionally trained interpreters and had worked in various health and legal settings for between 10 and 25 years. In addition, they were also similarly trained in basic counselling skills and theory, and worked within a specific modality designed for
their inclusion. Among them, they had 34 years of experience as collaborative interpreters, ranging from 7 to 10 years each.

Another difference is that the client base for the collaborative interpreters was from Asian immigrant populations, which comprised five different language communities. Although the Vietnamese community included a refugee population, largely these clients had been long-term residents of refugee camps and had been away from the acute traumas of war and displacement for a considerable length of time. So, none of the collaborative interpreters worked directly with the severe psychological distress caused by political crisis, exile, genocide, or torture. Instead, they dealt mainly with immigrants who were granted access to Canada through family reunification, professional standing, or entrepreneurial interests.

Beyond sharing a language with their clients, all of the collaborative interpreters in the present study had also been immigrants themselves, growing up in the same places as their clients. However, they were also long-time residents of Canada, averaging 30 or more years; hence, they had a similar sense of bicultural identity. Lastly, all had worked as settlement counsellors, which meant they had a thorough knowledge of and links to their cultural communities here in Canada.

5.6.3 Contributions made by the present research to research on the interpreter’s experience

Because of these differences, the contributions of the present research provide a more extensive description of the positive processes involved and elaborate more fully on the difficulties encountered when counselling is provided through interpretation. For example, the theme of the collective self brings forth the experience of inclusion and equality with the dominant culture counsellor, an experience that brings with it a sense of recognition and respect. While the potential for a competitive and mistrustful relationship with the English-speaking
counsellor is acknowledged, the collective self illustrates the processes of power redistribution and renegotiation of meaning predicated on the English-speaking counsellor's perceived qualities of openness and acceptance of difference. Further, the collective self brings to light the intricate development of alliances among all present and, hence, on the collaborative interpreter's influence on the therapeutic alliance.

In contrast, the distinct self expands on the sense of difficulty in this process. Inherent problems in language and cultural interpretation are raised by the sense of being the only one who has the complete picture of the client's world. The weight of this responsibility along with the sense of alienation produced by knowing both cultures but belonging to neither, illustrates the deep importance of getting adequate support and validation for this work. As well, the distinct self broadens our understanding of the potential for exclusion by both therapist and client by elaborating on the processes the collaborative interpreter must take in order to avoid it (c.f., Harvey, 1984).

Interestingly, the merged self is the experience of the neutral conduit, the unobtrusive facilitator in the exchange of meaning. However, this experience arises from within the sense of inclusion founded by the relational context. Therefore, this theme suggests, as did Raval's (1996) research, that the sense of satisfaction and meaning in the work is related minimally to mechanistic fluency and much more so to the meanings created in relationship.

The importance of the current study's contributions, as is true of the other five sources, is even more evident when compared to the larger body of knowledge on using interpreters in counselling. To illustrate how the present research supports and adds to scholarship in this area, I will relate it to the literature's discussions on roles and function, therapists' perspectives, training, and ethics.
5.6.4 Interpreter roles

As mentioned, the debate concerning interpreter roles is lengthy and offers arguments that support a continuum of employment bracketed by mechanistic language facilitator (Bradford & Muñoz, 1993; Foster, 1998) and multifunctional member of the counselling triad (Mudarikiri, 2002; Raval, 2002). In a succinct review of possible roles, Raval (2002) delineates nine. These are: 1) neutral interpreter; 2) cultural broker, who explains the cultural context of therapist/client communications; 3) cultural consultant, who gives information and suggestions to the therapist; 4) advocate, who speaks on behalf of the client; 5) intermediary, who speaks on behalf of the counsellor or the client; 6) conciliator, who resolves conflicts; 7) community advocate, who represents community concerns about policy; 8) link-worker, who helps the therapist identify client needs and assists client choices; and 9) bilingual worker, who participates in the counselling process. Also in this summary, Raval reminds us that views vary as to whether the interpreter should assume a variety of roles or function only as the neutral provider of language access. To this argument he adds that the role of bilingual worker necessitates encompassing a variety of these roles.

