

PLOUTOS

**Cooperation for achieving third country nationals' financial independence
through financial literacy tools and entrepreneurship bootcamps**

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**Work package 3:
Community Interpreting Training**

**Expected Output 3.3:
Synthesis Report of Desk Research**



P L O U T O S



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Synthesis Report

Community Interpreting training and services in the seven partner countries

(Belgium, Bulgaria, Croatia, Cyprus, Greece, Italy, Sweden)

Foteini Apostolou



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1. Introduction

1.1 Interpreting studies

Community Interpreting falls under the umbrella of Interpreting Studies, which is considered in turn a sub-discipline of Translation Studies and an inter-discipline. Interpreting, in Franz Pöchhacker's definition from his book *Introducing Interpreting Studies*, "is a form of Translation in which a **first and final rendition in another language** is produced on the basis of a **one-time presentation** of an utterance in a source language" (2004, p. 11, emphasis in original). So, unlike translation which has a "tangible" and continuous presence, interpreting is a single occurrence of an utterance that cannot be repeated.

As many scholars have pointed out, interpreting is an age-old practice, given the need for communication across languages and cultures, but a comparatively new discipline. Simultaneous interpreting as an acknowledged practice was established after World War II, with the Nuremberg trials, and it evolved through the years. Brian Harris presents a chronological development of the field of interpreting studies – whose various branches developed at different periods – in his Foreword to the selected proceedings of the first Critical Link conference held in 1995 in Ontario; "[t]he 1940s, 1950s, and 1960s were [...] the decades of the conference interpreters, the first branch to achieve a universally recognized status" (pp. 1-2), through the emergence of accreditation, training, professional status, adequate remuneration, good working conditions, and research; "[t]he 1970s and 1980s were in the same way crucial decades for two other branches, namely court interpreting and sign language interpreting"; he concludes his remarks with the question: "[w]ill the 1990s turn out to be the decade of the medical interpreters and the social service interpreters?".

1.2 Community interpreting: the beginnings

So, Harris's chronology put the beginning of community interpreting in the 1970s and 1980s, starting with court and sign language interpreting. Mostly in the 1980s we witnessed a shift from the domain of conference interpreting, which was mainly "communication between groups of people with different languages and cultures at an international level", to that of "communication between people of different languages and cultures *within* national borders and concerned with the events of people's everyday lives", as Ann Corsellis suggests in her book *Public Service Interpreting: The First Steps* (2008, p. 1, emphasis in the original).

Franz Pöchhacker in his book *Introducing Interpreting Studies* briefly refers to this beginning:

It was only in the 1980 and 1990s, in the face of mounting communication problems in the public-sector institutions (healthcare, social services), that 'interpreting in the community' (**community-based interpreting**) acquired increasing visibility. Thus **community interpreting**, also referred to as **public service interpreting** (mainly in the UK) and **cultural interpreting** (in Canada), emerged as a wide new field of interpreting practice, with **healthcare interpreting** (**medical interpreting, hospital interpreting**) and **legal interpreting** as the most significant institutional domains. (2004, p. 15, emphasis in original).



1.3 Definitions and terms

The two basic terms that refer to this type of interpreting are ‘community interpreting’ and ‘public service interpreting’. Below, we have two definitions of the terms by two important scholars in the field:

Interpreting carried out in **face-to-face encounters** between **officials** and **laypeople**, meeting for a **particular purpose** at a **public institution** is (in English-speaking countries) often termed *community interpreting* [...]. (Wadensjö, 1998/2013, p. 49, my emphasis)

Public service interpreting and translation are, as the name implies, interpreting and translation carried out in the **context of the public services**, where **service users** do not speak the **majority language** of the country. The **term “public service”** refers mainly to those services that are provided for the public by central or local government. They include legal, health and the range of social services such as housing, education, welfare and environmental health. (Corsellis, 2008, pp. 4-5, my emphasis)

The situation becomes even more confusing in Europe with the introduction of the term “intercultural mediator” in many projects. The term was probably introduced to stress the cultural proximity of the interpreter with the groups s/he supports, but it can cause problems concerning the role of the person enabling the communication, the code of conduct, and the professional status of practitioners.¹

Despite the confusion over terms, what we should keep in mind is that this practice supports communities of people who have a different linguistic and cultural background in their efforts to communicate successfully with public services and vice versa, given the increasing mobility of populations across the globe, and the increasing multiculturalism and multilingualism within countries.

1.4 Community interpreting: A dire need

Communication is key here, not only for the recipients of these services but for the services themselves, as Wadensjö clarifies very eloquently: “In practice, of course, representatives of the majority – that is to say, court officials, the police, people working within social service organizations etc. – are most of the time no less dependent on the assistance of interpreters than are their clients and patients. They need interpreters to be able to carry out their duties. Seen from this perspective, the law thus also protects the social and legal system itself” (Wadensjö, 1992/2013, p. 13).

From the above, it is I believe clear that these services are an integral part of migrants’ lives. The EU has been supporting actions that will provide interpretation services to migrants, but in the majority of countries there is no legislation that forces governments to provide them, with the exception of criminal cases in courts and the asylum process. The new Action Plan for the period

¹ I have discussed this issue extensively in my book *Translation and Interpreting for Public Services in Greece* (in Greek), pp. 40-76.



2021-2027 put forward by the European Commission clearly states the lack of access to services for migrants (health, education, employment, etc.), which is partly due to “linguistic and cultural obstacles” (p. 13), but makes no specific mention to the need for interpreting services and the obligation of member states to provide them.

1.5 Present analysis

The present analysis was conducted within the context Work Package 3 of the project PLOUTOS – Cooperation for achieving third country nationals’ financial independence through financial literacy tools and entrepreneurship bootcamps, funded by the Directorate General for Migration and Home Affairs through the AMIF-2020-AG-CALL *Translation Actions on Asylum, Migration and Integration*.

WP3 “Community Interpreting Training” focuses on community interpreting specifically for financial institutions and services, with the objective of further supporting migrant communities in their course to inclusion in the labour market and the business world. The final deliverable of the WP is a 12-week online course for a small group of participants (“amateur” interpreters, i.e. people already offering this service out of need without having had any professional training, including TCNs residing in the host country for more than 3 years, public servants, employees of financial service providers and NGOs).

The analysis, the first step toward the development of the training programme, attempts to shed light on the CI landscape in the seven partner countries of the project (Belgium, Bulgaria, Croatia, Cyprus, Greece, Italy, and Sweden). It will help us identify the structure of CI services and training in each country, and understand how the course can fit in this landscape.

In the present analysis, we will focus on community interpreting services and training programmes only, not on generic interpreting programmes and services. The analysis will be divided by partner country presented in alphabetical order; it will focus on interpreting training and services provided for TCNs, and it will not include private companies that provide paid services.² The information presented here is based on information provided by partners and on my extensive personal research.

² For the purposes of the present project, I believe that interpreting in the legal context is not very relevant, so I decided not to include it in this analysis, with the exclusion of interpreting for asylum seekers in appeal courts.



2. Analysis by country

2.1 Belgium

2.1.1 Introduction

In Belgium, a country of 11,5 million inhabitants, which receives large number of migrants annually,³ community interpreting is delivered at regional level. Roels et al. (2015) clarify the context in their paper “Equal access to community interpreting in Flanders: a matter of self-reflective decision making?": “Community interpreting is not regulated at the federal Belgian level, but rather at the level of the language-specific regions. Thus, in Flanders, the provision of language services falls under the jurisdiction of the Flemish Ministry of Integration. Community interpreting covers interpreting in the public sphere, with the exception of legal contexts (police, the courts and the asylum procedure). Community interpreting covers both face-to-face interpreting and telephone interpreting (SERV/COC, 2007)”. There is no similar organisation in Wallonia, where CI services are provided without a government-organized training and certification programme in place.⁴

2.1.2 CI Training

Some of the CI training programmes in Belgium include the following:

1. **Certification programme for social interpreters and translators**

Agency for Integration and Civic Integration

<https://www.integratie-inburgering.be/en/welcome-to-flanders-and-brussels>

The Agency for Integration and Civic Integration, a government organisation in Flanders, offers a training and certification programme for “social interpreters and translators”⁵ in Flanders. The Agency provides information in Albanian, Arabic, Bulgarian, Dutch, English, French, Greek, Italian, Persian, Polish, Portuguese, Romanian, Russian, Spanish, Turkish, and Ukrainian. Detailed information about the training programme is provided in the leaflet “Training and Certification of social interpreters and translators in Flanders”, available in PDF format in Dutch, French and English.⁶ The Agency defines “social interpreting” as follows: “Social interpreting is an instrument which enables users to communicate orally with clients who speak different languages by completely and accurately converting a

³ Based on official data, in 2021 25,971 asylum applications were filed and 15,685 applications were pending (<https://asylumineurope.org/reports/country/belgium/statistics/>). The main countries of origin were Afghanistan, Syria, Palestine, Eritrea and Somalia (<https://www.cgrs.be/en/news/asylum-statistics-2021-survey>). This is a relatively steady trend (see “Migration Profile: Belgium”, <https://migrants-refugees.va/country-profile/belgium/>). The total number of asylum applications in the period 2016-2021 were 119,205 based on UNHCR data (<https://www.unhcr.org/refugee-statistics/download/?url=1UpHa3>).

