

## **Ethics codes as tools for change in public service interpreting: symbolic, social and cultural dimensions<sup>1</sup>**

**Lluís Baixauli-Olmos, University of Louisville**

### **ABSTRACT**

This paper explores the deontological dimension of public service interpreting (PSI) by analysing various documents designed to guide the professional practice of public service interpreters — codes of ethics, standards of practice, etc.—, so as to shed new light on PSI deontology and professional ethics. Ethics has always been a main focus of attention in the discipline. The development of a professional *ethos*, a collective identity forged through practice, is a necessary step — among others — that an occupation needs to take in order to become a fully-fledged profession. Once ‘profession’ status has been gained, the values of such a field of practice and thought become incorporated into the entire social system. This paper will explain how these documents try to set out principles, guidelines and policies in order to effect change. This regulatory effort reflects the aspiration of the professional community to become recognised and established. In order to carry out this research, I analysed the data gathered using the grounded theory methodology. This method led to the emergence of a conceptualisation of the object of study in three dimensions: a symbolic, a social and a cultural dimension. This conceptual structure allows us to understand deontological documents from a sociological perspective that fits well with Bourdieu's theory of practice and its different forms of capital (Bourdieu 1986).

### **KEYWORDS**

Professional deontology, public service interpreting, moral philosophy, sociology of professions, codes of ethics, forms of capital, Bourdieu.

## **1. Introduction**

Codes of ethics and standards of practice for public service interpreters are consistently considered helpful as well as necessary in professionalisation processes (Corsellis 2003; Gentile et al. 1996; Gile 1995; Roberts 1997; Valero-Garcés 2006; Valero-Garcés 2014: 187), because professional “standards constitute a set of recommended best practices that help to define the profession” (Bancroft 2004: 5). It has even been pointed out that “They [codes of ethics] are the framework upon which professions are built. Often codes are what professionals use to make the claim that they are ‘professionals’ and are [sic] often the founding document for a profession, e.g. the Hippocratic Oath” (Gilman 2005: 4). In light of this common depiction of codes of ethics as powerful tools, we speculated that this power had to be rooted in a potential for social change. We set out to answer the following questions: How do ethical codes (try to) change social realities? What kind of change do they strive for? Do they mirror a clear image of the profession? How do they depict it? What specific elements do they refer to in order to shape the context where professional practice takes place?

Our main hypothesis is that codes are indeed intended to transform the social context where the PSI profession exists and they do this by pointing out elements that earn the profession trust and legitimacy. Legitimacy, we posit, is a central notion in the processes of socio-professional change where a profession, in this case PSI, attempts to get recognition, make a space for itself and get organised. In order to reply to some of these questions and to test our hypothesis, we will compare various documents with different scopes and views on the practice of PSI. This comparative analysis allows for the identification of similarities and controversies among the texts, thus making possible the development of an intersubjective version of these realities.

PSI, though as ancient an activity as any intercultural interaction, is a relatively young occupation and an even younger field of study (Vargas Urpi 2012: 50). Nevertheless, this occupation is present and also visible in an increasing number of countries, and the discipline has progressed rapidly in terms of breadth and depth of scholarly debate since the First Critical Link conference in 1995 (Carr and Roberts 1997). Still, some basic socio-professional and ethical issues remain unresolved. These include, for example, how to understand the PSI professional role and whether or not to intervene to adapt register, clarify cultural references or prevent communicative breakdown. The need to dispel some of these doubts and to find a professional identity has given prominence to ethics since the beginning of the Translation and Interpreting Studies discipline, as publications like Koskinen (2000), Chesterman (2001), Pym (2001, 2012), Meschonnic (2007), Hermans (2009) or Baker & Maier (2010) show. Despite all of this work, a broad consensus has not yet been reached. Lack of agreement points to the necessity to count on a more robust body of knowledge concerning how some ethical principles are currently articulated by different institutions and communities and on the weight some values carry in specific contexts.

Therefore, the main goal of this study is to enrich the discussion about the moral dimension inherent in the practice of PSI by providing deontological and sociological insight. We will look at what goals ethical documents explicitly pursue, what content the main ethical principles have and what other elements are covered. In addition to this conceptual clarification, this paper aims to highlight the powerful position codes of ethics seem to possess in transforming the system where a developing profession operates and the greater social systems in which it is embedded.

## **2. Philosophical and sociological perspectives on deontological documents**

The transformative power deontological documents possess can be regarded internally from an ethical perspective and externally from a sociological point of view.

Professional ethics is one of the most prolific fields within the vast discipline of philosophy. It focuses on the reflection upon duties and obligations of professionals (Hortal 2002: 193) and it concerns the moral issues that arise as a result of the specialist knowledge attained by said professionals. One of its goals is to develop a set of common rules —usually captured in written form — for all group members. The study of these rules for professional practice belongs to a subfield within ethics: deontology. 'Professional ethics' and 'deontology' are similar concepts and, in fact, these terms are often used interchangeably. They can also serve parallel purposes, since "In order to describe professional practice it is advisable to combine ethical references with deontological norms and, at the same time, to situate deontological norms in the horizon of ethical aspirations" [our translation] (Hortal 2002: 191). However, it is appropriate to differentiate between the two notions. While professional ethics refers to the desirable and optional good, and emanates from individual awareness and sensitivity, deontology stems from the collective agreement on what goods are required and on what rules practitioners are bound to follow. While morals concern behaviour and ethics concern reflection (about, e.g., professional role or good praxis) upon that behaviour, deontology concerns norms.