5.6.5 Contributions made by the present research to research on interpreter roles

Not only do the results from the current study coincide with these earlier descriptions, they offer an important new contribution. Specifically, the themes reveal the experience of being the composite of all these roles. Together they describe the collaborative interpreter’s understanding of her multifunctional presence, why such complexity is necessary, and the personal ramifications involved. The “we” of the collective self illuminates the fluid and relationally determined processes involved in the emergence of different roles. In doing so, this theme offers a glimpse into the systemic interplay of the triad previously discussed by Raval (1996) and Mudarikiri (2002), who emphasized the collaborative achievement of active and
equal roles among all in the therapeutic relationship. From the “me” of the distinct self, we gain insight into the individual experience of performing each role in addition to the impact of different cultural identity locations and accesses to power. Evoking, perhaps, even more curiosity is the sense of “them” described by the merged self. This theme offers a perspective on the meaningfulness of simply being the neutral interpreter. However, it emphasizes that the meaning of this experience is forged through relationship; being immersed in the exchange of meaning between two others becomes satisfying only within the collaborative context of the triad. Thus, the collaborative interpreter’s experience lends support to the argument that a multifunctional role is advantageous. At the same time it also illustrates how each role affects the interpreter and is made meaningful through inter-relationship.

5.6.6 The therapist’s perspective

One of the most prevalent perspectives in the literature concerning the use of interpreters is the negative experience of the therapist. These difficulties are often associated with the interpreter having a larger role in the therapeutic process and, therefore, support the argument for a restriction of duty to that of impersonal word exchange (e.g. Branford & Muñoz, 1993). For the most part, therapist difficulties with an expanded role concern fears around of loss of control, role confusion, alienation from the client and process, and disparate views on health practices and therapeutic process (c.f., Raval, 2002; Tribe, 1999). Positive comments from therapists are restricted to discussing the beneficial nature of trust between the therapist and the interpreter in this situation (Miller et al., 2005; Raval, 1996). Specifically, therapists have reported that their work is enhanced when paired in a trusting relationship with a cultural broker.
5.6.7 Contributions made by the present research to discussions from the therapist’s perspective

From the collaborative interpreter’s perspective in the current study, we gain collateral information on what is the basis for trust and collaboration with a dominant culture therapist. First, the collective self reveals the process of positive collaboration and enhancement of mutual expertise. The collaborative interpreter’s willingness to trust emerges from experiencing the dominant counsellor as open, accepting, and able to share power. The latter quality is crucial to her feeling safe enough to reveal the depth of her knowledge and expertise instead of censoring it to support dominant culture ideas. As a result, she feels joined with the English-speaking counsellor so much so that their separate ideas become one. As an aside, this theme also suggests the value of training in a systemic approach that is similar to the therapist’s to the formation of the collaborative interpreter/English-speaking counsellor relationship. The collective self also shows the necessity of a sense of freedom and equity in order to form a strong bond with the client and encourage the client to trust the therapeutic process. Thus, it offers us a view of how the dominant culture counsellor/client relationship is co-created through the relationship of the collaborative interpreter to each.

The theme of the distinct self also offers an inside view that may inform the therapist’s perspective. One of the reasons given for therapist difficulty is that the therapist may not have an appreciation of the intricacies involved in translating language and culture (Raval, 2002). Through the distinct self we can see into the challenging process of transferring lexicon, metaphor, and cultural stories in order to communicate therapeutic intent. Moreover, we can see the complex task of deconstructing discourses on mental health, healing, and healers while maintaining therapeutic alliances. Perhaps most importantly, the distinct self offers the reassurance that the collaborative interpreter is not one-sided or biased; but experiences herself
as carrying all the responsibility for enabling understanding between the dominant culture counsellor and the client, and all the potential for its failure. Altogether, it seems, this research is an invitation for more inquiries into the nature of the collaborative interpreter/dominant culture counsellor relationship and the means required to make it effective.

