

Cultural mediators in Italy: a new breed of linguists

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Abstract & Keywords

English:

While most countries have developed accredited, certified interpreting services to facilitate communication between migrant populations and public service providers, in Italy service providers turned to the associations created to assist the migrant populations. Rather than just interpreting, the people sent by the associations also wished to act on the migrants' behalf as cultural mediators. The guidelines put forward for the professional profile and training of this figure include an unrealistic array of tasks, including interpreting, for which no specific training is provided. The need to involve universities in the training of cultural mediators is most apparent as regards their role as interpreters. Universities have been monitoring this new breed of linguists through research work. This study of mediated healthcare encounters shows how cultural mediators tend to assume conversational dominance and/or proxy roles, with interaction often becoming dyadic, to the exclusion of the patient.

English:

A fronte dei crescenti flussi migratori molti paesi hanno sviluppato dei sistemi di accreditamento e certificazione degli interpreti la cui opera rende possibile la comunicazione tra i migranti e i servizi pubblici. In Italia questo compito è svolto prevalentemente da persone appartenenti alle associazioni di volontariato che assistono i migranti e che hanno assunto il ruolo di mediatori culturali. Le linee guida emesse dal CNEL relativamente alla mediazione interculturale comprendono una lista di compiti molto variegata che include l'interpretazione, per la quale, fino ad ora, non è stato fatto molto in termini formativi. Le università, che hanno partecipato ben poco alla formazione dei mediatori culturali, stanno attualmente offrendo il loro contributo in termini di ricerca. Attraverso l'analisi di incontri medici con pazienti migranti in cui il mediatore culturale assume un ruolo dominante, trasformando spesso l'interazione da triadica in diadica ed escludendo la "voce del migrante", questo contributo sottolinea la necessità di una formazione specifica volta a sviluppare le competenze comunicative e interpretative per i mediatori culturali.

Keywords: cultural mediators, migration flows, conversational dominance, interpreter training, interpreting studies, community dialogue public service interpreting

1. Introduction^[1]

In Italy the professional activity of facilitating communication between the country's rapidly growing migrant population^[2] and public service providers has mainly been carried out by cultural mediators^[3] rather than by the community/public service interpreters used in English-speaking countries (Merlini, 2009: 57-58). In order to understand why this figure has emerged with such force in Italy^[4], it is essential to first of all take a look at Italy's recent past. Until 1971, Italy was a country of emigration rather than immigration – at times of extremely large-scale emigration^[5] – and there had never been any real need for an immigration policy. Consequently, when, during the 1970s, Italy started to become a country of immigration, no immigration policy had been planned. Immigration was a result of the country's changing demographic situation (an ageing population due in particular to the extremely low birth rates) and a relatively high level of prosperity, which meant that Italy's industries started to have difficulty in finding all the workers they needed. As a result, workers began arriving from outside the European Union to meet this unanswered demand. Their arrival occurred in a totally unplanned way and not all the migrants who arrived in Italy were able to find jobs while many of those who did were without regular residence permits, giving rise to a number of problems of law and order.

2. The first immigration laws

Immigration became a major political and mediatic issue during the 1980s, resulting in the introduction of Italy's first immigration law in 1986 (Law 943/1986).^[6] The aim of this law was to regulate the flow of future immigrants and to regularise the situation of non-EU citizens already working in Italy. The Government, under pressure from the country's industries, agreed to give an amnesty to those workers without residence permits but with stable jobs, which resulted in 105,000 irregular migrants acquiring legal status in 1986. This law was quickly followed by the more restrictive Martelli Law on immigration (Law 39/1990),^[7] which nevertheless resulted in the position of a further 220,000 irregular migrants being regularised in 1990 (Carfagna, 2002: 56). In addition to regulating the flow of non-EU citizens into Europe, these two laws, in accordance with ILO Convention 143 of 1975, also recognised the rights of regular workers and their families to full access to health care, social services, education and housing (Article 1 of the 1986 Law). They also recognised the right of these workers to family reunification (Article 4 of the 1986 Law). As a result, Italy's public service providers suddenly found themselves inundated with requests from large numbers of immigrants, many of whom, above all the women and children arriving through family reunification, had little or no knowledge of Italian. No thought had been given in either of these two laws, however, to the provision of translation and interpreting services to assist public service providers, nor were any specific funds allocated to provide such services. The *ad hoc* interpreting solutions that had been used until then (relatives, fellow migrants, etc) were no longer able to cover the increased demand for interpreters and so the public service providers turned in desperation to the many religious and non-conessional associations that had been set up to help the migrant population and promote their integration in Italian society.