There are two main types of documents that lay out professional norms (Bancroft 2004: 15-18; L'Étang 1992; Pöchhacker 2004: 164): *codes of ethics/conduct* – binding, short and containing rather general principles – and *standards of practice* – informative, longer and containing fairly specific guidelines. This classification is congruent with our sample, both in terms of typology and length (see Table 1 below). In our sample we find two codes of ethics (NAJIT, NRPSI) and four standards of practice (NSGCIS, NCHIC, CHIA, IMIA); we find a third hybrid document, ASTM, which contains much more detail than the other documents, referring both to hands-on guidelines, to general ethical principles and to other practicalities of professional practice. In order to define the notion of 'code of ethics', used here as a generic term, we will briefly go through some definitions that have had a certain influence in the field of applied ethics, as presented in Lozano Aguilar (2004). The objectives and functions that codes of ethics fulfil are the following:

1. Influencing worker's conduct and giving a written form to this behavioural change (Stevens 1994, cited in Lozano Aguilar 2004)
2. Influencing worker's conduct with the added notion that this change stems from standards and moral rules (Schwartz 2001, cited in Lozano Aguilar 2004)
3. Reflexively formulating shared responsibilities within an organisation and publicly expressing criteria, values and ends that identify it, with an emphasis on reflection, shared responsibilities and legitimacy (Lozano Aguilar 2004)
4. Institutionally self-adopting a commitment with fundamental ethical pretensions in decision-making, to be expounded both internally and

externally of the collective (Wittmann 1995, cited in Lozano Aguilar 2004)

5. Stipulating what the profession demands of practitioners, what others may expect from practice and what the profession offers to its members (such as identity, cohesion, corporative support, rights and economic resources) (Lozano 2004: 185)
6. Serving the purpose of communication among professionals (what the profession is, what a good professional is) and with society (Lozano 2004: 185)
7. Promoting reflection during the process of elaboration when reaching a consensus and clarifying concepts (Lozano 2004: 185).

While philosophy provides us with a framework of thought to comprehend deontological documents as tools to change conduct within a group, sociology allows a different outward reading of their meaning and significance. These documents are intended to shape the interactions of that professional group with other sectors of society.

The role deontological documents may play in professionalisation processes has been emphasised by a number of authors in many fields of professional practice. Small steps towards professionalisation tend to happen in various areas within the occupation's scope (i.e. training, research, practice, administrative recognition, or 'closure' mechanisms) and through socialisation with other sectors (other professions, training institutions and governments). To complete these stages, the sanctioning of a document that guides professional practice is a key factor because as Tseng points out "The enforcement of the code of ethics is crucial because it functions externally as one of the bargaining chips to earn public trust and internally as an indispensable tool for internal control" (1992: 49). In addition to the intrinsic and extrinsic value mentioned above, codes of ethics can also be useful to resolve a professional vicious circle, such as the one described by Tseng (1992: 44-45), where service provision is not up to standard, and the lack of qualifications, associations or support from public agencies stops professionalisation. In this case, a timely code of ethics or standard of practice may well be of use to reverse it and turn it into a virtuous one. As is evident from this reflection, apart from their obvious ethical nature, codes of ethics can also be regarded from a socio-professional perspective. They have been portrayed as powerful tools for social change in the professional arena. From the perspective of sociology of professions, deontological documents may perform the following functions:

1. Identification and exaltation of the group's contribution to service users and to society (e.g. "Cross-language and cross-cultural communication in a diverse environment is essential") justifying the group's existence and its legitimacy (Abel 1989)

2. Description of the purpose of the document (e.g. "This document has been drafted to offer guidelines for interpreters in order to help them provide quality interpretation services")
3. Endogenous control (Monzó 2002: 58-59) to preserve quality
4. Training and assessment tool (Angelelli et al. 2007: 174)
5. Description of professional *ethos* in order to exclude laypeople and create a monopoly: emphasis is put on independence and autonomy (e.g. "Interpreting is a complex cognitive activity that should only be performed by interpreters, who always act applying their independent professional judgment") (Abbot 1964: 5; Abel 1989)
6. Other issues: accreditation (which gives access to practice), relations with colleagues, professional associations, continued competence (Monzó 2002).

It is relevant to take into account that in both the fields of philosophy and sociology codes of ethics have been problematised by many. But because that is not our purpose in this article, these criticisms have not been considered in depth. A fairly thorough review can be found in Baixauli-Olmos (2012: 114-117, 2014).

### 3. Methods

In order to study PSI codes of ethics, we decided to collect a broad sample of documents. Our initial sample of over 40 documents (selected from contributions like Bancroft 2004: 30-34) was narrowed down with the following criteria: focus on spoken language PSI, relatively recent publication date, publication by active organisation and fairly high degree of concreteness in the guidelines. Our final sample is the following collection of seven deontological documents:

1. California Healthcare Interpreters Association, 2002 ("CHIA")
2. National Register for Public Service Interpreters, 2007<sup>2</sup> ("NRPSI")
3. International Medical Interpreters Association, 2007 ("IMIA")
4. National Association of Judiciary Interpreters and Translators, n/d ("NAJIT")
5. Healthcare Interpretation Network, 2007 ("NSGCIS")
6. National Council on Interpreting in Health Care (USA), 2005 ("NCIHC")
7. American Society for Testing and Materials (USA), 2007 ("ASTM").

For ease of reference, from now on we will be alluding to the texts by using their titles' acronym, found above in quotation marks.

The seven studied texts can be classified according to different criteria: the setting or domain they concentrate on; the type of organisation that publishes them (a professional association, an official body or a standardisation organisation) or the text type (codes of conduct and codes

of ethics, standards of practice); or their length. Each document is categorised according to these criteria in the Table 1.

| DOC.   | DOMAIN  |     |       | PUBLISHING BODY |          |        |       | TEXT TYPE |     |       | PAGES |
|--------|---------|-----|-------|-----------------|----------|--------|-------|-----------|-----|-------|-------|
|        | Medical | All | Court | Assoc.          | Official | Stand. | Mixed | CoE/C     | SoP | Mixed |       |
| ASTM   |         | ✓   |       |                 |          | ✓      |       |           |     | ✓     | 14    |
| CHIA   | ✓       |     |       | ✓               |          |        |       |           | ✓   |       | 87    |
| IMIA   | ✓       |     |       | ✓               |          |        |       |           | ✓   |       | 49    |
| NAJIT  |         |     | ✓     | ✓               |          |        |       | ✓         |     |       | 1     |
| NCIHC  | ✓       |     |       |                 | ✓        |        |       |           | ✓   |       | 16    |
| NRPSI  |         | ✓   |       |                 | ✓        |        |       | ✓         |     |       | 2     |
| NSGCIS |         | ✓   |       |                 |          |        | ✓     |           | ✓   |       | 44    |

**Table 1. Classification of sample.**

Once the sample had been selected, we started to analyse it using grounded theory. This method has been defined as “The discovery of theory from data – systematically obtained and analysed in social research” (Glaser and Strauss 1967: 1). It involves coding the sample and constantly comparing the data and its codification as the basic analytical process. In order to support this process we have used a program called Atlas ti (Scientific Software Development); for reasons of space we will not delve into the specifics of the methodology or the software. After having coded the sample, established relationships between different codes and reflected upon underlying structures, we started organising our results and putting together the reflections that had emerged during the process of analysis. From the beginning of this process two needs arose that would lead to a better understanding of the reality we wanted to dissect. We needed to look into the nature of rules and the various taxonomical levels we were seeing in the sample. We also felt many coded segments, especially in the introduction of the sampled texts, had some kind of a sociological intention beyond the PSI professional community. As a result, we chose to build a theoretical framework around professional ethics and sociology of the professions.