5.6.8 Contributions made by the present study to discussions on training requirements for interpreters

One of the facts inspiring the present research is that the use of interpreters in counselling occurs on an ad hoc basis without the benefit of standardized training (Raval, 2002). The value of the current study to this discussion is that it offers descriptions of the practice from participants who were all professionally trained interpreters and had all received specific training for the purpose of counselling. All of the themes arising from the current study speak of the benefit experienced from sharing a common understanding of the purpose and process of therapy. The collaborative interpreters’ training corresponded to a specially designed program, which also defined the approach of the English-speaking counsellor. That is, the training they received was not developed in comparison to what the dominant culture counsellor needed; it was co-developed. This collaborative perspective, conceived outside session work, may even be the essential underpinning for a solid relationship to form between the counsellor and the interpreter. Hence, the current research offers support to the call for standardized training. But at the same time, it emphasizes the need for mutually devised training rather than that which is singularly the product of the dominant culture perspective (c.f., Kean & Henley, 1996; Grant, Henley and Kean, 2001).

That being said, the themes found in the current study concur with the recommendations for areas of training as proposed in the literature. Past scholarship has stressed that bilingualism is not the lone and sufficient criterion for assisting the counselling process (Raval, 2002). The
collaborative interpreter's experience describes the deep level of fluency needed to communicate therapeutic understandings, and supports the argument for levels of fluency which incorporate discourses of health beliefs and practices (Musser-Granski & Carrillo, 1997). Next, both the collective self and the distinct self underscore the necessity of understanding the effects of power and oppression on the therapeutic relationship and how such are reinforced through language (Raval). As well, the themes speak to the advantages of a bicultural identity in transferring paralingual communications (Branford & Muñoz, 1993) and in incorporating traditional healing methods (Raval). Overall, then, the current research offers more to the argument that a sophistication of knowledge, both cultural and therapeutic, is necessary and needs to be considered in standardized training. But, even more so, it suggests that the quality of the counsellor/interpreter relationship is fundamental to the implementation of this knowledge.

5.6.9 Contributions made by the present research to discussions on ethical standards for interpreters

Even though the present inquiry did not directly address ethical issues, such as confidentiality, dual relationship, and conflict of interest, it does show that ethical behaviour is of deep concern in the collaborative interpreter's experience. For instance, the literature raises concern about the difficulty in maintaining confidentiality and non-conflicting roles within small ethnic and linguistic communities (Raval, 2002). The experience of the collaborative interpreter addresses this concern by describing how it is partially resolved by transforming their role as helper and establishing new boundaries. The theme of the distinct self shows the effort and concern for accuracy, just as the collective self highlights the empowerment of the client. As well, these themes illustrate the collaborative interpreter's concern with mediating words to offer clarity of intent. The themes also demonstrate the issue that some authors have had regarding the reliance on dominant culture values in the determination of ethical standards for interpreters.
(Raval, 2002). All describe the process of aligning the values of self-determination and self-directedness with culturally meaningful help. It is the hope of this researcher that this presentation of the collaborative interpreter's experience will inspire the gathering of more input from the interpreter to inform the development of ethical guidelines for this clinical practice.

5.7 Limitations of the study

Aside from the limitations inherent in the methodology used to conduct the present study, other factors need to be kept in mind when reviewing the results. First, the current research is limited by the small number of participants. While it does offer the first view into the collaborative interpreter's experience from multiple perspectives that differ linguistically and culturally, it is still an extremely small window. If a larger and more wide ranging study were done, some of the themes offered here may be substantially changed or eliminated. Following, the current study is also restricted to the experience of collaborative interpreters who worked in the same program and within the same therapeutic approach. Despite being a first-hand account, it remains, like previous research, an isolated one. The question of how collaborative interpreters who work in other paradigms experience the process in unanswerable here. Furthermore, the participants in the present study were all familiar with each other and the researcher. While every effort was made during design and implementation to eliminate possible biases in the data, it must still be viewed with the knowledge that all had experienced a long working relationship with each other. In some ways, this may have been beneficial to the collection of more open and frank descriptions. However, it is still data that was possibly interpreted through previous relationship as much as by the research relationship.

Another limitation is that the descriptions gathered were from past experience, not present. Reflection is instrumental in meaning-making, but the length of time away from the experience may have meant some memories were lost, or that the descriptions were less rich than
they could have been. As well, they were relating their experience to a dominant culture researcher; obviously, the possible effect this strategy had on the results could only be demonstrated by research done by culturally similar researchers.

Despite these limitations, however, the present research represents an initial attempt to bring the voice of the collaborative interpreter into the discourse on counselling through interpretation. As such, it offers new insights and even more questions that will hopefully engender more research on the topic and encourage more thoughtful practice.