3. The role of civil society organisations

Civil society organisations became the first providers of language services for migrants accessing Italy's public services. The people these organisations sent to assist the public service providers were not trained interpreters, but members or friends of the associations (often fellow migrants) who did not just interpret for the newly-arrived migrants, but also pursued the goals of these voluntary organisations by supporting the migrants, advising them and helping them to claim their rights, basing their role on empathy and advocacy. According to Capitani this linguistic and cultural mediation began in the larger towns and cities of Northern Italy at the beginning of the 1990s, "initially as a creative and self-organised solution to help public sector workers (in education, health and the social services) look after foreign public

numerous different tasks, which were often negotiated directly by the various public service providers with individual mediators or their organisations (Albertini et al, 2010: 17). The use of cultural mediators began to spread all over Italy as a result of the growing influx of non-EU citizens and, above all, the usually non-Italian speaking women and children arriving through family reunification, who placed a tremendous strain on the public health and education services in particular because of maternity issues and compulsory education. The training (if any) that the cultural mediators received and the tasks they were called upon to perform differed enormously “from region to region, between cities within the same region and sometimes even between different services within the same city”^[9] (Albertini et al, 2010: 18). Moreover, the training was provided almost exclusively by the organisations that supplied the public services with these cultural mediators (Albertini et al, 2010: 35). According to Favaro (2010), the first course to train cultural mediators to work with public service providers was organised by the association Naga^[10] in Milan in 1990, while the first serious proposals to define their professional profile and training were put forward at the seminar *Immigrati/Risorse*, organised by the association COSPE^[11] in Bologna in 1993. There were many other conferences and publications concerning cultural mediators during this initial period, with a very wide range of ideas expressed. The main players remained the Italian NGOs and local authorities, with central Government a more or less distant onlooker.

4. Cultural mediators officially enter public life

The first reference to cultural mediators in an official Government document was made in a 1990 circular issued by the Ministry of Education, calling on state schools to use cultural mediators to help integrate foreign children, but the circular made no mention of any skills or qualifications that these mediators should possess. It was not until the introduction of the more complete Turco-Napolitano law on immigration in 1998 (Law 40/1998)^[12] that a more specific mention was made of cultural mediators. Article 40 stated that cultural mediators (explicitly foreigners) should be used by public administrations to facilitate relations between service providers and foreigners from different ethnic, national, linguistic and religious groups, and that these cultural mediators would be provided by third-sector organisations (Merlini, 2009: 59). Significantly, this law also specified the need for “trained cultural mediators”, implying that in many cases improvised volunteers were being used (Albertini et al, 2010: 19). There was a certain ambiguity, however, as while “trained cultural mediators” were specifically mentioned in Art. 36 in relation to education, they became simply “intercultural mediators” in Art. 40 relating to the integration of foreigners into society in the only other reference to these mediators.^[13] Despite this official recognition of cultural mediators, there remained (and still remains) a complete legislative void at a national level with regard to the role, tasks and training of cultural mediators. As a result, regional and local authorities introduced their own legislation, regulations, rules and guidelines on cultural mediators, with enormous differences.^[14]