⁴ Relevant material on CI in Belgium is provided on the ENPSIT website, at <http://www.enpsit.org/belgium-ps-domains.html> (only for ENPSIT members).

⁵ The term “social interpreter” is another term for “community interpreter” or “public service interpreter”. A more detailed reference to the problems and confusions caused by the multiplicity of terms used for the same practice will be discussed in the second part of this analysis, which will focus on the literature overview.

⁶ The English version is available here https://ec.europa.eu/education/knowledge-centre-interpretation/sites/default/files/soctolkenvertalen_eng_def.pdf.



message from a source language into a target language” (Training for social interpreters and translators in Flanders, 2015, p. 5).

The programme is divided into three components: 1. Language test in Dutch; 2. Information session and 3. Basic training course. If candidates pass the language test, they attend a one-day information session about the professions and opportunities, and they decide which training they will follow.

The training, organized in cooperation with the Faculties of Interpreting of Flemish Universities, comprises 130 hours, divided into two modules: 1. Interpreting techniques, note-taking, ethics, paraphrasing and terminology (49 hours); 2. Practical exercises and role plays as well as information on the non-profit sector (81 hours). The training centre organizes ten Modules 1 and three Modules 2 annually.

The training is addressed to individuals who “have not taken any related courses or have little or no experience as a social interpreter or translator” (p. 8), but those who have established the necessary skills through different means can just sit the certification exam without attending the training. Candidates must have a B2 level in Dutch (language test), which is also the language of instruction.

2. ***Graduate Certificate in Legal Interpretation: Judiciary and the Asylum Sector***

School of International Interpreters, Faculty of Translation and Interpreting of the University of Mons

<http://applications.umons.ac.be/web/en/pde/2022-2023/cursus/5181.htm>

The course gives 26 ECTS, and covers 210 hours of classes divided into two modules with the following units: 1. The settings of public service interpreting (PSI) and the interpreter’s ethics; Intercultural communication; In-depth analysis of interlinguistic transfer; The interpreter’s functional knowledge in PSI. 2. Ethics & the interpreter’s terminological and disciplinary knowledge in legal settings; Characteristic interpretation settings in a legal context; ethics, conceptual and terminological knowledge, interpreting exercises; Anchoring and integrating the interpreter’s disciplinary knowledge and skills in legal settings; Translation and Interpreting in legal settings: terminological knowledge; Translation and Interpreting for the police setting; Translation and Interpreting in the asylum seeking sector. Language of instruction is French.

The course will run in the year 2022-2023.

3. ***Développement d’un service d’interprétariat social par les personnes migrantes a Liège***

Le monde des possibles

<https://univerbal.be/>

The association *Le monde des possible*, based in Liege, aims at promoting the integration of socially disadvantaged migrants. One of its projects, is training for “social interpreters” for migrants in Liege, and in Wallonia more broadly.

The aim of the training programme, as its website states, is to “create favourable conditions for people to express themselves, make practices and experiences visible,



highlight testimonies, and discuss future visions of what this sector, which is as yet unstructured, could become in Wallonia”.⁷

The course focuses on developing interpreting skills in social and, to a lesser extent, legal settings. It is offered biannually, in April and in October; each course includes 120 hours of theoretical and practical training, organized in the following 5 Modules: 1. Ethics, interpretation techniques and professional practice; 2. Introduction to the intercultural approach; 3. Information and terminology in the social field and the asylum procedure; 4. Information and terminology in the medical and mental health fields; 5. Collective project in content creation (<https://univerbal.be/conenu-de-formation/>).

Candidates should be native speakers of a language that is needed in the interpreting services offered, and have a B2 level in French (assessed through an individual interview).

Finally, we should note the inclusion of a Resources section on the Univerbal website, which contains interesting and useful material (although rather limited) on Social economy, Interpretation in Wallonia, Mental Health and interpretation, interpreting ethics, employment opportunities, etc. (<https://univerbal.be/ressources/>).⁸

4. **Het Sociaal Vertaalbureau van Brussel Onthaal vzw (BO)**
Le Service d'Interprétariat Social de Bruxelles Accueil asbl (BA)

<https://www.sociaalvertaalbureau.be/>
<https://www.servicedinterpretariatsocial.be/>

These are two NGOs that provide social interpreting services in the region of Brussels and Wallonia, offer a short 40-hour course for those interested in working in the field (usually as volunteers), who have not received any formal training and are not certified. The course comprises the following: 1. Information and introductions (1h30); 2. Interpreting techniques (3h30) and Interpreting ethics (2h30); 3. Note-taking techniques (6h); 4. Conflict management and role determination (3h30); 5. Terminology and sight translation (3h); 6. Ethics and role play; 7. On-site interpreting (6h); 8. Videoconference interpreting (6h); 9. Telephone interpreting (6h); 10. Final test (2h) and registration (Rapport Annuel, 2020, p. 21).

5. **KU Leuven – Research Group in Interpreting Studies**

https://www.arts.kuleuven.be/english/rg_interpreting_studies/research-projects

To conclude this list, we cannot leave out the research programmes of KU Leuven (Katholieke Universiteit Leuven). Although the university does not offer any taught programmes in community interpreting, it has conducted or has participated in a number of projects that enhance and support community interpreting services. Below you can see a

⁷ Créer les conditions favorables pour que les personnes puissent faire émerger des paroles, rendre visibles des pratiques et des expériences, mettre en lumière des témoignages et échanger sur des visions futures de ce que pourrait devenir ce secteur non encore structuré en Wallonie.

⁸ The Resources list also includes a Medical entry which, however, is empty.



list of relevant projects, starting with the most recent ones (more details are provided for recent projects):

- ***EmpathicCare4All***
https://www.arts.kuleuven.be/english/rg_interpreting_studies/research-projects/empathiccare4all
The development of an educational intervention for medical and interpreting students on empathic communication in interpreter-mediated medical consultations. The research project focuses on empathic communication in interpreter-mediated medical consultations and will pave the way for a specialized curriculum for medical and interpreting students concerning clinical communication with a focus on empathy.
- ***CHILLS*** (November 2018-October 2020)
https://www.arts.kuleuven.be/english/rg_interpreting_studies/research-projects/chills
ChiLLS is a continuation of the CO-MINOR-IN/QUEST I and CO-MINOR-IN/QUEST II research projects. The aim of the research project is a. to inform highly vulnerable minors about how/where they can get help if they do not speak the same language as that of the investigation; and b. to inform the legal actors, including juvenile court judges and youth counsellors, but also police officers and lawyers, psychologists and social workers, about how to deal with highly vulnerable minors who do not speak the language of the proceedings.
- ***Co-Minor-IN/QUEST II*** (September 2016-August 2018)
https://www.arts.kuleuven.be/english/rg_interpreting_studies/research-projects/co-minor-in-quest-ii
Based on previous research, there is a lack of mutual knowledge about the tasks and responsibilities of all professionals involved in ImQM. Especially the interpreter and his/her role are less known among the interview participants, although the figure of the interpreter is a crucial link in the communication chain. The project focuses on the need for trust-building, that the child can share his/her story with the professionals. Most of all, there is the need for more (specialized) training, which can be enhanced by the joint training model that was proposed in the project.
- ***Co-Minor-IN/QUEST I*** (2013-2014)
https://www.arts.kuleuven.be/english/rg_interpreting_studies/research-projects/co_minor_in_quest
At a first stage, the project focused on the process of interpreted-mediated questioning of children in the pre-trial phase of criminal cases. The objective is to develop a child-centered approach in this process. At a second stage, the project conducted an international online survey to map the situation and attempt to formulate an initial set of recommendations by the first months of 2014.
- ***TraILLD: Training in Languages of Lesser Diffusion*** (2014-2015)
https://www.arts.kuleuven.be/english/rg_interpreting_studies/research-projects/trailld



The aim of the TrailLLD-project is to focus on the different aspects and methods of training for interpreters in languages of lesser diffusion and to design a new methodology and strategy that focuses on how to train LLD interpreters, eliminating quality differences with interpreters of main languages. To reach these goals, we will, among other things, test a framework of best practices in training methodologies.