5.8 Recommendations

In light of the collaborative interpreter’s experience offered by the current research, I would like to make the following recommendations. These suggestions are in support of previous scholarship and bring new emphasis to certain considerations. They are not presented in order of importance, but are meant to be viewed as equally necessary.

1. That more research is undertaken concerning the use of interpreters in counselling with respect to differences in roles, training, and acculturation. All areas involved in the use of interpreters are still poorly informed, if at all.

2. That more research in particular is focused on the collaborative interpreter role in counselling through interpretation.

3. That research begins to examine the impact on therapeutic efficacy of employing a collaborative interpreter versus a verbatim interpreter.

4. That research look into the possibility that individualized, contextually generated adaptations of western therapy are produced by the collaborative interpreter/dominant culture counsellor/client triad, and, if so, that they may be potentially more effective that culture-specific modalities devised for more general use.
5. That more research be done on the impact of language on the effectiveness of culture-specific modalities.

6. That qualifications for the use of interpreters in counselling, inclusive of all roles and functions, include consideration of the interpreter’s cultural identity and the potential difference it may have on therapeutic outcomes.

7. That qualifications for the use of interpreters, inclusive of all roles and functions, include consideration of fluency and first language acquisition. There may be a considerable difference between using interpreters who have English as their first language over those who share the client’s first language.

8. That a nation-wide standard of practice be developed for the use of interpreters in counselling in respect of the growing presence of linguistic diversity in Canada.

9. That the training of interpreters for work in counselling be standardized.

10. That training for dominant culture counsellors regarding the use of interpreters in all roles be established.

11. That training for dominant culture counsellors address the importance of co-developing a working relationship with the interpreter from a basis of mutual regard and vision.

12. That training programs for dominant culture counsellors and for interpreters include more of the interpreter’s voice in the development of curricula.

13. That consideration of the importance of the interpreter/client relationship in the provision of therapy be emphasized and researched further.

14. That all counselling programs where interpreters are used take the ethical responsibility to provide appropriate support and supervision to aid the interpreter in dealing with the demands of counselling.
5.9 Conclusion

Canada is an increasingly multilingual nation and, as such, the social justice challenge of providing appropriate and effective counselling across languages and cultures has increased. Since the availability of cultural and language specific professionals is likely to remain insufficient to meet the needs of our widely diverse and widely dispersed cultural communities, the use of interpreters will continue and may even rise. Yet, the practice is largely uninformed and the long-standing call for more research into the use of interpreters in counselling has not been answered.

The current research took a hermeneutical phenomenological approach to the study of the heretofore hidden experience of the collaborative interpreter. My intent was to contribute to the extant knowledge on the use of interpreters in counselling, which, by and large, focuses on therapist experience, scholarly discussion, and the function of a verbatim interpreter. While this body of work on interpreters is already meager, studies that are based on the interpreter’s perspective are even fewer. Hence, the interpreter’s voice is virtually absent from any emerging discourse in the helping professions concerning services for multicultural communities.

There are actually many different roles interpreters may take in counselling, and the present study, as far as can be determined, offers the only expanded view of the interpreter in the role of collaborative interpreter. The collaborative interpreter is arguably the most complex role, requiring the interpreter to provide language and cultural access as well as engage in the therapeutic process. Thus, the use of a collaborative interpreter in a therapy session creates a vastly different context in which the dominant culture counsellor and the client meet. The present research attempted to illuminate that context from the experience of the collaborative interpreter in order to include her voice in counselling psychology’s discourse on interpreters, and, on an even larger level, contribute to the discourse on multicultural counselling.
Interestingly, the thematic results of the current research offer a composite picture of the experience of each type of interpreter role as it is understood in the complexity of being a collaborative interpreter. The descriptions offered by the current study reveal the relational determinants of a successful process from the collaborative interpreter’s point of view, as well as the isolating factors involved in the role. In doing so, it enhances the extant literature on interpreter roles, training issues, ethical requirements, and supervisory needs. In the larger perspective of multicultural counselling, the present research also contributes to the discussions on the therapeutic relationship, culture-specific modalities, counselling competencies and training, and the counselling needs of immigrants and refugees. Overall, the current research, true to its hermeneutical phenomenological approach, is meant to offer its readers the chance to join in the discovery of the meaning of the collaborative interpreter’s experience and thereby realize their own questions as they emerge in relationship to this text. Therefore, it is my hope that the present study invites multiple inquiries to further inform the practice of using interpreters in counselling.
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APPENDICES