5. What training for cultural mediators?

The first national guidelines concerning the professional profile and training of cultural mediators were proposed in 2000 by the Italian National Council for Labour and Economic Affairs (CNEL) after consultation with the associations providing cultural mediators and the institutions using them. Merlini has already described several of the shortcomings of these guidelines, which paint a rather idyllic picture of cultural mediation as something that constructs “an ‘in-between space’ where mutually enriching exchanges between migrants and natives may bring social change and cultural transformation” (2009: 59). With regard to the training proposed for cultural mediators, Merlini also highlights the very “diversified” list of topics (including communication theories and techniques, and interpreting techniques) they are expected to study in a first-level course of 500 hours, at least one third of which should be spent in a job placement (ibid). It should also be noted that the CNEL’s document stated that training should be provided by regionally accredited “training agencies”, with priority given to those “training agencies” that had already successfully organised courses in the past, namely the voluntary organisations. Since then several other documents have been published on the training of cultural mediators, the most recent of which is “Guidelines for the recognition of the professional figure of intercultural mediators”, produced by the Ministry of the Interior’s Institutional Working Group for the Promotion of Intercultural Mediation, published on 21 December 2009.^[15] The skills and competences listed to be achieved during the first level course are mediating, providing guidance, accompanying, informing, interpreting, and welcoming, developing the ability to listen and understand, communicate, recognise people’s needs and resolve conflicts. The second level focuses more on project development and management, training (also of service providers) and consultancy. These guidelines, issued after consultation with virtually all the stakeholders,^[16] still contain a perhaps slightly idyllic vision of the role of cultural mediation in the process of integration of migrants, but the tasks expected of cultural mediators are much clearer and also far more realistic. The document also acknowledges that cultural mediators can have very different tasks depending on the geographical areas and service sectors in which they work, with a fairly detailed list provided of the different tasks they can be expected to perform in each sector (education, health, legal etc).

6. The role of universities in the training of cultural mediators

One innovative aspect contained in the document issued by this Institutional Working Group is that for the first time the role of universities in the training of cultural mediators is specifically mentioned, with the document highlighting the reasons that have so far prevented universities from being the most appropriate setting. The major criticisms are that the undergraduate and postgraduate courses currently offered by Italy’s universities have little or nothing to do with the kind of mediation that cultural mediators are called upon to perform in their role as “bridges” between migrant service users and public service providers. They also fail to cover the “minority” languages of many of today’s migrants while the courses tend to be too theoretical, with usually no real-life practical work experience included. Most importantly, migrants have limited access to these courses as they last too long and are too expensive, in addition to the problems migrants often have of getting their qualifications recognised. As mentioned in the previous paragraphs, academic institutions played little or no part in the initial training of cultural mediators, which was carried out almost exclusively by the voluntary organisations in collaboration with regional and local authorities. When universities finally did enter the scene after the university reform in 2000, which introduced undergraduate degree courses in Mediation Studies, they were not very effective as Luatti – one of the most prolific authors on cultural mediation – states (Albertini et al, 2010: 166):

The lack of congruence between the tasks that graduate mediators are asked to perform and the curricula of the degree courses in Mediation would seem to indicate that universities entered this field rather hastily, without giving too much thought to the content of these courses.^[17]

Indeed, numerous Italian faculties that had previously offered degree courses in Modern Languages suddenly began offering degrees in Mediation Studies, initially by recycling existing courses in language, literature and history, taught by the same academic staff, where often only the titles of the courses changed (not the content), and with the addition of a couple of courses in dialogue or consecutive interpreting. This was not true of all faculties, however, and many other faculties have since adjusted their courses.^[18] This is recognised by Luatti, who in the same paper (Albertini et al, 2010: 167) states that in the last few years universities seem to have corrected their approach by introducing work placements and topics that are more relevant to the tasks of cultural mediators and by creating forms of collaboration with the third sector. As mentioned before, the section devoted to the training of mediators in the guidelines issued by the Italian Ministry of the Interior (2009: 15) for the first time explicitly mentions universities as the right institution for high-level training in the field of intercultural mediation once the problems concerning the access of migrants to the courses and the relevance of what is taught and how have been overcome.

7. Interpreting skills: a must or an option?

The need for the involvement of universities in the training of cultural mediators becomes most apparent with regard to the cultural mediators' role as interpreters since the voluntary organisations and local authorities that organised the first training courses very often either took for granted or completely neglected interpreting skills. Conversely, the task of interpreting is acknowledged as being one of the primary tasks of cultural mediators in all the main documents containing guidelines (CNEL 2000 and 2009; the Ministry of the Interior's 2009 guidelines; and the cultural mediators' profiles issued by Regional authorities). The importance of interpreting in the work of cultural mediators is also acknowledged by those people who would like to see cultural mediators have a greater role of advocacy (Albertini et al, 2010: 17). Yet, even these latest greatly improved guidelines, presumably as a result of the twenty year's experience that has been gained from working with and training cultural mediators, invite the same observation of "ill-informed and untenable views" made by Merlini (2009: 58) with regard to the text that was published on the Ministry for Employment and Welfare Policies website in 2003. The new guidelines state that the definition of the cultural mediator's role depends on how central "linguistic interpreting" is to her/his job, as opposed to cultural and social tasks, adding that it is essential not to confuse:

Linguistic interpreting [...] with classical interpreting, based exclusively on the faithful written and oral translation of language, as performed in tourism, the business sector or situations in which the rendering of the literal meaning of the signifiers is of primary importance. In the case of mediation, linguistic interpreting must take into account variables and nuances which in interpersonal communication must be sought for in cultural, ethnic, religious, gender and life-experience differences, especially in relation to migration. (2009: 12)[19]

This theoretical confusion with regard to interpreting reveals the lack of involvement of any academic interpreter training institutions in the drafting of the guidelines. This confusion emerges again when the document defines the specific goals for each of the seven macro areas in which mediators operate.[20] The first goal for cultural mediators is a rather bewildering: "social, linguistic, meta-linguistic and cultural interpreting" (2009: 12). Moreover, although interpreting or interpreting techniques appear in all the guidelines concerning the training of cultural mediators, it appears that interpreting is often not taught at all during the courses (Merlini, 2009: 61), or at best just a few hours are devoted to theoretical aspects.[21] This was also highlighted by Luatti (Albertini et al, 2010: 178):

Very little importance is usually attached in training courses to the theory and practice of translating and interpreting, and it is assumed that after learning the basics of communication theory one becomes a natural expert in culture and translation. There have been numerous cases during the last few years in which underestimating this aspect has had negative consequences on encounters between service users and service providers.[22]

It is precisely to attempt to take stock of the possible problems encountered in the daily practice of cultural mediation that research has been conducted in Italy, mainly by academic institutions.

8. The AIM research project on cultural mediation

As is clear from the evolution of cultural mediation in Italy, universities have so far played little or no part in the training of cultural mediators, but have been "followers" trying to monitor and/or investigate this new breed of linguists through research work. The AIM (Analysis of Interaction and Mediation) consortium, which brings together researchers from eight universities[23], aims to collect, transcribe, pool and analyse data of mediated encounters in public services in order to gain a deeper insight into how cultural mediators currently work and to identify areas where there is room to improve their skills. So far AIM has collected 194 mediated interactions, mainly in health care settings and removal centres. For the purpose of this paper 92 mediated health care encounters were examined. These encounters took place in a gynaecology and family planning clinic and a general medicine clinic in Northern Italy. The participants were five female cultural mediators (four from Nigeria and one from Ghana, all of whom spoke English and Italian), Italian-speaking doctors (who in some cases also had some knowledge of English) and migrant patients, mainly from Nigeria and Ghana, with little or no knowledge of Italian. Three-quarters of the patients were women. The principal focuses of the encounters at the gynaecology and family planning clinic were pregnancy checks, contraception prescriptions, neonatal dismissals and gynaecological examinations, while the main concerns at the general medicine clinic were orthopaedic check-ups and occupational diseases. The encounters were transcribed following conversational analysis conventions.[24]

9. Data analysis

The transcribed encounters were analysed turn by turn in order to identify recurrent features in participation structure. One striking feature was that migrant patients rarely participate as actively as the other participants and, conversely, that mediators tend to play the leading interactional part by assuming conversational dominance and/or proxy roles. The concept of conversational dominance has been developed by Linell and Luckmann (1991), who define three different types of dominance: i) quantitative dominance, referring to the quantity of speech produced; ii) topical dominance, in terms of the introduction of new concepts and referents; iii) and interactional dominance, seen as dominant behaviour in directing interaction. Mediators instead act as proxies when they speak for and about another participant who is present in the interaction and could speak for her/himself. In the following sections two encounters will be analysed to illustrate the assumption of conversational dominance and proxy roles by mediators.

10. Conversational dominance

Many of the conversational initiatives taken by the cultural mediator and the alignment of the doctor to these initiatives result in all three types of dominance over the migrant patient, as in the sequences below taken from an encounter at the gynaecology and family planning clinic. The patient has come to see the doctor because of genital discomfort. During this encounter the doctor also tries to understand what type of contraception the patient is using and whether the patient is complying with the prescription she was given in the past. The doctor (G) has some knowledge of English, but switches to Italian from time to time. Both the patient (P) and the mediator (M) speak English as a second language.