2.1.2 CI Services

As we mentioned in the introductory section, CI services are provided at regional level in Belgium. Interpreters have to be certified in order to be commissioned, but “the decision on whether or not to enlist the support of a community interpreter in an institutional setting rests entirely with the professional or institutional end user” (Roels et al, 2015, p. 151). As Roels et al. further explain, “No reference is made to the need of the client for a community interpreter or to any explicit procedure for how the institution is to arrive at a decision” (p. 151).

The list that follows includes the majority of CI services in Belgium:

1. **Asylum**

Office for the Commissioner General for Refugees and Stateless Persons

Based on the country report for Belgium of the AIDA Asylum Information Database (2021 update), the state always provides interpretation services for asylum applicants. However, as the report suggests, there are quality issues quite often: “The quality of the interpreters being very variable, the correct translation of the declaration, as they are written down in the interview report, is sometimes a point of contention in the appeal procedures” (2022, p. 36). Since 2016 some interviews are held via teleconference, a fact that was considered negative by some of the asylum seekers’ lawyers who “argued that it impedes the creation of a safe space” (p. 37). This policy expanded to open centres in 2020 because of the pandemic, but the aim was to introduce “interviews through videoconference structurally on the long term, as an alternative to in person interviews” (p. 37). This decision was contested by a number of civil rights organisations who brought the case before the Council of State, which suspended the CGRS⁹ decision; nevertheless, interviews continued to be conducted via videoconference in 2021 (p. 37).¹⁰

2. **Health Care and other services¹¹**

Federal Public Service (FPS): Health, Food Chain Safety and Environment

The Intercultural Policy Support Unit of the Federal Public Service for Health, Food Chain Safety and Environment, established in 2001, is the authority responsible for the programme of Intercultural Mediation in Belgian hospitals, provided since 1999

⁹ CGRS stands for the Office for the Commissioner General for Refugees and Stateless Persons. According to the agency website “The CGRS is an independent federal administration and the central asylum authority in Belgium” (<https://www.cgrs.be/en>).

¹⁰ For a detailed analysis of the asylum procedure and the role of the interpreter in this procedure in Belgium, see Elle Leon’s Master’s dissertation on *Language and Legal Counselling: The Asylum Seeker’s Interpreter*.

¹¹ I have decided to divide training and services in two categories (1. Asylum and 2. Health care and other services), because although there were quite a few services and training programmes with an exclusive focus on asylum, other settings often blended together.



(<https://www.health.belgium.be/en/about-fps>). A detailed presentation of the service is given in the *Guide for Intercultural Mediation in Health Care* (2017) by Hans Verrept and Isabelle Coune, with detailed information on the concept and practice of intercultural mediation, the tasks of the Intercultural Mediator (IM) and their standards, ethics, and organisation of the service.¹² Unfortunately, the guide does not provide any information on the training or certification of IMs; some information is provided in Hans Verrept's "Intercultural mediation: An answer to health care disparities?" (Verrept, 2008, pp. 194-195) and in Lucia Morariu's paper "Intercultural mediation in Belgian hospitals – A successful example of reasonable accommodation in the health-care sector" (Morariu, 2009, pp. 265-266), which also highlights the problems with training and certification of IMs.

Additionally, the NGO Foyer, based in Brussels, also offer similar services as they state on their website: "Since 1992, Foyer's Intercultural Mediation Service has acted as a bridge between care providers and patients or clients with a migration background. Thanks to our provision of interpretation, information and (emotional) support, service users who do not speak Dutch are assured of accessible, high-quality care" (Foyer, n.d.).

3. **Various social settings**

Het Sociaal Vertaalbureau van Brussel Onthaal vzw (BO)

Le Service d'Interprétariat Social de Bruxelles Accueil asbl (BA)

<https://www.sociaalvertaalbureau.be/>

<https://www.servicedinterpretariatsocial.be/>

These are two NGOs that offer social interpreting and translation service based in Brussels, offering on-site, videoconference and telephone interpreting for non-native speakers in the bilingual area of Brussels and Wallonia. One of the working languages of the interpreters has to be French, Dutch or English. The service covers the following settings: public services, welfare, reception, integration and civic integration, health, education, employment, youth services, legal, public order, public housing, socio-cultural sector. They receive requests only from organisations or agencies, not individuals. The two NGOs cover 120 languages (a full list of the supported languages is provided in <https://www.servicedinterpretariatsocial.be/algemeen/taalaanbod/>). They work with certified interpreters (only BO) who are usually on a self-employed status, or interpreters who have received a brief training by the two NGOs or University of Mons – in the latter case, the interpreters work on a voluntary basis.

4. **Social settings in Flanders**

Agency for Integration and Civic Integration (Agentschap Integratie & Inburgering)

<https://www.integratie-inburgering.be/>

In 2004, the Flemish government established a training and certification centre for social interpreters and translators. In 2009, the Flemish Civic Integration Decree requires that caregivers and service providers in Flanders use certified interpreters when available. In 2015, the Flemish Agency for Civic Integration became the agency responsible for social interpreting (training, certification and service provision) (*Training and certification of social*

¹² For a more detailed presentation of the service, see Keer, Fernandez & Bilsen, 2018.



interpreters and translators in Flanders, 2015, p. 4). The objectives of the service are: 1. To provide each citizen, including citizens with limited Dutch proficiency, access to social and public services; and 2. To enable each citizen, including citizens with limited Dutch proficiency, to exercise their rights and fulfill their duties (Agentschap Integratie en Inburgering, 2015, p. 5). The services that may call social interpreters include: employment services, health care, mental health care, education, well-being, social housing, civic integration and shelter of asylum seekers. Excluded are: cultural mediation, court interpreting, and interpreting for asylum. The interpreters used are those certified through the Agency's training programme (see previous section).

5. ***Univerbal: various social settings in Wallonia***

Le Monde des Possibles

<https://univerbal.be/>

Univerbal is an initiative organized by *Le Monde des Possibles*, an NGO based in Liege, in order to provide professional interpreters for the inclusion of refugees. As a youtube video they created for Growfunding suggests, they have a team of 34 interpreters who accompany migrants in health, mental health and public administration settings (Growfunding, 2022). One of their working languages must be French.



2.2 Bulgaria

2.2.1 Introduction

Bulgaria, a country of around 7 million inhabitants, is mostly an entry point and transit country for migrant communities: out of the 25,075 people granted international protection status, only about 2,000 settled in the country (Krasteva, 2019, p. 7). Bulgaria received a total of 42,168 applications for international protection status in the years 2016-2021.¹³ Krasteva also informs us that “A positive trends is emerging of NGOs and institutions employing migrants and refugees as interpreters/translators, social workers and mediators, which allows them to contribute to the integration of new waves of refugees” (p. 7), without however specifying the NGOs and institutions. However, information on CI (or intercultural mediation) is hard to find and can sometimes be false; an example would be the publication *Frameworks and good practices of intercultural mediation for migrant integration in Europe* (Erdilmen, 2021, p. 15), where the information for Bulgaria is utterly confusing, since in the entire reference there is a misunderstanding between mediation as a process of alternative dispute resolution and intercultural mediation for migrants.¹⁴ Therefore, the majority of the information on mediator networks, the legal framework and even training refers to the extrajudicial process and not intercultural mediation.