#### **4. Results**

After examining the seven texts, we see that all of them are notably similar in intention and content although different in form. The way the information is most often organised follows a relatively typical pattern: introduction, body (in this case, ethical contents) and other topics. In all three macrostructural components there is a clear intention to produce change. Most introductions refer to: the institution (or institutions) that created the documents, their purposes given the current situation of the profession, the possible uses of the text and the way the information is presented. Within the introductions, two notions seem to have greater relevance as per the

goals of this study: the objectives the institutions that published the texts had, and the possible uses of the documents. In Table 2 we find the most recurrent purposes outlined in the analysed deontological documents.

| CONCEPT                  | CODE  | DOCUMENTS                        |
|--------------------------|---|----------------------------------|
| Consistency              | To provide a common base of understanding   | CHIA, IMIA, NCIHC, NRPSI, NSGCIS |
|                          | To make sure that all those outside the interpreting profession – like the general public, other professions – are clear about what may be expected from it | ASTM, CHIA, NRPSI, NSGCIS        |
|                          | To offer a consistent set of expectations for interpreters  | IMIA, NCIHC                      |
|                          | To provide a coherent picture of the task   | IMIA                             |
| Guidance and information | To serve the general public   | ASTM, CHIA, NRPSI, NSGCIS        |
|                          | To serve interpreters, clients, service providers, interpreting service providers, trainers   | ASTM, CHIA                       |
|                          | To provide information for all those involved in the process (interpreters, clients, service providers, interpreting service providers, trainers)           | ASTM, CHIA                       |
|                          | To provide guidance to interpreters   | CHIA, NCIHC                      |
| Quality                  | To ensure and increase quality interpreting services  | ASTM, IMIA, NCIHC, NSGCIS        |
|                          | To be adopted for performance (self-)assessment and monitoring  | CHIA, IMIA, NCIHC, NSGCIS        |
|                          | To serve as the basis for testing, accreditation/certification  | CHIA, IMIA                       |
| Training                 | To be adopted for training of interpreters  | CHIA, IMIA, NCIHC                |
|                          | To be adopted for training of service providers on how to work with interpreters  | IMIA                             |
| Ethics                   | To set forth fundamental ethical precepts   | NAJIT                            |
|                          | To encourage interpreters to form their own ethical judgment  | NAJIT                            |
| Hiring                   | To be adopted for creating job descriptions and for hiring  | CHIA, NCIHC                      |
| Status                   | To contribute to recognition, acceptance and professionalisation  | NSGCIS                           |

**Table 2. Content of PSI deontological documents: objectives and uses**

Focusing now on the body of the texts, namely their “pure” ethical content, all of them contain guidelines that are classified under some umbrella label. In codes of ethics, these conceptual containers are called “ethical principles;” in the code of conduct, they are named “canons;” and in standards of practice they are labelled as “standards of practice” or “duties.” These guidelines constitute the central contribution of the texts from a deontological perspective, as they are the norms that a certain body puts forward. One document challenges this pattern; ASTM outlines many different issues (related to logistics, responsibilities of different agents, needs analysis) and the code of ethics is merely one section of the document, and not its central part. This differentiating feature seems to suggest that a standardising document like ASTM tries to cover a much

broader spectrum of elements within a field of professional practice than a code of ethics or standard of practice.

The ethical section tends to have several general values encompassing specific guidelines, as is the case in ASTM, CHIA, NAJIT, NCIHC or NSGCIS. Notwithstanding this common trait, in some instances, the ethical information is structured not according to professional values or principles, but rather along different topics. This is the case of IMIA (Interpretation, Cultural Interface, Ethical Behavior) and NRPSI (Competence, Procedure, Ethical Issues). In Table 3 we present the variety of ethical principles, organised according to the number of occurrences.

| CODE                       | TEXT  | DOCUMENT                                      |
|----------------------------|---|---|
| Confidentiality            | Confidentiality                                     | ASTM, IMIA, CHIA, NAJIT, NCIHC, NRPSI, NSGCIS |
| Impartiality               | Impartiality  | ASTM, IMIA, CHIA, NAJIT, NCIHC, NRPSI, NSGCIS |
| Accuracy                   | Accuracy  | ASTM, IMIA, NAJIT, NCIHC, NRPSI               |
|                            | Accuracy and Completeness                           | CHIA  |
|                            | Accuracy and Fidelity                               | NSGCIS  |
| Professionalism            | Professionalism                                     | ASTM, NCIHC                                   |
|                            | Competence  | ASTM, NRPSI                                   |
|                            | Professional development                            | ASTM, NCIHC                                   |
|                            | Maintenance and Improvement of Skills and Knowledge | NAJIT   |
|                            | Continued Competence                                | NSGCIS  |
|                            | Professionalism and Integrity                       | CHIA  |
|                            | Maintains professional distance                     | IMIA  |
|                            | Maintains professional integrity                    | IMIA  |
| Respect                    | Respect   | NCIHC   |
|                            | No discrimination                                   | NRPSI   |
|                            | Respect for individuals and their communities       | CHIA  |
|                            | Respect for Persons                                 | NSGCIS  |
|                            | Deals with discrimination                           | IMIA  |
| Role                       | Role Boundaries                                     | NCIHC   |
|                            | Maintaining Role Boundaries                         | NSGCIS  |
| Cultural competence        | Cultural Responsiveness                             | CHIA  |
|                            | Cultural Awareness                                  | NCIHC   |
| Conflict of interests      | Conflict of interests                               | ASTM, NRPSI                                   |
| Other                      | Limitations of practice                             | NAJIT   |
|                            | Protocol and demeanour                              | NAJIT   |
|                            | Accurate Representation of Credentials              | NAJIT   |
|                            | Impediments to Compliance                           | NAJIT   |
|                            | Limits of intervention                              | NRPSI   |
|                            | Ethical Decision-making Process                     | CHIA  |
|                            | Advocacy  | NCIHC   |
| Respects patient's privacy | IMIA  |   |

**Table 3. Content of PSI deontological documents: Ethical principles**

As we can see, the four most recurrent notions, occurring in seven out of seven documents, are Confidentiality, Impartiality, Accuracy and Professionalism; i.e., all documents list these as ethical principles. The second most recurrent one is Respect (with occurrences in 5/7 documents). These five principles are, according to our sample, the core values of PSI that represent the philosophical good that the profession offers to society. The next few paragraphs focus on the lexical-semantic dimension of the categorisation. Exploring the way principles are named and understood in the sample shows whether there is some consensus or lack thereof on the way ethical principles are conceptualised.