Example 1 60. G: Usa il condom lei di solito? *does she use a condom usually?* 61. M: Do you use condom normally? 62. P: No 63. M: You don't use condom? so what do you use to avoid pregnancy? 64. P: [I think / 65. G: [Sta prendendo Arianna *she is taking Arianna* 66. M: Ah / 67. G: Are you taking pills? 68. P: Yes In this excerpt the mediator starts by translating the doctor's question, but then, after the patient's reply, she takes the initiative with a follow-up question about what type of contraception the patient is using. The patient attempts to answer, but the doctor, who has her medical records in front of him, answers on her behalf that she is on the pill. He then asks her in English to confirm this. This sequence suggests that neither the doctor, nor the mediator is interested in listening to the *voice of the patient*, but merely in obtaining the information necessary for the encounter to proceed. It also suggests, however, that the doctor feels the need to share information with the mediator by answering a question which the mediator had asked the patient on her own initiative.

Example 2 69. G: Ok (.) quindi il suo partner non si è mai lamentato di bruciore? *Ok (.) so her partner has never complained about a burning feeling* 70. M: Did your boyfriend have pain or burning? 71. P: No 72. M: Does he scratching? do you feel itchy? (05) 73. P: No 74. M: No 75. G: Va bene ok (.) facciamo la visita allora adesso eh? *all right ok (.) let's do the examination now then eh?* 76. M: Go there and remove your trousers In example 2, which continues the exchange in example 1, a similar use of follow-up questions can be seen. The patient answers the doctor's question translated by the mediator, but in turn 72 the mediator asks more or less the same question again. The doctor closes the topic by signalling that he has understood and accepted the patient's answer and is ready to examine her.

Example 3 77. G: A che punto è della pillola adesso? *where is she with the pill now?* 78. M: How long have you / when did you start taking this pills? this month questo mese? 79. P: This month (.) no I don't take it this month 80. G: You are no

taking this month? 81. M: You stop taking it? 82. P: Yes 83. M: When? 84. P: This month 85. M: You stop this month? 86. P: Yes 87. M: Are you afraid get pregnant? no? you don't use condom you stop taking pills (.) want to do abortion? so what's your plan? 88. G: Vuoi riprenderla? *do you want to start taking it again?* 89. M: You want to start taking the pills again? so why did you stop? it was finished? ((P nods)) 90. G: Ok 91. M: You are not saying the truth. how about? (.) lay down lay down 92. G: No se ha sospeso perché non aveva più la prescrizione(.) è un problema è un discorso *no if she stopped because she no longer had the prescription (.) it's a problem it's a different story* 93. M: Sì yes 94. G: [Se no bisogna appunto come le hai già chiesto: *otherwise we'll have to well as you already asked her*:

In example 3 the doctor goes on to ask the patient how long she has been taking the pill, to which the patient replies that she has stopped taking it. The mediator seems to have a standard questioning pattern: *after the patient has answered*, she repeats or reformulates the question (turn 85). This may be a way of making sure the patient has understood the question in order to obtain correct information for the doctor, but it may also be because she does not believe the patient's answers. In turn 87 the mediator produces another question, which is challenging and even reproachful: *want to do abortion?* The mediator does not translate this question for the doctor, perhaps because she thinks he understands, or perhaps because she considers this a private exchange between herself and the patient, in which she is taking on the role of a "bilingual professional" who knows what is best for the patient (Kaufert 1990; Kaufert & Koolage 1984; Kaufert & Putsch 1997; Kaufert et al. 1998). At this point the doctor asks the patient whether she wants to start taking the pill again (turn 88). The mediator translates the question and takes another independent initiative by asking the patient why she stopped taking the pill, even suggesting a possible answer: *it was finished?* The patient answers affirmatively and the doctor closes the sequence by signalling he has understood this exchange.

In turn 91, however, the mediator openly accuses the patient of lying. This is a totally autonomous initiative which may explain the follow-up questions in the previous turns: perhaps the mediator keeps repeating her questions because she is not convinced by the patient's answers. Again the doctor intervenes, producing a justification for the patient: perhaps she was unable to buy the pill this month because she had no prescription. This puts the patient in a different position: stopping taking the pill because she had no prescription is justifiable as opposed to stopping because she was unwilling to comply with medical advice. The doctor goes on to concede, however, that if the patient does not want to take the pill, something else will have to be done, as the mediator has already told the patient. The doctor thus aligns with the mediator by endorsing her previous initiative.