2.2.2 CI Training

Since Bulgaria is a transit country for migrants and hosts a small number of migrant communities, training programmes are rather limited.

1. 2GEM – Second Generation of European Migrants

Bulgarian partner: European Centre for Quality Ltd (01.11.2020-31.10.2022)

<https://2gem.eu/>

This is an Erasmus+ project with partners from Finland, Bulgaria, Poland, Italy, Czech Republic, and the United Kingdom. One of the project objectives is to equip immigrants with the necessary skills to achieve successful integration is a central preoccupation of policy-makers in the EU and beyond. To do that, the project will develop a training programme for intercultural workers which will be structured along 4 modules: 1. Intercultural values and attitudes; 2. Effective intercultural communication; 3. Working together across cultures; and 4. How to develop a professional career as an intercultural worker. From the information

¹³ Data from Refugee Data Finder, UNHCR, <https://www.unhcr.org/refugee-statistics/download/?url=eDD7ib>.

¹⁴ For example, there is a reference to the Unified Register of Mediators “which collects information on all mediators in Bulgaria, [and] also establishes an authority that governs intercultural mediators” (Erdilmen, 2021, p. 15); however, this body is responsible for mediation in the justice system, a method of alternative dispute resolution, and has no relation to intercultural mediation for migrants. The other body that is also mentioned (National Network of Health Mediators) is indeed a network that facilitates communication in health care for those who do not speak Bulgarian, but again it operates for the Roma community, which is not a migrant group; there is no reference to any activities associated with migrants on their website (<http://www.zdravenmediator.net/en/>). Finally, there is a reference to the hourly fee of the mediator as provided for in Mediation Act of 2004, which again is related to mediation in the justice system (<https://www.uv.es/medarb/observatorio/leyes-mediacion/europa-resto/bulgaria-mediation-act-2004.pdf>).



provided in the website, we can assume that the “intercultural worker” will have the role of an interpreter in public settings.

2. **Social Mediation: Program for direct work with refugees and asylum seekers**

Council of Refugee Women in Bulgaria

<https://crw-bg.org/en/direct-work-programs/>

Within the context of this programme, as the website suggests, social mediators have to take mandatory in-house training. However, no details are given about this training, apart from the general areas of training: the humanitarian context of working with people fleeing armed conflict; protection of children at risk; difficulties in social adaptation, measures in cases of domestic violence and gender-based violence; crisis response and development of a security plan and others.

3. **Strengthening the Capacity of National Institutions and NGOs In the Field of Asylum**

IOM Mission, Republic of Bulgaria (11.10.2017-10.10.2022)

The project focuses on interpreters, social workers and other relevant staff working with the State Agency for Refugees (SAR), the State Agency for Child Protection (SACP), the Agency for Social Assistance, municipalities, NGOs and international organisations that provide services to asylum seekers. A minimum of 300 professionals benefit from the training programme (16 training sessions will be carried out), which includes the following modules: working through consecutive interpretation; working with vulnerable asylum seekers, human rights protection; gender-based violence; conflict mediation; National and European legal framework in the field of asylum; carrying out focus groups and information sessions with asylum seekers. In addition, IOM Bulgaria will organize 5 workshops and 5 field visits at the SAR Registration and Acceptance Centers (RAC).

<http://2020.eufunds.bg/en/8010436/0/Project/Activities?contractId=a3VNNBY6aA4%3D&isHistoric=False>

2.2.3 CI Services

In its Assessment Report for the health situation in the Bulgarian borders (Assessment Report, 2016, p. 61), the IOM raises the issue of the lack of intercultural mediators in health care: “SAR [State Agency for Refugees] is compelled to hire translators who facilitate the so-called ‘asylum interview’, but does not have the resources to secure the presence of translators at the medical office. In such a situation, SAR and MoI [Minister of Interior] health professionals and the general staff at centres rely on their own creativity and limited fluency in foreign languages to secure minimum levels of working communication with migrants, which needless to say is not a sustainable long term approach”. Among the recommendations of the Report is the following: “Additional investment in translation and social services, introduction of health and intercultural mediation at reception centres, hospitals, and clinics is needed to facilitate access to health care and to further integration” (p. 62). The same conclusion was reached by Hristova et al. in their work *Trapped in Europe’s Quagmire: The Situation of Asylum Seekers and Refugees in Bulgaria*, which refers to “the insufficient provision of services of [...] interpreting and translation” (Hristova et al.,



2014, p. 14). The authors underline the shortage of interpreters in camps and the bad quality of interpretation when it is available; quite often, interpreting is provided through volunteers (p. 16). Interpreting for the health care sector is non-existent, with a few exceptions from interpreters provided by the Bulgarian Red Cross (BRC). The problems still persist, as we can conclude from the *EASO Asylum Report 2021*, which raises the issue of lack of interpretation services: “A shortage of interpreters was observed in Bulgaria in both first and second instance procedures, especially for Kurdish (Sorani or Pehlewani), Pashto, Urdu, Tamil, Ethiopian and Swahili” (p. 184).

Some of the services provided are the following:

1. **Asylum**

Based on the country report for Bulgaria of the AIDA Asylum Information Database (2020 update), although “Bulgaria is [...] legally bound to make arrangements for interpretation to the extent necessary to facilitate individual access to the asylum procedure”, such interpretation “is not secured and the only services in this respect are provided by the Bulgarian Helsinki Committee under UNHCR funding” (p. 48). However, not all languages are covered in many cases: Interpretation is secured only from English, French and Arabic languages, and mainly in the reception centres in the capital **Sofia**. Interpreters from other key languages such as Kurdish (Sorani or Pehlewani), Pashto, Urdu, Tamil, Ethiopian and Swahili are scarce and largely unavailable” (p. 23). Sometimes, interpretation is not provided deliberately to save money: “58% of the monitored court hearings were assisted by interpreters. In 2020 the regional administrative court in **Haskovo** regularly omitted to engage interpreters in the first hearing on asylum cases in attempt to make savings”. And the services that are provided are often of poor quality, based on the same report, “Both at first and second instance, interpretation continued to be difficult in 2020, and its quality was often poor and unsatisfactory. Interpretation in determination procedures remains one of the most serious, persistent and unsolved problems for a number of years” (p. 23). Finally, the Report states that the interpreters’ Code of Conduct is not followed in practice, which again gives rise to a number of problems for the applicants’ interviews (p. 24).

The report also refers to the videoconference option for interpretation in some reception centres outside Sofia; in these cases, connection problems often disrupt the process (p. 24). As we learn from the CPT Report to the Bulgarian Government (2019), the practitioners interpreting for asylum procedures (quite often via telephone or videoconference) were hired by the Ministry of Internal Affairs either through translation agencies or individually, without providing any further information about their qualifications (CPT Report, 2019, p. 24).

The report finally highlights the lack of interpretation in police stations where new arrived asylum seekers may be held upon entry (p. 73), and the lack of access to psychiatric care for detained foreign nationals because no interpretation is available (p. 74).

Some of the projects in the asylum process include the following:

Legal counselling and interpretation services to asylum-seekers in Bulgaria



IOM Mission, Republic of Bulgaria (11.10.2017-10.10.2022)

The aim of this project is to provide legal assistance and interpretation services to third-country nationals who applied for international protection in Bulgaria.

(<http://2020.eufunds.bg/en/8010436/0/Project/Activities?contractId=WIX1pHT%2B%2Fxm%3D&isHistoric=False>).

Execution of compulsory administrative measures on TCNs and provision of interpretation

Migration Directorate, Ministry of Interior (30.1.2020-31.12.2022)

The project funds the services of interpreters in the field of forced returns. “Funds are foreseen to provide interpretation from and into rare languages for the foreign nationals accommodated in the Special Homes for Temporary Accommodation for Foreigners”

(<http://2020.eufunds.bg/en/8010436/0/Project/Activities?contractId=PgwkGbsD%2F8U%3D&isHistoric=False>).

Provision of integration support to persons seeking or granted international protection

IOM Mission, Republic of Bulgaria (07.12.2017-06.12.2022)

Within the context of the project, a team of interpreters from rare languages provides interpretation support to the project team (psychologist, social worker and legal expert) in their contact with migrants in SAR reception centres and the IOM offices in Bulgaria.