Appendix A  Letter of initial contact

(Date)

(Name of potential participant)

Dear

My name is Karen Grant and I would like to invite you to participate in a research project I am conducting, entitled **Counselling through interpretation: The meaning of the collaborative interpreter’s experience of re-creating therapeutic intent across languages and cultures.** The data from this research project will be used for the purpose of writing my thesis in partial fulfillment of the requirements for a Doctor of Philosophy in Counselling Psychology from the University of British Columbia.

For seven years, I was involved in a community-based counselling program that offered counselling to non-English speaking clients through the aid of culturally similar settlement counsellors, who functioned as interpreters in the counselling process. The program’s goal was to develop a co-counselling model that would merge western counselling skills with culturally appropriate counselling in the client’s first language. The counselling was led by a western-trained, English-speaking counsellor who collaborated with the counselling and language skills of the collaborative interpreter.

There is, at present, no research that looks at the experience of the collaborative interpreter in this role. In contrast, there has been quite a lot of research that looks at the English-speaking counsellor’s experience of working with an interpreter. I am keenly interested in bringing to light the experience of the collaborative interpreter through hearing what you might be willing to share about being involved in this kind of counselling. These would be experiences that reflect your perspective on such topics as: the successes and limitations of
translating English into helpful and culturally appropriate ideas, the process of establishing a collaborative (or not) relationship with the western-trained counsellor, your relationship with the client under these circumstances, your sense of being able to adequately represent the emotional experiences of the client back to the western counsellor, and others.

The research involves participation at a preliminary meeting for half an hour, two individual interviews of approximately one to one and half hours each, and a group conversation with other participants of approximately 2 hours. All meetings will be audiotaped and transcribed. You will have the opportunity to review your transcript, edit, interpret, and provide feedback.

The preliminary meeting will be an opportunity for you to learn about the research process and the nature of your participation. I will explain the relevance of your contribution to establishing equitable counselling practice across cultures and languages, and describe how we will both do separate interpretive readings of your story.

The initial interview will be an opportunity for you to recount your experience individually. After I have transcribed the initial interview, you will have the opportunity to review and edit the transcription of your interview and offer your interpretation. I will contact you for a follow-up meeting to discuss these interpretive readings.

The group conversation will be a way for you and other participants to explore your reflections in greater depth and, perhaps, capture the common themes of your experiences.

The total amount of time required for participation in the research will be approximately 8 to 12 hours over a 6-month period. Your participation in this research project is entirely voluntary and you may refuse to participate or withdraw at any time. All data records will be kept confidential and computer files will be password protected. Each participant will have a pseudonym and transcriptions will be coded to ensure confidentiality.
In the group meeting, the identity of the participants will only be revealed to the extent each individual wishes to introduce her or himself. For example, participants may choose to use a pseudonym. Participants will be asked, as well, to not refer by name to clients or others during their discussions. Participants will also be asked to not make reference to what is discussed during the group meeting outside of the meeting.

If you have any questions about your rights as a research participant, you may contact the Research Subject Information Line in the UBC Office of Research Services at 604-822-8598. If you wish further information or clarification, please phone me at _______ or email me at _______.

If you are willing to participate in this research project, please phone or email me or indicate your response on the form provided and mail it in the enclosed stamped, self-addressed envelope by (2 weeks – date of response). Please keep one copy of the form for yourself. If you know of any other collaborative interpreters with this experience who may be interested in participating, please pass this information along to them.

My research supervisor is Dr. Bill Borgen, Professor, Department of Educational and Counselling Psychology and Special Education, UBC. He can be contacted at _______ or by email at_____________. Thank you for your time. I look forward to hearing from you.

Karen Grant
Research project:

Counselling through Interpretation: The meaning of the collaborative interpreter’s experience of re-creating therapeutic intent across languages and cultures.