The Confidentiality and Impartiality principles are invariably referred to as such. In this case, there is consensus on their denomination. However, in the case of impartiality, the classification of content was not straightforward, because most documents (NAJIT, for example) understand the notions of impartiality and conflicts of interest under the same principle (typically, impartiality). Some authors (e.g. Hale 2007: 117) have also considered these two concepts as one. Their conceptual proximity is clear, because a practitioner that has a personal interest in the outcome of his professional task is more prone to be partial. This is not the case in ASTM and NRPSI, which separate impartiality from conflicts of interest. This may be due to the fact that the authors of the text want to emphasise the importance of avoiding conflicts of interest, and the specific steps that need to be taken in these cases. Concerning Accuracy, on the other hand, we do find some terminological variation. Accuracy is also referred to with terms like 'completeness' and 'faithfulness' to the source message. As regards Professionalism, there is both lexical and semantic variation. It is used alongside terms like 'competence', 'integrity' and 'professional distance'. Some texts included here notions related to 'skill up keeping' and 'professional development', while others put these concepts under other principles. The term Professionalism could be problematic, as it may be argued that professionalism could be an umbrella term to refer to professional behaviour and should therefore include all other principles and guidelines. Respect shows some variation, although the concept is not subject to much controversy. It is linked to notions like showing respect, not discriminating against anybody and dealing with discrimination. In this sense, the latter seems to suggest an additional duty for the interpreter; it is not only about not discriminating, but also about fighting against it. Finally, it should be noted that only two texts (NCHIC, NSGCIS) include an ethical principle dealing with the professional role, despite this topic being one the most prominent topics in research.

Beside the introductory and core elements, there are many less central but equally significant topics dealt with in the texts with varying degrees of occurrence. It is fairly typical for this type of text to include a terminological section, a bibliography, the qualifications expected from a practitioner and the importance of joining professional organisations (see Table 4).

| <b>CODE</b>                      | <b>TEXT</b>                              | <b>DOCUMENT</b>          |
|----------------------------------|--|--------------------------|
| Terminological clarification     | Glossary                                 | NCIHC                    |
|                                  | Definitions                              | ASTM, CHIA, IMIA, NSGCIS |
|                                  | Terminology                              | ASTM                     |
| Bibliographic references         | References                               | CHIA, IMIA               |
|                                  | Bibliography                             | NSGCIS                   |
|                                  | Referenced documents                     | ASTM                     |
| Qualifications                   | Interpreter qualifications               | ASTM, NSGCIS             |
|                                  | Competence                               | NRPSI                    |
| Professional organisations       | Professional associations                | NSGCIS                   |
|                                  | Become a member                          | CHIA                     |
| Role                             | Roles and Intervention                   | CHIA                     |
|                                  | Role and responsibilities of interpreter | NSGCIS                   |
| Settings                         | Settings                                 | ASTM, NSGCIS             |
| Responsibilities of stakeholders | Responsibilities of providers & clients  | ASTM, NSGCIS             |
| Other topics                     | Needs analysis                           | ASTM                     |
|                                  | Interpreting protocols                   | CHIA                     |
|                                  | Example of an ethical dilemma            | CHIA                     |
|                                  | Group advocacy                           | CHIA                     |

**Table 4. Content of PSI deontological documents: other elements**

Another element that is remarkably prominent in the discipline is the professional role of PSI. However, only two texts (CHIA, NSGCIS) directly address the issue separately, not as an ethical standard, but as an overarching principle, acknowledging its tremendous complexity and offering guidance for practitioners about when to intervene. There are two topics which get less attention but are useful to understand the professional activity in a broader light: fields of activity and responsibilities of the other agents (like clients or interpreting service providers). These are included only in ASTM and NSGCIS, which touch on the great diversity of settings and fields where PSI takes place (and how that affects practice), and also the role that other elements (inside and outside the interaction) have on the success or failure of communication and in meeting goals.

## **5. Discussion**

### **5.1. General observations**

As a first, general point of discussion it is observed that the sampled documents have clearly influenced one another as shown e.g. in the quotations and references among texts. The clearest example of this interweaving of textures is NSGCIS, where the text relationship dynamics are sometimes made explicit with footnotes and bibliographical references acknowledging that flow of ideas, so much so that in a way it is a re-elaboration of previous texts. Such relational dynamics among deontological documents are common practice in all professions (Hortal 2002). It is also noteworthy that there seems to be a historical evolution of texts and in their understanding of the interpreter role. CHIA was the first text to be published in 2002, then NCIHC followed in 2005, and five texts

were published in 2007 (ASTM, IMIA, NRPSI, NSGCIS). Seemingly, the view of the act of interpreting and the role of the interpreter (especially in medical interpreting) has been refined or, it may be argued, narrowed. This may stem from a reflection put forth in NSGCIS, where it is argued that the fact that adopting a broad professional role and “determining how and when an interpreter should intervene” (2007: 20) was more problematic than taking on a narrower message-oriented role.

Although it is clear that there is some communication among the documents, as stated previously, it may also be underlined that they are very diverse in length and content. Two factors may help explain the lack of uniformity in the organisation of content, the considerable number of guidelines and their differing degrees of specificity: the type of texts (code of ethics or standard of practice) and their scope (all fields, medical, legal). The differing scopes may also be the cause of the divergent guidelines regarding, for example, cultural differences or adherence to rules, as cultural issues tend to be more relevant in health care than in other fields and legal interpreting standards focus on following the rules of the court, as stressed by Bancroft (2004: vii). Medical interpreting documents are bound to focus more on culture, while legal ones concentrate upon accuracy of rendition. The texts with no specific field tend to provide a rather balanced set of rules, stressing the importance of accuracy, the need to consider culture and to adhere to rules of the setting where interpreting may take place.