<http://2020.eufunds.bg/en/8010436/0/Project/Activities?contractId=GuErvueg4Nk%3D&isHistoric=False>.

2. Health Care, and other services

The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) of the Council of Europe, in its Report to the Bulgarian government after its visit to Bulgaria in December 2018, highlights the lack of qualified interpretation services for health care for detained foreign nationals, and suggests the avoidance of using fellow detainees as interpreters, which, among other things, breaches medical confidentiality (CPT Report, 2019, pp. 5, 20). The Report also confirms previous references to the fact that the interpreters hired by the Ministry of Internal Affairs only covered asylum procedures but not “daily life situations including medical and psychological consultations” (p. 24).

The report notes the lack of interpreters in Detention Centres and the use of fellow migrants to interpret for them in health care (pp. 39, 58). This evidently leads to “negative consequences, including misunderstandings, aggressive behavior towards personnel and unwillingness of GPs to register asylum-seekers and refugees. Additionally, health professionals are constantly worried that their diagnoses and prescriptions are not well understood by the migrants, which can in turn adversely impact treatment” (p. 58).

Among its recommendations, CPT includes “standardized procedures in order to guarantee the presence of competent/fully trained interpreters and cultural mediators for all



the steps of the reception system (not only during initial registration)” (p. 65).

The language barrier in the health sector is also highlighted in IOM's *Mapping Report on Legal Frameworks and Assistance Available to Migrant Victims of Sexual and Gender-Based Violence (SGBV)* published in 2020 (p. 22);¹⁵ IOM and NGOs try to fill in this gap, by providing information on the Bulgarian health system through interpreters, who also accompany migrants to medical facilities.

Some recent projects in the field are the following:

Social Mediation: Program for direct work with refugees and asylum seekers

Council of Refugee Women in Bulgaria (CRWB)

<https://crw-bg.org/en/direct-work-programs/>

Social mediators in this programme speak Bulgarian, Arabic, Farsi and English. They are trained by CRWB and sometimes work in reception centres. “Social mediators provide support on cases related to education – enrollment in schools and kindergartens, registration in the health system, social information and access to social services in the community and more”.

Provision of social and psychological support to asylum seekers in Bulgaria

IOM Mission, Republic of Bulgaria (11.10.2017-10.10.2022)

This project includes the services of a cultural mediator who will support a psychologist and a social worker to provide services in SAR (State Agency for Refugees) reception centres in the Sofia Harmanli, Pastrogor and Baniya, as well as at the premises of IOM offices in Sofia and Harmanli.

(<http://2020.eufunds.bg/en/8010436/0/Project/Activities?contractId=bDm8nNtKUI4%3D&isHistoric=False>).

Help for integration

Bulgarian Red Cross Association (11.10.2017-11.07.2021)

One of the three main activities of the project was to provide administrative and legal advice, including provision of ancillary services, such as translation and interpretation.

Improving reception condition

Bulgarian Red Cross Association (11.10.2017-11.07.2021)

https://en.redcross.bg/activities/activities8/rms3/rms3_1

One of the activities is assistance with translation, accompanying migrants to medical facilities for medical examinations / interventions, purchase and provision of medicines, coverage of health care and health insurance costs, as well as the provision of one-off financial assistance (depending on available resources).

¹⁵ The project was implemented in 12 IOM country offices (Belgium, Bulgaria, Croatia, Greece, Hungary, Ireland, Italy, Malta, the Netherlands, Poland, Slovenia and Spain).



2.3 Croatia

2.3.1 Introduction

Croatia, with a population of just over 4 million, has been receiving relatively small populations of migrants who applied for international protection; based on UNHCR statistics, in the period 2016-2021, the country received 10,432 applications for asylum.¹⁶ That is an interesting fact, considering that the country has a large population of immigrants; as Laure Simmonds suggests, “[...] the Republic of Croatia is among the countries of the EU with the best integrated immigrants from third countries, which can only be met with surprise by those people who do not know that these ‘immigrants’ are actually mostly just Croats born in neighbouring Bosnia and Herzegovina, followed by a few immigrants from Serbia, Germany, Slovenia, Kosovo and Macedonia” (Simmonds, 2019). If we add the fact that Croatia is a transit country for the former category of migrants, it is no surprise that CI services and training programmes are few and far between. Consequently, this creates obstacles for the smooth integration of migrant communities; for example, Tučkorić informs us in the AIDA report for Croatia that one of the obstacles faced by unaccompanied children in accessing education was the fact that there were too few interpreters (2021, p. 91).

The lack of interpreting services has been a problem quite often in asylum services and services for the integration of refugees. In their work *Challenges of Integrating Refugees into Croatian Society: Attitudes of Citizens and the Readiness of Croatian Society*, Ajduković et al. (2019) underline this problem on the part of the state administration in a number of cases (pp. 13, 14, 81, 89, 90, 97, 98). In their recommendations, they suggest the use of professional interpreters in schools (p. 108), and in the health-care system (p. 109).

The same suggestion is made by Gregurović et al. in *Integration policies and practices in European and Croatian context: Good practice guide* (2020): “As with the issue of the process of regular integration for persons in the standard international protection procedure, a sufficient number of translators and intercultural mediators need to be ensured in the resettlement program as well, who would act as facilitators in the resettlement process” (p. 128).

2.3.2 CI Training

After careful research, I found two training programmes for interpreters (one for other practitioners working with interpreters):

1. Health care

PROTECT - Preventing sexual and gender-based violence against migrants and strengthening support to victims

IOM Croatia (October 2018-March 2020)

<https://croatia.iom.int/sexual-and-gender-based-violence>

Part of the project was the training of interpreters on SGBV: “The trainings addressed sexual and gender-based violence in general, its context during migration and impact on the individual/migrant, intercultural difference, while the aim was to strengthen the capacity

¹⁶ Data from Refugee Data Finder, UNHCR, <https://www.unhcr.org/refugee-statistics/download/?url=5M6gKa>.



of the participants to provide the appropriate support and to guide survivors whilst taking care of themselves”.

Co-creating a counseling method for refugee women gender-based violence victims

Jesuit Refugee Service (November 2017-November 2019)

http://heuni.education/ccm_gbv_outcomes#rec127208142

The overall objective of the project was to inform and support refugee women who have been victims of gender based violence and to improve their access to services.¹⁷ Part of the programme was the development of a handbook and a training manual for counselling professionals. The handbook, *Handbook on counselling asylum seeking and refugee women victims of gender-based violence: Helping her to reclaim her story*, highlights the highly significant role of the interpreter in counselling victims of violence and gives a number of recommendations to practitioners involving interpreting, e.g. that “it is important to have a professional interpreter who is bound by ethical guidelines”, it is preferable to use a female interpreter because the victim feels more comfortable sharing her story with another woman present and also because male interpreters sometimes “do not feel comfortable themselves in interpreting these topics” or a male interpreter may express “his own feelings and attitudes related to the topics discussed” (Lilja, 2019, p. 48).

In the training manual titled *Gender-Based Violence against Refugee & Asylum-Seeking Women – A Training Tool* (Wells, Freudenberg, Levander, 2019), Chapter 6, “Cross-Cutting Issues”, has a section dedicated to interpreting issues (pp. 41-43). The key messages are: 1. Female interpreters should be hired for interpretations for refugee women; and 2. There are several problems in hiring interpreters for refugee women professionals must be aware of (p. 42). At the end of the subsection there are three exercises for practitioners in order to work on interpretation issues.

2.3.3 CI Services

1. **Asylum**

Based on the country report for Croatia of the AIDA Asylum Information Database (2021 update), there is no code of conduct for interpreters working in the asylum procedure, nor are there any standard qualifications for interpreters; the only stipulations, in terms of qualifications, are a good knowledge of Croatian and a good knowledge of the language s/he is hired to interpret for. Interpreters, who are usually native speakers of the foreign language but many not speak Croatian fluently, are usually not professionally trained or accredited (Tučkorić, 2021, p. 41).