Yes, I am interested in participating in the research project described in your letter. I look forward to our preliminary meeting. Please contact me at:

__________________________________________________________________________

so that we can arrange a meeting time.

_________________________________________ Date____________________________
Signature                                      Date____________________________
Appendix B  Letter to managers

(Date)

(Name of manager)

Dear

My name is Karen Grant and I would like to invite your employees to participate in a research project I am conducting, entitled *Counselling through interpretation: The meaning of the collaborative interpreter’s experience of re-creating therapeutic intent across languages and cultures*. The data from this research project will be used for the purpose of writing my thesis in partial fulfillment of the requirements for a Doctor of Philosophy in Counselling Psychology from the University of British Columbia.

For seven years, I was involved in a community-based counselling program that offered counselling to non-English speaking clients through the aid of culturally similar settlement counsellors, who functioned as interpreters in the counselling process. The program’s goal was to develop a co-counselling model that would merge western counselling skills with culturally appropriate counselling in the client’s first language. The counselling was led by a western-trained, English-speaking counsellor who collaborated with the counselling and language skills of the collaborative interpreter.

There is, at present, no research that looks at the experience of the collaborative interpreter in this role. In contrast, there has been quite a lot of research that looks at the English-speaking counsellor’s experience of working with an interpreter. I am keenly interested in bringing to light the experience of the collaborative interpreter through hearing what your employees might be willing to share about being involved in this kind of counselling. These would be experiences that reflect their perspective on such topics as: the successes and limitations of translating English into helpful and culturally appropriate ideas, the process of
establishing a collaborative (or not) relationship with the western-trained counsellor, their relationship with the client under these circumstances, their sense of being able to adequately represent the emotional experiences of the client back to the western counsellor, and others.

The research involves participation at a preliminary meeting for half an hour, two individual interviews of approximately one to one and half hours each, and a group conversation with other participants of approximately 2 hours. All meetings will be audiotaped and transcribed. Participants will have the opportunity to review their transcript, edit, interpret, and provide feedback.

The preliminary meeting will be an opportunity for participants to learn about the research process and the nature of their participation. I will explain the relevance of their contribution to establishing equitable counselling practice across cultures and languages, and describe how we will both do separate interpretive readings of their story.

The initial interview will be an opportunity for them to recount their experiences individually. After I have transcribed the initial interview, they will have the opportunity to review and edit the transcription of their interview and offer their interpretation. I will contact them for a follow-up meeting to discuss these interpretive readings.

The group conversation will be a way for all participants to explore their reflections in greater depth and, perhaps, capture the common themes of their experiences.

The total amount of time required for participation in the research will be approximately 8 to 12 hours over a 6-month period.

Your employees' participation in this research project is entirely voluntary and they may refuse to participate or withdraw at any time. All data records will be kept confidential and computer files will be password protected. Each participant will have a pseudonym and transcriptions will be coded to ensure confidentiality.
In the group meeting, the identity of the participants will only be revealed to the extent each individual wishes to introduce her or himself. For example, participants may choose to use a pseudonym. Participants will be asked, as well, to not refer by name to clients or others during their discussions. Participants will also be asked to not make reference to what is discussed during the group meeting outside of the meeting.

If you have any questions about your employees' rights as research participants, you may contact the Research Subject Information Line in the UBC Office of Research Services at 604-822-8598. If you wish further information or clarification, please phone me at _____ or email me at ________.

If you know of any employees who might fit this criteria and are willing to participate in this research project, please pass this information along to them. Interested participants may phone or email me or indicate their response on the form provided and mail it in the enclosed stamped, self-addressed envelope by (2 weeks – date of response). Please have them keep one copy of the form for themselves. If you know of any other collaborative interpreters with this experience who may be interested in participating, or any other organizations that may have such employees, please pass this information along to them.

My research supervisor is Dr. Bill Borgen, Professor, Department of Educational and Counselling Psychology and Special Education, UBC. He can be contacted at _____ or by email at__________. Thank you for your time. I look forward to hearing from you or your employees.

Karen Grant
Research project:

Counselling through interpretation: The meaning of collaborative interpreter’s experience
of re-creating therapeutic intent across languages and cultures.