Regarding the macrostructure of the texts, we found mostly convergent but also some divergent pieces of information. Even if it is common for most texts — and not just deontological ones — to be introduced in a similar way (what the text is, why it is produced and by whom), it is proper to highlight that the goals stated by the institutions sanctioning the texts are mainly concurrent. The most common purposes are: increasing quality and consistency, providing information and setting expectations, and serving as training and assessment tools. With respect to the ethical content of documents, it is organised quite similarly: guidelines tend to be classified under principles. However, apart from the introduction and ethical content, there is a high degree of variation regarding what institutions see fit to include in their documents. Many topics dealt with in some texts are not even mentioned in other ones; e.g. a needs' analysis (ASTM), an example of an ethical dilemma and a method to solve dilemmas (CHIA), responsibilities of providers (ASTM, NSGCIS) or professional role (CHIA, NSGCIS). Concerning the microstructure, and focusing only on the ethical content, there is some degree of variation, but there is clear common ground. The core set of principles (impartiality, accuracy, professionalism) is common to most documents, even if a slight disparity can be found in the way they are articulated.

If we look at specific guidelines under the principles we studied more in-depth (accuracy and impartiality) we find some significant disagreements.

For example, explaining and clarifying; not entering into discussion, but asking for clarification, are relatively controversial tenets. A discussion of these can be found in Baixauli (2012). However, after examining both core ethical notions we posit that there is an ethical and philosophical relationship that is essential to them and binds them together: Accuracy requires Impartiality. This notion has also been put forward by Hale (2007) and Miguélez (2003, in Hale 2007). Impartiality is a necessary attitude practitioners need to embrace in order to render accurate interpretations (which seems to be the chief value offered by the profession), the former being a less demanding goal than the latter (Hale 2007: 123). This may be the reason why these deontological documents for PSI invariably refer to the two principles.

Let us return to the point raised previously about deontological documents being criticised by authors (like Wadensjö 1992; Barsky 1996; Kaufert and Putsch 1997; Jacobsen 2002; Angelelli 2004; as cited in Hale 2002: 105) that consider them inapplicable. Even if this is a sign of maturity of the discipline, our findings seem to suggest that these statements do not always pinpoint actual facts (Baixauli-Olmos 2014b), but rather show ideological positions that are arguable, as Hale (2007) very effectively demonstrates. None of the documents in our sample suggests that guidelines must be literally understood or applied. Rather, they recommend the application of professional judgment and common sense and rule out the mechanic application of solutions. If we take NAJIT —for judiciary interpreters— and ASTM —a standardising guide for interpreting services— which may a priori be the texts most in favour of a kind of interpreting seeking literalness, we find that they devote half of the preamble section (ASTM), in one case, and a full section (NAJIT, Professional Judgment Caveat), in the other, to put forward this professional common-sense notion.

In sum, professional rules and guidelines, as presented in codes of ethics, are not to be understood as static notions, but rather as open, adaptive, fluid, progressive, dynamic and changing entities. Although deontological documents are intended to guide professional practice and sometimes can be used as measures for competence assessment or also, in cases of clear breach, as tools for disciplinary measures, they need to be critically adopted and applied, questioned when necessary and open to discussion (Baixauli-Olmos 2014a). Even if ethical concepts are understood similarly in all settings, they apply differently in different settings. Being impartial in a doctor's office is not the same as being impartial in court. Being impartial in an intensive care unit is not the same as being impartial in a mental health therapy session. The interpreter needs to adapt to field, setting and communicative event using their professional judgment, which must always rely on informed reflections based on training and experience.

Codes of ethics and standards of practice are useful but "much more is needed to ensure quality of interpretation services" (Hale 2007: 103). They

are just a tool which moves towards more important goals like building a sense of identity and belonging. Reaching the stage where a code of ethics is drafted requires the reflection upon and adoption of shared, well-considered professional (and often civic) values. In the PSI case, since its activity is necessarily rooted in a diverse cultural and linguistic inter-space, such values or goods tend to be related to enabling unbiased communication. Once the profession stage has been reached, the values promoted by the profession are offered to and assumed by society as a whole and often this entails a process of change.

## **5.2. Ethics codes as tools for social change**

Codes of ethics are textual embodiments of professional power struggles; they represent an attempt to organise market disorder (Tseng (1992) and professionalise the occupation. During the course of this study, it became evident that the professional associations publishing these documents are not only trying to offer guidelines to interpreters, but they also attempt to move the field from professional heteronomy to autonomy. When it dawned on us that it was power we were talking about, we looked into conceptualisations of power struggles and one intriguing approach seemed to partially integrate the various categories into one theoretical model: Bourdieu's theory of power and practice, especially the different forms of capital (Bourdieu 1986). This theory came to bridge two fields we had already been working on: philosophy and sociology. We will briefly refer to his theory to explain our results, but will not delve into its specifics.

Bourdieu understands "capital" not only in the general sense of the word as material possessions — which he would call "economic capital" —, but also as other kinds of assets that have an impact on an entity's interaction with other elements of social space. He distinguishes between social capital (materialised in contacts, social networks, cooperation...), cultural capital (knowledge, skills, education, quality of speech...), and economic capital and symbolic capital (prestige, honour, status, reputation). So, going back to our textual power struggle line of thought, and taking on board Bourdieu's terminology, we argue that, in a way, the sanctioning of an ethics code represents a strategy to gain power through an accumulation of capital at "institutional and symbolic" levels (Gilman 2005: 5) and also in a third cultural dimension. In Bourdieu's theory on capital there is a fourth form of capital, the economic one, which we have excluded from our analysis, as in our sample references to economic capital are minimal. We nevertheless posit that references to good working conditions (see Figure 1) implicitly refer to this notion. Another consideration in this respect has to do with the fact that the goal of increasing economic capital usually entails a loss of symbolic capital. There is, in contexts like this, an inversely proportional relationship between economic and symbolic capital. It is often not considered good taste to say that you want your professional