2. **Healthcare, and other services**

The need for interpreters in the health care sector has been constantly noted in different sources (Tučkorić, 2021; Perić & Prokl, 2021). Perić & Prokl, in their report on the research findings on the mental health in local communities affected by earthquakes and the pandemic, highlight the lack of permanent staff in interpretation; some services are provided by NGOs but these are based on funding (Perić & Prokl, 2021, p. 2). This lack of

¹⁷ Participating countries were: Germany, Italy, Greece, Cyprus, Finland and Croatia.



interpreters reduces the quality of health care TCNs receive, according to the report (p. 9). Various NGOs have provided interpreting services to migrants for the medical sector; MDM-BE has been providing these services in cooperation with the Ministry of Health and the Ministry of the Interior (Delescluse & Silov, 2020). Based on the AIDA report on Croatia in 2021, the MDM-Belgique team of a medical doctor, a nurse and 4 interpreters for Arabic and Farsi provided “provided practical support to applicants for international protection in terms of interpretation, provision of information and counselling, transport of patients to health care facilities” (Tučkorić, 2021, p. 93). In certain facilities, the Croatian Red Cross provides a team for psychological assistance (psychologists, psychiatrists and interpreters) (p. 111).

In social welfare institutions where unaccompanied children are hosted, there is a “lack of systematic support from interpreters, which is why professionals communicate with children using Google Translate or English” (Tučkorić, 2021, p. 98). A project that tried to fill the gap in this sector was a “mobile team for unaccompanied children consisting of experts from the Center for Missing and Exploited Children (CMEC) (social worker, social pedagogue and cultural mediator) who provide direct support to unaccompanied children and professionals in social welfare all over Croatia” (Marušić, 2019, p. 10)

We should also refer here to the Action Plan drafted by the Office for Human Rights and the Rights of National Minorities. Measure 1 of Action 5 provides for mediation “in health care institutions for persons who have been granted international protection, to ease their understanding of the scope of their work, and overcome language and cultural barriers” in cooperation with the Croatian Red Cross (Action Plan, 2017, p. 10).

Apart from the above services, a programme that provided interpreting services for refugees and migrant women and children:

Project “Invisible emergency – provision of health care assistance to refugee and migrant women and children in Croatia (phase 2)” – supported by Unicef office for Croatia/ implemented by MDM-BE

MdM-BE (January 2018-)

<https://medecinsdumonde.be/system/files/publications/downloads/MdM-BE - Croatia Hidden human faces Dublin - June 2018.pdf>

With a team of two general practitioners, one nurse and two interpreters, “Médecins du Monde-Belgique” (MdM-BE) carries out primary health care consultations and official initial medical screening of newly arrived asylum seekers in Zagreb and Kutina facilities on a daily basis.



2.4 Cyprus

2.4.1 Introduction

Cyprus, the smallest of the partner countries with a population of 1,2 million people, received 63,426 asylum applications in the period 2016-2021.¹⁸ If we consider the asylum applications only, they are 5,3% of its population, which is a really significant percentage for its size. It is interesting to see, therefore, what services it has in place for its migrant communities.

2.4.2 CI Training

A large part of interpreter training for asylum services is undertaken by the European Union Agency for Asylum (EUAA, former EASO – European Asylum Support Office). A few other training programmes for interpreters or involving interpreters, either in asylum services or in other settings, are undertaken by NGOs.

1. Asylum

Operating plan 2022-2024 agreed by European Asylum Support Office and the Republic of Cyprus

EASO (presently, EUAA – European Union Agency for Asylum) (2022-2024)
https://euaa.europa.eu/sites/default/files/OP_CY_2022-2024.FINAL_.pdf

In December 2021, the then European Asylum Support Office, the Ministry of the Interior and the Supreme Court of the Republic of Cyprus signed an agreement for “provision of technical and operational assistance by EASO to the Republic of Cyprus” (Operating plan, 2021, p. 2). Although the plan refers to the provision of interpreting services in the asylum process, it does not refer to training for interpreters, specifically, contrary to the previous Operating plan (for the year 2021), which provided for interpreting training under Measures CY2 (Cyprus strengthens the implementation of CEAS reception conditions within the framework of an integrated reception model) and CY3 (Support the asylum system to efficiently and effectively process first instance applications): “Training for interpreters on the EASO module Interpreting in the Asylum Context” (Operating plan, 2020, pp. 17, 19, 21). For CY3, the agreement states that “EASO may offer additional training [for interpreters] on the basis of needs and availability of resources” (p. 21). The new Operating plan refers generically to training, without specifying sectors (apart from security training): “Training needs identification will be supported by EASO in 2022-2024. A needs assessment on training needs will be conducted and activities and on-the-job coaching will be organised involving Cypriot authorities. Modules of the EASO Training Curriculum, workshops and ad hoc thematic sessions can be organised to strengthen the capacity of relevant stakeholders. EASO activities will also support CAS [Cyprus Asylum Service] to strengthen their internal training structure” (pp. 26-27).

2. Health care and other services

Co-creating a counseling method for refugee women gender-based violence victims

¹⁸ See UNHCR Refugee Data Finder, <https://www.unhcr.org/refugee-statistics/download/?url=v16LGS>.



Cypriot partner: Cyprus Council for Refugees (November 2017-November 2019)
See above (Croatia).

2.4.3 CI Services

1. **Asylum**

Interpreting services for the asylum processes are covered by EUAA and a number of NGOs based in the country (e.g. Cyprus Refugee Council¹⁹). One of the issues that arises because of the limited human resources in the country is noted by the AIDA report:

Asylum Service caseworkers often conduct interviews in English, using interpretation where needed. This is due to the fact that it is easier to identify interpreters that can speak the applicant's language and English rather than Greek. This, however, often affects the quality of interviews where the caseworker would arguably be more comfortable using Greek instead of English. The language barrier is often visible in the interview transcript and the recommendation, which often have several grammar, spelling and syntax mistakes. As such, statements may be misunderstood or passages are poorly drafted or unclear. (Drousiotou, 2020, p. 34)

The report also raises concerns about the lack of professionalism on the part of interpreters, lack of adequate training, lack of a code of conduct; "Asylum seekers often complain about the quality of the interpretation as well as the impartiality/attitude of the interpreter, yet such complaints are seldom addressed by the Asylum Service" (p. 34). Another problem is that asylum applicants may not have legal representation during the appeal process; as a result, "the court interpreters fill the gap created by the lack of legal representation often leading to incorrect advice and guidance and in some instances raising questions of exploitation of applicants" (p. 38).

In the case of the Medical Boards responsible for evaluating torture claims, quite often there was no interpreter present or sometimes, based on reports, "children of victims of torture assumed the role of interpreters" (p. 58). The same problem is faced in medical examinations for detainees, where other detainees undertake the role of the interpreter (p. 118).

The Report on the family-based care for unaccompanied children also reports linguistic barriers for practitioners working with children and families (Shahbenderian, 2019, p. 9).

3. **Health care and other services**

The communication of migrant communities with the various public services is usually

¹⁹ Although the Cyprus Refugee Council does not explicitly refer to such services on its website, a vacancy announcement for a Cultural Mediator/Interpreter (French) states that the candidate will be hired "for the project *Strengthening Asylum in Cyprus* funded by the United Nations High Commissioner for Refugees (UNHCR) Country Office in Cyprus. The Cultural Mediator/Interpreter (French) will carry out duties at the First Registration Reception Center in Kokkinotrimithia and CyRC office" (<https://www.cyrefugeecouncil.org/vacancy-announcement-cultural-mediator-interpreter-french/>).



carried out through peers or interpreters provided by civil society organisations (CSOs).²⁰ As we learn from some sources, interpreting services are lacking or non-existent; for example, the report for victims of trafficking, *Mind the gap report: COALESCE for support in Cyprus*, suggests that although interpreting services are stipulated in the legal framework, “participants found there was a lack of provision of information in their native language(s) and a similar situation when they were being interviewed by police” (Kaili, 2021, p. 24); one of the victims “found her interview with the SWS and the police to be very hostile, which was frustrating and upsetting; meanwhile, the French interpretation was inadequate, which exacerbated the situation” (p. 28). So, one of the recommendations of the report is for “Cypriot authorities [...] to train interpreters to the issue of human trafficking” (p. 47).