Example 4 95. M: [Si non prende la pillola (.) non usa condom, non vuole bambino (.) cosa vuole fare? aborto? *[yes she doesn't take the pill (.) she doesn't use condoms (.) she doesn't want a baby what does she want to do? abortion?* 96. G: No lei appunto ha già avuto un aborto in luglio *no well she already had an abortion in July* ((the doctor goes on examining the patient))

In example 4, the mediator reinforces her "alliance" with the doctor by repeating what she had previously told the patient: that she is heading for an abortion. In this way she conveys to the doctor: a) her concern about what will happen to the patient and b) her alignment with the doctor's position that the patient should use contraception. The analysis of this encounter highlights several features which seem to occur frequently in our data: - some sequences of the triadic encounter take the form of dyadic exchanges in which the mediator is either questioning the patient or talking to the doctor about the patient (Baraldi and Gavioli 2007); - the mediator is conversationally dominant not only in *quantitative terms*, but also in *topical and interactional terms*. She initiates a large number of conversational moves (follow-up questions), introduces delicate topics (abortion) and overtly expresses her feelings towards the patient; - the doctor, while less inquisitive, never overtly disaligns with the mediator. He lets her run the medical interview without challenging her dominance; - the interactional structure leaves little conversational space for the patient, who is largely limited to yes/no responses.

12. Proxy roles

Another common feature observed in these interactions is that the mediators may decide to act as a proxy for the patient or for the doctor. Example 5 comes from another encounter at the same clinic. Here the mediator is not only conversationally dominant, but also acts as proxy for the patient, speaking for and about her without prior negotiation or explicit mandate. The patient is pregnant and has come to the clinic because she is losing weight. In turn 121, the mediator (M) starts translating the doctor's question and then stops, offering to answer on behalf of the patient – an offer which the doctor (D) immediately accepts: Example 5 120. D: ochei (.) va bene (.) **questa** gravidanza com'è andata? *ok (.) all right (.) how did **this** pregnancy go?* 121. M: this birth- eh io lo so dottoressa perché lo vedo [al consultorio *er I know it doctor because I see it [at the clinic* 122. D: [eh dimmi com'è andata *er tell me how it went* 123. M: e:: è andata così così perché:: per gravidanza è andata bene cioè certo punto: e::: dottoressa ha fatto: l'ecografia e visto che no: bambino [non è cresciuto: bene e poi- mh e::: *it went so and so because the pregnancy went well that is at a certain point e::: the doctor made an ultrasound and saw that no: the baby [hasn't grown well and then- mh* 124. D: [non cresceva bene (.) eh adesso lo vediamo intanto guardo gli esami *[it didn't grow well (.) eh now we see in the meantime I take a look at the tests* 126. M: sì (.) I said I know you right from the day you started yes Neither the doctor, nor the mediator offer the floor to the patient in this exchange. The doctor simply signals that he has understood and wants to read the results of the tests. The mediator produces an acknowledgement token and then informs the patient that she has answered the doctor for her. The patient is excluded from the interaction, which again becomes dyadic as the mediator acts as proxy for the patient (who she only partially informs of the outcome). In the CNEL 2000 guidelines it is stated that the cultural mediator is a professional who acts to facilitate the relationships between migrant citizens and institutions, public services or private organisations, *without replacing* either party. Insofar as the mediator should not act as proxy, either for the representatives of institutions/services or for the migrant citizen, this means that they have the right to act for themselves and should be entitled to speak for themselves. In 2009 CNEL published another document entitled "Intercultural mediation and mediators: operational guidelines", in which it states that one of the main principles at the basis of intercultural mediation is promoting the active participation of all those who are involved in mediated interactions. By dominating the conversation, as in the first encounter, and by assuming a proxy role, as in the second, mediators can only too easily flout these guidelines.

13. Conclusions

When mediators assume conversational dominance or proxy roles in institutional settings, they can severely limit the active participation of migrants. Such behaviour may reflect instructions from their employers to save time and expense and/or be the result of a lack of training in communication skills. Universities are now starting to enter the arena of mediator training in Italy with the aim of improving services for migrants. The situation is evolving on a local basis, however, and it is difficult to have a full or precise picture. This is not only due to the fact that universities have become involved in this area rather belatedly, but also to the fact that so far – despite the large use of cultural mediators in public services in Italy – there is no national or central accreditation system, no single code of professional conduct, and no common recruitment requirements or procedures. We hope that the ongoing efforts in data collection and analysis, and the dissemination of the findings will help migrants' voices to be heard and contribute to improving the professional skills of cultural mediators by developing examples of best practice.