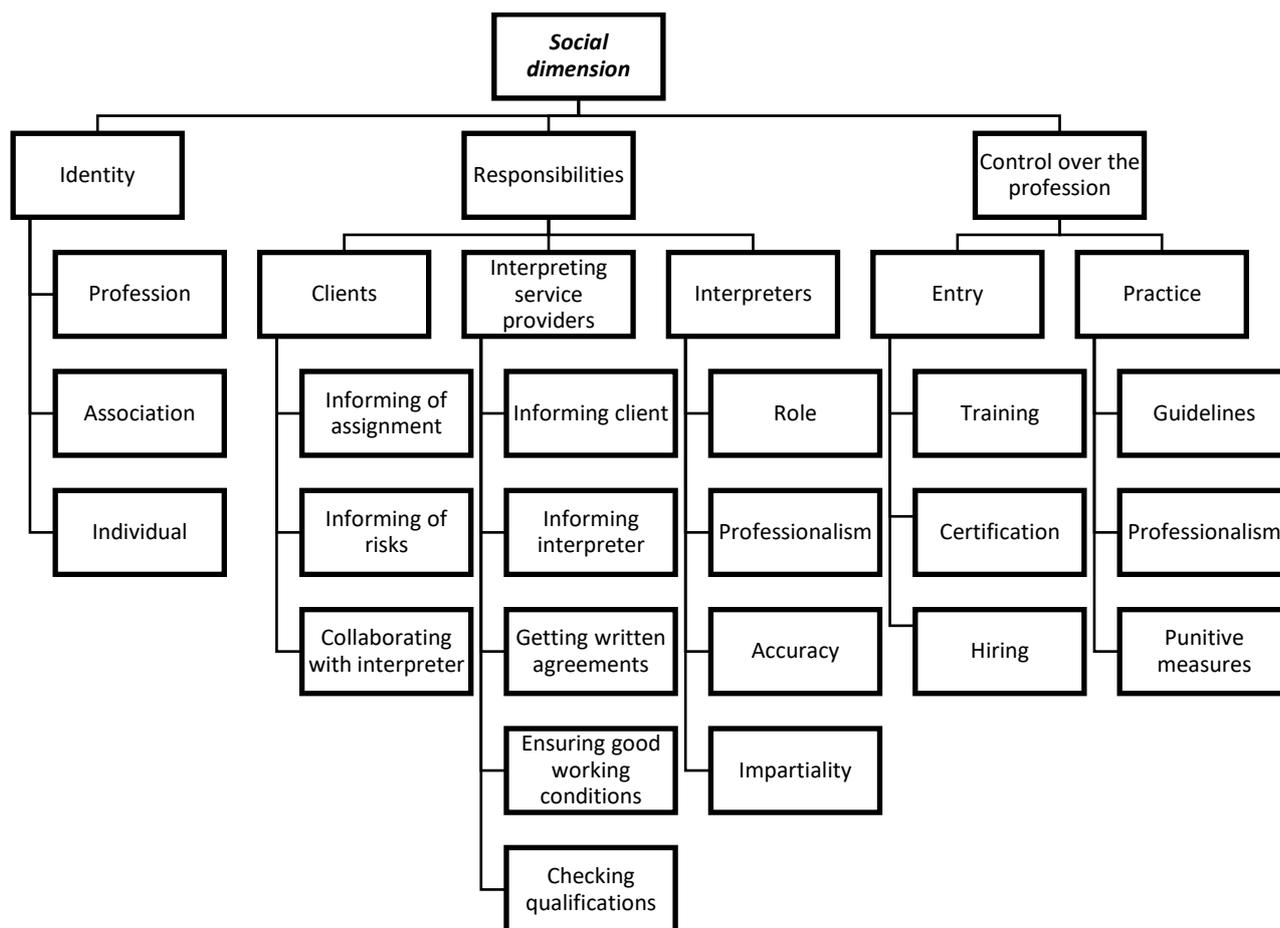
community to receive greater payments, and we consider this to justify why references to economic changes are not easy to pinpoint.

From the social perspective, "(...) codes articulate boundaries of behavior as well as expectations for behavior. That is they provide clear markers as to what behavior is prohibited (...) and what behavior is expected (...)." (Gilman 2005: 5). These limits are linked to values, which are in turn linked to an ethos, which is the cornerstone of identity. Value scales reflect a certain ideology of the professional associations that publish the text and very often these translate into political stances and sometimes conflict with regard to the role of the professional community in attaining social goals beyond the realm of that specific association —goals like better healthcare, justice for all, fairer societies.... In this connection, codes of ethics are conscious and deliberate mirrors of the ideology of associations, and do not necessarily try to reproduce actual practice; as such, they reflect the professional organisation's vision, a fact which would call into question some scholars' criticisms of the lack of empirical grounding of such codes (e.g. Angelelli 2006: 191).

Besides establishing the identity of the association, we identify two other social factors in our sample that seem to be central to the life of the PSI profession: instituting the entry avenues into the social group (in this case through training and/or certification) and defining what 'good' professional practice is — as specified in the guidelines under each ethical principle but more prominently under Professionalism. Although it is not clearly stated, it is implied in some documents that interpreters' failure to comply with the requirements may result in some kind of disciplinary action, which could have as a consequence their expulsion from the profession, thus closing the entry-practice-exit cycle as portrayed in Figure 1. But codes are not unaware that practice is conditioned by the environment and the intervention of other stakeholders, and that is why we find that codes try to put the burden of the encounter's outcome mostly, but not solely, on the interpreter. For that reason some texts specify the responsibilities of the client (the commissioning party) and the interpreting service provider ('ISP' from now on) (the company through which the PSI delivers their services). The interweaving of responsibilities and relationships accounts for the complexity of the task and the interdependency of the different agents for a satisfactory encounter and clearly signals the need for establishing convergent goals and strategies. This is exemplified by the notion "collaboration with interpreter" in Figure 1; the ISP is expected to inform the client on how to effectively work with the interpreter, and the client should carry out those actions; the interpreter is expected to fulfil his or her role, after having received information of the assignment from the ISP (who had originally received it from the client); and the interpreter should also clarify the role to the client and user during the encounter.

As far as expectations are concerned, we see that the specific goal to set clear, fair and realistic expectations mentioned in most documents (see Table 1), is explicitly (“interpreters will only interpret”) or indirectly referred to (“ISPs will offer information to clients to work effectively with interpreters”). In reference to expectations and responsibilities, as it was just explained, they are set out for three groups. The social activity is initiated by a client who has a twofold duty: informing the ISP of the assignment and the potential risks involved in it, and collaborating with the interpreter (after being briefed by the ISP). Then, the ISP is the relay piece of the mechanism and is expected to fulfil three duties: informing (the interpreter about the assignment and the client on how to work with interpreters), ensuring quality (by checking interpreters’ qualifications and offering good working conditions and pay) and coordinating accountability (getting agreements prepared and signed). Interpreters are the last element of this cycle and their duties tend to be explained in the ethical section, where we find fairly clear guidelines, usually addressing only interpreters. The most relevant PSI principles of performance in relation to the interpreters’ interaction with other agents are primarily ‘professional role,’ ‘accuracy’ and ‘impartiality.’ That is, interpreters have to fulfil a social function embodied in role, which elementarily consists of rendering accurate interpretations and behaving with impartiality.