Another report on the same issue (GRETA, 2020) also highlighted the problem of quality, and sometimes even lack, of interpreting and stated that “The Cypriot authorities have indicated that the police has established a record on registered interpreters, and translation and interpretation services are provided to victims of trafficking at all stages of their protection and social support, including during their stay at the state shelter” (p. 14). The authorities also informed GRETA that they would undertake a training programme for interpreters in 2020 (p. 15).²¹ One of their recommendations was “that the Cypriot authorities should take further steps to sensitise interpreters to the issue of human trafficking” (p. 14).

Several NGOs provide services in health care or other public services; the following is a project that involves interpreting:

Community based psychological support

Cyprus Red Cross Society

<https://www.cypsa.org.cy/wp-content/uploads/2020/11/A3-Papadopoulos-N-PSS-Community-Based-PSS-Actions-Cyprus-Red-Cross.pdf>

The Cyprus Red Cross Society offers “Psychological support on a weekly basis by a team of Forensic Psychologists and an Interpreter” in the Centre for Reception and Accommodation of Applicants International Protection. The information provided does not specify the duration of the service, nor does it give any more details.

²⁰ See, for example, the *Guidelines for best practice of inclusion based on Needs Analysis of refugee families* (Anastassiou, 2018).

²¹ Although I tried to find training programmes for interpreters working with victims of trafficking undertaken by the government of Cyprus, I did not find anything relevant.



2.5 Greece

2.5.1 Introduction

Greece, a small country with a population of around 10 million people, has been grappling with the impact of the refugee crisis in Europe for years now disproportionately to its size and capacities, because of its strategic location at the southeastern external borders of the EU. It is the natural entry point for migrants arriving from Asia, but it has also been receiving illicit migrants from African countries. It received over 400,000 applications for international protection in the period 2016-2021, based on the Refugee Data Finder (<https://www.unhcr.org/refugee-statistics/download/?url=jb6c5K>). If we add to this huge number for a small country which was traditionally a country of emigrants, the diversity of applicants (Pakistan, Afghanistan, Syria, Bangladesh, Albania, Iraq, Democratic Republic of Congo, Somalia, Türkiye, Egypt, Iran, etc), it is easy to understand the huge task of addressing the needs of applicants to communicate with authorities (asylum, health care, education, etc.), but also the overall needs of migrant communities residing in the country. Although most migrants see the country as a transit point in their route towards central or northern Europe, conditions force them to stay much longer than they would like, trapped in a limbo condition of perpetual waiting.

This situation has largely overwhelmed the public authorities, which have not been able to deal effectively with mounting needs in many fields, one of which is interpreting. Therefore, the role of the state has been filled by NGOs mostly, that provide training to interpreters and interpreting services to state authorities or employ interpreters who accompany migrants to public services. The state has been trying for years to create a National Register of Intercultural Mediators,²² but it is not in operation yet.

2.5.2 CI Training

As I said above, training has been undertaken by NGOs mostly and is, in most cases, of short duration, fragmented and discontinuous. Since no specific qualifications are requested for community interpreters, apart from the knowledge of Greek and a second language, there seems to be no need for high quality training courses. Recently, some isolated modules have started to appear in undergraduate or postgraduate programmes in Greek universities,²³ following research

²² I decided not to use the translation of the project as it appears on the Ministry of Migration and Asylum website (Recording of Intercultural Mediators), because I find it problematic (<https://migration.gov.gr/en/migration-policy/integration/draseis-koinonikis-entaxis-se-ethniko-epipedo/draseis-diapolitismikis-diamesolavisis/>).

²³ For example, the Postgraduate Course in Translation Studies and Interpreting of the School of English, Capodistrian University of Athens, offers the module “Medical Interpreting”. Also, the School of Foreign Languages, Translation and Interpreting, Ionian University, offers a module on “Community Interpreting”. I should note here that in June 2022 a new postgraduate distance course was announced in Intercultural Education and Intermediation, organized by the Universities of Nicosia and Patras; this is a paid course and there is no reference to the fees charged on the course website; it is also mostly addressed to Greek and Cypriot educators who wish to enhance their chances of employment in primary and secondary education in the public sector, since this MA will give them extra points in their applications (<https://www.unic.ac.cy/intercultural-education-and-mediation-med-2-years-or-4-semesters-joint-degree-with-the-university-of-patras-distance-learning/>).



work undertaken by a number of scholars in the field.²⁴

The list of training programmes that follows is not exhaustive and it includes the most recent projects. There are training programmes, which I will not present here, offered by some NGOs (Hellenic Red Cross, Babel, etc.²⁵) but their duration is merely a few hours (from 2 to 12 hours).

1. *Training of interpreters*

Metadrasi (ongoing)

<https://metadrasi.org/en/campaigns/training-of-interpreters/>

Metadrasi was the first NGO to provide training for interpreters working for public services in Greece. Its ten-day training programmes (Interpreters' Training Seminars), which started in 2010, leads to a Certificate of Proficiency for the Provision of Interpretation Services, which the candidate is awarded if s/he passes written and oral exams. Once they succeed, they are included in the NGO's registry and may be used in future projects. The NGO informs us on their website that their interpreters follow a Code of Ethics, but no further information is given. The NGO is quite secretive about its training programme (no information is given about its modules) and its registry of interpreters.²⁶ The training focuses on interpreting in asylum and medical contexts.

2. *Training programme "Intercultural Mediators" for 60 young people and teenagers*

Greek Manpower Employment Organisation – UNICEF (250-hour training, 2021)

<https://www.dypa.gov.gr/proghramma-katartisis-oaed-unicef-diapolitismiki-mesolavites-ghia-60-neoys-kai-efivoys>

This is a comparatively new programme offered by a state body; the 250-hour training started in November 2021 and it comprises the following units: Teaching Greek as a second language (125 hours); Teaching business English (25 hours); Development of digital skills (20 hours); Development of social and vocational skills for the profession of the Intercultural Mediator (80 hours). As we can easily understand from the units included, the course is not really relevant to the practice it is associated with.

3. *Be a #future interpreter(s) now*

SolidarityNow – (96-hour training, 2017)

https://www.solidaritynow.org/en/future_interpreters/

²⁴ Some scholars who have worked extensively in the field are Stefanos Vlachopoulos, Foteini Apostolou, Anastasios Ioannidis, Effie Fragkou, Zoi Resta, and others.

²⁵ See https://babeldc.gr/wp-content/uploads/2022/04/Invitation_training_on_cultural-mediation.pdf for Babel, and <https://www.accmr.gr/el/υπηρησειςεξ/service/360-ομάδα-διεμνηνέων-συνοδών.html> for Hellenic Red Cross.

²⁶ As we learn from the NGO's website, "**877 people** have obtained the certificate of proficiency in **43 languages and dialects**: Albanian, Amharic, Arabic, Asante, Armenian, Badini (Kurdish), Bambara, Bengali, Dari, English, Farsi, French, Georgian, Hindi, Igbo, Indonesian, Kurmanji (Kurdish), Lingala, Maghrebi Arabic, Mandarin, Moldovan, Oromo, Pashto, Portuguese, Pothwari, Pular, Punjabi, Russian, Serbian, Sinhala, Somali, Sorani (Kurdish), Spanish, Susu, Swahili, Tamil, Tigrinya, Turkish, Twi, Ukrainian, Urdu and Wolof" (<https://metadrasi.org/en/campaigns/training-of-interpreters/>). No small feat.



A very active NGO in the field of migrant support. This is a programme carried out with the support of Gorilla Foundation and in cooperation with the Society for the Care of Minors and PEEMPIP.²⁷ The sections of the programme were: 1. Introduction to the concept and techniques of Intercultural Mediation; 2. Introduction to the concept and techniques of Translation; 3. Introduction to the concept and techniques of Interpreting; 4. Greek language support course; 5. Interpreting in health settings; 6. Legal/court interpreting; 7. Interpreting in asylum proceedings.

2.5.3 CI Services

In recent years, a broad range of interpreting services are offered for facilitating communication between migrants and public services.