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Notes

[1] The paragraphs from 'Introduction' to 'Interpreting skills: a must or an option?' were written by Christopher Garwood and from 'The AIM research project on cultural mediation' to 'Conclusions' by Amalia Amato.

[2] There were 4,235,059 non-Italian citizens resident in Italy on 1 January 2010, an increase of 8.8% over the previous year, and they now account for just over 7% of the total resident population. See *La popolazione straniera residente in Italia*, p. 1, Istat, Roma.

[3] A variety of terms have been used to describe this figure (Merlini, 2009:58), depending to a considerable extent on the tasks this person is expected to perform. Although 'intercultural mediator' has now become the most commonly used term, it was nevertheless decided to use the term 'cultural mediator' as this is the term which is most frequently used in countries in which this figure has not had such an important role.

[4] The estimated number of cultural mediators in Italy is 4,000-4,500 (see "Linee di indirizzo per il riconoscimento della figura professionale del mediatore interculturale", Gruppo di lavoro istituzionale per la promozione della mediazione interculturale, 21 December 2009). Moreover, cultural mediators also have their own association (APIMEC) and trade union (Sei Ugl).

[5] See, for example, Balletta F. (ed) (1978), *Un secolo di emigrazione italiana dal 1876 al 1976*. Roma: Centro Studi Emigrazione.

[6] See <http://www.ecn.org/macondo/leggi/collocamento.html>

[7] See <http://www.ecn.org/macondo/leggi/martelli.html>

[8] Author's translation from Italian.

[9] Author's translation from Italian.

[10] A non-confessional association set up in 1987 in Milan to help migrants and nomads. See http://www.naga.it/index.php/Chi_Siamo.html

[11] COSPE is a non-confessional association that was created in 1983 to promote intercultural dialogue and a fair development for the poorer parts of the world. See <http://www.cospe.it/cospe/old/index.php>

[12] See <http://www.camera.it/parlam/leggi/980401.htm>

[13] In the most recent immigration law, *Testo unico sull'immigrazione*, the two articles referring to mediators are now 38 and 42. See <http://www.altalex.com/index.php?idnot=836>

[14] For an idea of the immense variety, see Casadei S., Franceschetti M., "Il mediatore culturale in sei Paesi europei" (2009): 12-14.

[15] "Linee di indirizzo per il riconoscimento della figura professionale del mediatore interculturale", Gruppo di Lavoro Istituzionale per la Promozione della Mediazione Interculturale, 21/12/2009. http://www.interno.it/mininterno/export/sites/default/it/assets/files/18/00937_linee_indirizzo_mediatore_interculturale.pdf

[16] “Linee di indirizzo per il riconoscimento della figura professionale del mediatore interculturale”, Gruppo di Lavoro Istituzionale per la Promozione della Mediazione Interculturale, 21/12/2009: 3.

[17] Author’s translation from Italian.

[18] See also Zorzi, Daniela (2007). “Note sulla formazione dei mediatori linguistici”, *Studi di Glottodidattica* 1/1: 112-128.

[19] Author’s translation from Italian.

[20] The seven macro areas identified are communication, information/guidance, conflict management, accompanying/assistance, training, consultancy and planning, and research.

[21] This was the case in a course for cultural mediators in which the two authors were involved two years ago. Moreover, a review of the programmes for courses for cultural mediators found on the Internet showed that they contained either no interpreting or just a few hours devoted to it.

[22] Author’s translation from Italian.

[23] The AIM consortium partners are: Alma Mater Studiorum -Università di Bologna, Università di Genova, Università di Modena e Reggio Emilia, Università di Napoli “l’Orientale”, Università per stranieri di Perugia, Università di Roma Tre, Università di Siena, Università di Trieste.

[24] Transcription conventions used in the examples:

[...] simultaneous or overlapping talk
= latched to previous turn
(.) short pause (less than one second)
(1) long pause (number indicates duration in seconds)
/ abandoned utterance
? questioning intonation (rising tone)
e: or e::: lengthened vowel sound
boldface emphasis or loudness
°...° uttered quietly or as an aside
xxx inaudible

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