Codes try to facilitate an environment that is conducive to accurate communication by emphasising the interpreter’s obligation to provide adequate services and also by setting clear responsibilities on the part of the various agents and protecting PSI practitioners from unfair working conditions. These notions are made explicit in sections outside the ethical contents (ASTM, 8. Interpreter Qualifications; NSGCIS, 8. Role and Responsibilities of Interpreters). Once responsibilities are explicit in written form, everyone is accountable for their (in)actions. This contributes to clarity and organisation, as using a code of ethics to clarify the role of professionals and regulate the relationship between them and the agents they work with helps to organise interpreters’ socio-professional life. The agency doing this — in most cases in our sample, professional associations — has therefore a great deal of power in managing professional contact and establishing what the “right” way to interact is. The fact that associations are at the summit of this critical decision-making process is implicit but pervasive. This position of power should be closely monitored to avoid abusive practices (ideological or otherwise) and criticised and contested if there are no collegial discussions or decision-making fora whereby individual members can collectively shape the decisions of the professional body. Although this discussion is beyond the scope of this article, Habermas’ theory of communicative action and discourse ethics (Habermas 1987) deal with this topic at length.



**Figure 1. Social dimension of PSI codes of ethics**

In Figure 1, we have tried to visually represent the different factors that make up the social dimension of the PSI codes of ethics. We can also look at codes from a more symbolic perspective. Because “Subscribing to institutional codes is the way we define a model professional not only as we see ourselves but as we want to be seen by others” (Gilman 2005: 5), it is pertinent to look at how the documents try to earn greater legitimacy for the professional community behind them. When we refer to symbolic capital or the symbolic dimension of professional practice, we refer to reputation, recognition and acceptance. The sole fact that a professional body chooses to undertake the task of developing an ethics code is in itself an act of legitimation (Long and Driscoll 2008), because societies tend to see this as an exercise of openness, professionalism, uniformity and goodwill, and also due to the fact that it sets clear expectations for everyone to understand.

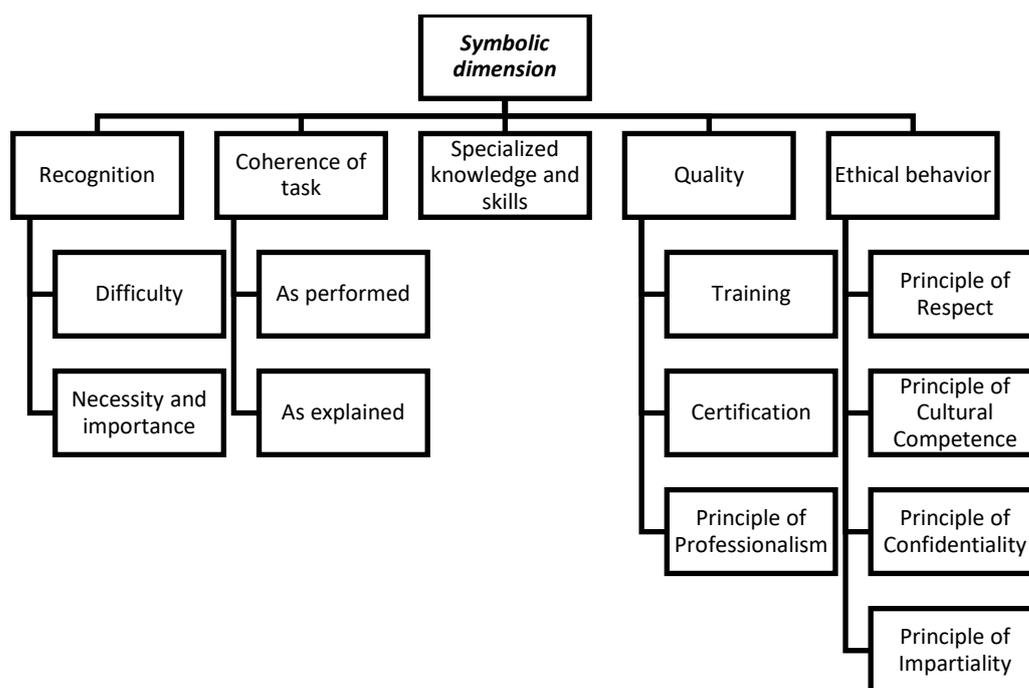
The contents of the studied texts that, in our view, are intended to improve the public’s perception of the profession are mostly included in the sections that cover the objectives, although some ethical precepts are also important. The notions we will be touching upon are recognition, coherence of the task and ethical behaviour. Professional associations try to facilitate recognition of the professionals’ task by underscoring the necessity of reliance on those services (“effective healthcare in a multicultural society will not happen without interpreters”), the importance of the task

("interpreters allow patients to have their own voice, understand treatment and be autonomous") and the inherent complexity of the task (with respect to cognition, interpersonal relations, cultural differences, speed of delivery and gravity of decisions). They also refer to consistency and coherence of both the way the task itself is performed and the way it is explained and perceived. Some organisations emphasise the need to increase coherence and argue for the redressing of unequal or incoherent levels of performance in different regions or settings. Clearly expressing what all practitioners need to know and have to do is an effective way to try to solve the problem. Making benchmarks explicit is a good case in point of the organisation's will to implement change by striving for congruity and hence, potentially, recognition.

Another accepted measure of the stature of a profession is the attainment of a satisfactory level of mastery of a specialised body of knowledge and a set of skills. This notion is closely related to the cultural dimension (illustrated in Figure 3, below), covered in the next paragraphs. Quality is a fundamental measure against which professions distinguish themselves from occupations. There are two mechanisms to preserve quality in the sampled documents: training and certification tests. Another notion is of utmost importance after entry into the profession: a relatively high level of professional performance, chiefly represented in the ethical principle of 'professionalism.'