Yes, I am interested in participating in the research project described in your letter. I look
forward to our preliminary meeting. Please contact me at:

___________________________________

so that we can arrange a meeting time.

___________________________________  ________________________________
Signature                               Date
Appendix C  Consent form

(Date)

Dear __________________________;

Thank you for indicating your interest in participating in the research project I am conducting, entitled *Counselling through interpretation: The meaning of the collaborative interpreter’s experience of re-creating therapeutic intent across languages and cultures*. The data from this research project will be used for the purpose of writing my thesis in partial fulfillment of the requirements for a Doctor of Philosophy in Counselling Psychology from the University of British Columbia and for scholarly publications related to the research. The principle investigator for this study is Dr. Bill Borgen, Department of Counselling Psychology, UBC.

The purpose of this research project is to inquire into the experiences and understandings of the collaborative interpreter who has participated in co-therapy with an English-only speaking counsellor, and who provided translation during this process for a non-English speaking client. The research involves participation at a preliminary meeting for half an hour, two individual interviews of approximately 1 to 1.5 hours each, and a group conversation with other participants of approximately 2 hours. All meetings will be facilitated by me and all will be audiotaped and transcribed.

After the initial interviews have been transcribed, you will have an opportunity to review and edit your transcriptions as well as my written interpretation of your ideas. I will contact you for a follow-up meeting to discuss your review.
The group meeting will be a way for you and other participants to explore and share your reflections in greater depth. I will facilitate this meeting and it will be audiotaped and transcribed.

The total amount of time required for participation in the research will be approximately 8 to 12 hours over a 6 month period.

Your participation in this research project is entirely voluntary and you may refuse to participate or withdraw at any time. All data records will be kept confidential and computer files will be password protected. Each participant will have a pseudonym and transcriptions will be coded to ensure confidentiality.

In the group meeting, the identity of the participants will only be revealed to the extent each individual wishes to introduce her or himself. For example, participants may choose to use a pseudonym. Participants will be asked, as well, to not refer by name to clients or others during their discussions. Participants will also be asked to not make reference to what is discussed during the group meeting out side of the meeting. However, it is important to note that confidentiality cannot be guaranteed within the focus group context.

If you have any questions or want further information regarding this project, you may contact me at _______ or by email_________. You may also contact my advisor, Dr. Bill Borgen at ___________ or by email at________________.

If you have concerns about your treatment or rights as a research subject at any time, you may contact the Research Subject Information Line in the UBC Office of Research Services at the University of British Columbia, at 604-822-8598.

I appreciate your willingness to undertake this research and trust that this research will contribute to your practice as a counsellor.

Karen J. Grant
Research project

Counselling through interpretation: The meaning of the collaborative interpreter’s experience of re-creating therapeutic intent across languages and cultures.

Consent form

You do not waive any of your legal rights by signing this consent form.

Your signature below indicates that you have received a copy of this consent form for your records.

Your signature indicates that you have read and understood the requirements of the project and that you consent to participate in the project.

SIGNATURE__________________________________________

PRINTED NAME________________________________________

DATE__________________________
Certificate of Approval

PRINCIPAL INVESTIGATOR
Borgen, W.A.

DEPARTMENT
Counselling Psychology

NUMBER
B06-0277

INSTITUTION(S) WHERE RESEARCH WILL BE CARRIED OUT
UBC Campus,

CO-INVESTIGATORS:
Grant, Karen Jean, Counselling Psychology

SPONSORING AGENCIES

TITLE:
Counselling through Interpretation: The Bilingual Counsellor's Experience of Re-Creating Therapeutic Intent across Languages

APPROVAL DATE
JUN 30 2006

TERM (YEARS)
1

DOCUMENTS INCLUDED IN THIS APPROVAL:
June 22, 2006, Contact letters / Consent forms

CERTIFICATION:
The application for ethical review of the above-named project has been reviewed and the procedures were found to be acceptable on ethical grounds for research involving human subjects.

Approved on behalf of the Behavioural Research Ethics Board by one of the following:
Dr. Peter Suedfeld, Chair,
Dr. Susan Rowley, Associate Chair
Dr. Jim Rupert, Associate Chair
Dr. Arminee Kazanjian, Associate Chair

This Certificate of Approval is valid for the above term provided there is no change in the experimental procedures