Finally, the PSI profession is more likely to be well regarded when its members have sound ethical foundations learned through socialisation processes (training, contacts with other interpreters and professionals of other fields, professional experience...) and study of the norms they are expected to abide by. As we will see later, this last notion binds together the very existence of the ethics code with the cultural dimension of professional practice. These solid ethical foundations are reflected in ethical principles that try to ensure that the task is carried out effectively (preserving accuracy, using auxiliary resources like managing turn-taking or dealing with personal or cultural conflict), that there is no visible bias on the part of the interpreter and that everyone is treated respectfully by the interpreter. The ethical principle of Respect, together with Cultural competence, are important civic principles rooted in a shared value system that cherishes respect and diversity, and therefore have a great symbolic load attached to them. Following agreed protocols to deal with duties related to confidentiality (appropriately getting rid of notes after an encounter, not mentioning cases by identifying users...) is key to earning trust, both in the eyes of the user and in the eyes of the other professionals offering their services, as they are likely also bound by regulations that try to protect the right to confidentiality.

In Figure 2 we present a diagram representing the symbolic dimension of the PSI codes of ethics.



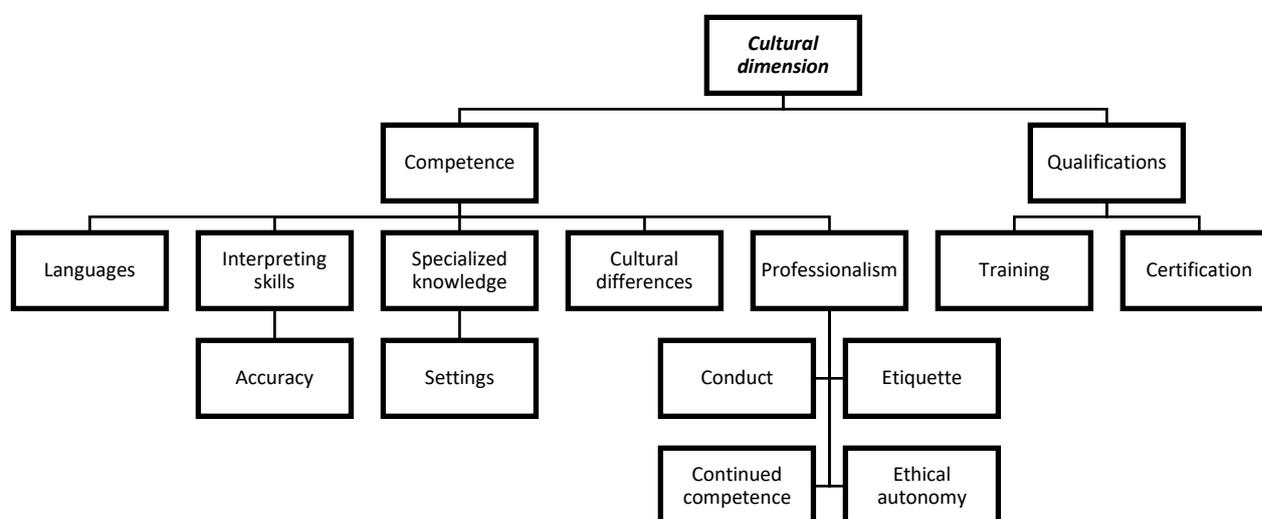
**Figure 2. Symbolic dimension of PSI codes of ethics**

The third and last dimension we consider in this article is the cultural dimension. The cultural capital is the set of skills and the body of knowledge of a social group. Within that body of knowledge, understanding of the code's ethical principles, tenets and application is seen as a key factor. As briefly mentioned above, the very existence of a code of ethics constitutes a cultural asset of a given profession and, in fact, codes are often used to assess knowledge and skill. Frequently they include a tenet that specifies the need for practitioners to know and understand the contents of the code(s) of ethics of their field. A clear example of this is IMIA, whose guidelines are presented as a performance quality measuring tool.

In our analysis we have organised the contents related to cultural capital into three groups: competence, qualifications and terminology. The sample shows a relatively high degree of coincidence in the competences required of practitioners: mastery of working languages and interpreting skills; understanding of the setting and its specialised language and terminology; awareness of cultural differences and how they may impinge on the nature of the setting itself and on the way different people communicate. Interpreters are also expected to show adherence to what is understood as professionalism in the context where they practice. Professionalism has four facets: being it (adequate professional role, respect for the limits of performance, respect for participants' rights to confidentiality or impartiality), showing it (formalities like the clothes, punctuality or showing respect), maintaining it (continued education and training) and reaffirming it (ethical autonomy to explain duties, affirm role or challenge the normative framework when necessary due the nature of a situation).

The most important element of the cultural dimension of codes of ethics, in our view, is related to the qualifications members of the group need in order to attain a certain level of performance through training and certification examinations. This step has positive effects on the profession on the three levels that we have been studying: cultural (those who pass a test in theory master a body of expert knowledge and skills), social (those who come in have been filtered) and symbolic (those who pass a test are most often good professionals). It must be noted in this connection that certification is often administered by the organisation sanctioning the document or by a sister organisation.

In Figure 3, we present a diagram that summarises our interpretation of the cultural dimension of codes of ethics in PSI.



**Figure 3. Cultural dimension of PSI codes of ethics**

## 6. Conclusions

Codes of ethics are the crystallisation of ideology and the political aspirations of professional organisations. As we have shown, deontological documents can be regarded from sociological and philosophical perspectives. This dual approach in understanding this type of document adds to the discussion around their professionalising power and sheds new light on their conceptualisation. We have found that professional organisations publish such documents in order to transform and organise the field in a certain way. The professional organisation's capability to produce change depends on the capital, in Bourdieu's terms, they have accumulated. We contend that this accumulation of capital takes place in the context of professional conduct documents by making reference to notions that benefit the profession or the organisation by earning them recognition, trust, legitimacy. We have structured our discussion of these notions around three forms of capital: social (identity, stipulation of responsibilities and control over the profession), symbolic (recognition, coherent practices, specialised knowledge, quality and good behaviour) and

cultural (competence and qualifications). We have left out the economic dimension of capital of this study, although it is a promising line of future research when exploring the role of ethical documents in professionalisation processes. Economy is central to these processes: a good case in point are certification efforts, as certification is a huge investment for professional bodies, and it has the potential to bring both individual and collective financial gains, apart from the positive impact it may have on the other forms capital.

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## Biography

Lluís Baixauli-Olmos completed his PhD at the Universitat Jaume I (Spain) in 2012 with a study on interpreter ethics and its application to the prison setting. He is currently Assistant Professor of Spanish and Translation & Interpreting at University of Louisville. His research interests include: public service interpreting, cognition of interpreters, intercultural communication, professional ethics, moral philosophy, the sociology of professions.



Email: [lluis.baixauliolmos@louisville.edu](mailto:lluis.baixauliolmos@louisville.edu)

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