Services are usually offered by NGOs, who hire the interpreters to accompany migrants to the various services. But even then, there are still obstacles; in a very recent Briefing Note (May 2022), INTERSOS Hellas points out the dire conditions on the island of Lesbos (arrival point for hundreds of migrants annually): “people with substance abuse problems have access only to prevention counselling programmes, which do not provide psychiatric support or interpreting, services that are necessary for the bridging of language and cultural obstacles”. The same note refers to “lack of hospital interpreting (interpreters employed by NGOs, who accompany patients in order to fill the gap, are often sent away without any justification)” (INTEROS, 2022).²⁸

The main problems are the lack of systematic, comprehensive, organized training by a state body that will ensure a higher quality of services, and the lack of long-term contracts for these positions; jobs depend on funding from the EU or other institutions and bodies, and the contracts interpreters are offered are short-term; they work in difficult conditions sometimes waiting until the funding arrives so they can get paid, while the renewal of their contracts depends on the continuation of the funding, which leaves them in limbo most of the time. An example of the extreme difficulties faced by interpreters can be found in a Facebook announcement of the Union of employees in NGO Arsis, related to their strike:

Interpreters go literally to every hospital, health centre, every apartment in Attica on a daily basis so that we offer our services. As the ESTIA project refused to offer funding for a sufficient number of interpreters, we are called upon by the NGO to bend over backwards so that the elemental and serious requests of beneficiaries are met. This, of course, has not changed due to the pandemic, since for us remote work rarely applies, because we interpreters are expendable.

(<https://www.facebook.com/swmateioarsis/photos/a.205134676822354/737046680297815/?type=3>)

1. **Asylum**

In the 254-page AIDA Report for Greece (2021 update), there are references to a “total lack of interpretation services” in detention centres, which leads to a number of problems, part of

²⁷ Panhellenic Association of Professional Translators Graduates of the Ionian University.

²⁸ All translation from Greek are the author’s, unless otherwise stated.



which is the inability of detained persons to challenge detention orders (p. 23); “No psychiatrist or psychologist was present at any PRDF [Pre-removal Detention Facility] across the country at the end of 2021, as well as no interpreter” (p. 23). There are many references in the report of problems with lack of interpretation, limited access to interpretation, use of other detainees for interpretation, etc. (p. 23, 52, 55, 149, 190, 219-221, 226

EUAA (European Union Agency for Asylum) and NGO METADrasi offer interpreting service to the Greek authorities for its asylum processes, but EUAA states in the new operating plan for the period 2022-2024 that “EUAA support to interpretation will be gradually phased out during the programming period with a view to allowing the hand-over to Greek authorities” (EUAA, 2022, pp. 21, 26).

What seems somewhat promising is the fact that many coordination centres for migrants and refugees in municipalities across the country have started to hire interpreters directly in recent years. Hopefully, the funding will continue in the following years, so that these services are offered to migrant communities uninterruptedly.

2. **Health care and other services**

Interpreting in health care is provided by NGOs who receive funding from various sources. As I explained above, NGOs hire interpreters who accompany migrants to health facilities and other public services, when needed. This creates a number of problems, especially with vulnerable groups of migrants, like victims of torture, who have to rely on NGOs in order to go to a public hospital so that their condition as victims of torture is certified. Recently (2020, 2021), through EU funding many Migrant Integration Centers and Community Centres across the country hired intercultural mediators and interpreters; one interesting point in these positions is the fact that candidates often prove their knowledge of the foreign language by signing a Solemn Declaration, without any other proof.²⁹

The lack of interpreting services for migrants in healthcare facilities and registration offices is highlighted as a persistent problem in the AIDA Report (p. 190, 230). The same problem is pointed out in the 2021 report for Migrant Integration Centres (Keramida et al., 2022, p. 7). In the report *Language and comprehension barriers in Greece’s migration crisis* (2017), some of the key findings in relation to humanitarian aid work were related to the lack of interpreters and the reliance of workers on English-speaking refugees (sometimes children) to enable communication (Ghandour-Demiri, 2017, pp. 31-32).

It is important to note here the service mapping project run by the Athens Coordination Centre for Migrant and Refugee Issues which provides information on all available services in the region of Athens.³⁰ Based on the information, interpreting services are offered by: DCR Greece (Farsi, Dari, Arabic, Kurmanji, French, Sorani); Generation 2.0 for Rights, Equality, Diversity (Greek, English, Arabic, Farsi, Italian, French); HIAS Greece

²⁹ For example, see https://piraeus.gov.gr/wp-content/uploads/2021/01/ANAKOINΩΣΗ_ΟΡΘΟ-ΕΠ_Σ.pdf (accessed June 2022, in Greek).

³⁰ <https://docs.google.com/spreadsheets/d/1fCtXP-93Xn24WRz7P5gJmxAzNzP8RIYh/edit#gid=1861367124&fvid=704938465>, in Greek.



(English, Arabic, Farsi, French); Praksis (no languages are mentioned); Humanitarian Initiative – BRIDGES (Arabic, Sorani, English, Greek); Arsis (Arabic, Sorani, Urdu, Greek); MSF OCG (no languages mentioned); Network for the Rights of the Child (English, Greek, Farsi, Arabic, Urdu); Hellenic Red Cross (Arabic, Farsi, Dari); Caritas Hellas (Greek, English, French, Farsi, Arabic); Synyparxis (Greek, English, French, Arabic, Farsi, Dari).

Since there is a multitude of programmes for interpreting offered by a number of NGOs active in Greece,³¹ I will mention only a few very briefly.

First Reception and Interpretation Unit

Greek Council for Refugees (GCR) – ongoing

<https://www.gcr.gr/en/our-work/our-services/first-reception-unit>

The GCR have a permanent service called First Reception and Interpretation Unit: “First Reception and Interpretation Unit of GCR undertakes the first contact with our beneficiaries. The interpreters, conveying the socio-historical-cultural elements that characterize each case, contribute significantly to the smooth operation of the other two Services, while also participating in visits to detention centers, courts, hospitals, refugee accommodation structures, etc. Our interpreters provide their services , in addition to Attica and Thessaloniki, Ioannina, Samos, Rhodes, Chios, Lesvos and Leros, as well as the safe zones of the Eleonas and Alexandria Refugee Hospitality Structure”.

Provision of interpretation to healthcare services

METADrasi – ongoing

<https://metadrasi.org/en/campaigns/interpretation-healthcare-services/>

METADrasi receive funding from various sources (European Commission, IOM) to provide interpreting services in Greek hospitals. As they mention in their site: “To date, METAdrasi interpreters have provided more than 176,000 interpretation sessions in hospitals, in 42 languages and dialects (in Arabic in Arabic and Farsi/Dari mainly, but also in other languages, such as Urdu/Punjabi, Sorani, Kurmanji, Bengali, Lingala, Tigrinya, Turkish, Georgian, Moldovan, etc.). Every day, METAdrasi receives interpretation requests”.

Interpretation for education

METADrasi – ongoing

<https://metadrasi.org/en/campaigns/interpretation-education/>

The same NGO runs a programme for interpretation in schools (supported by UNICEF) in cooperation with the Greek Ministry of Education and Religious Affairs. Through this programme the NGO “has provided interpretation services in public schools, aiming to enroll and integrate refugee and migrant children into formal education systems. Through the programme “Interpretation for Education”, certified interpreters in over 20 different

³¹ Some of the NGOs that are not mentioned here and work with migrant communities are: Action Aid, A Drop in the Ocean, Ark of the World, Arsis, Caritas, Danish Refugee Council, Doctors of the World, Global Medic, Human Appeal, Médecins Sans Frontières, Organisation Earth, Praxis, The Orange House, ZEUXIS, etc.



languages have visited more than 260 schools in Attica, Central Macedonia and Epirus”.

TRAMIG – Training newly arrived migrants for community interpreting and intercultural mediation

Aristotle University of Thessaloniki (2019-2020)

<https://tramig.eu/>

Based on the site website “The longterm aim of the project is to enhance a successful inclusion of the newly arrived migrants into the linguistic and economic mainstream of the host country by enabling them to access community or public services, and work independently as community interpreters and/or intercultural mediators, in particular in healthcare settings, or as assistants in programs training community interpreting and intercultural mediation”. The project produced a volume titled *Teacher education for community interpreting and intercultural mediation: Selected Papers* and 5 workshops; it also drafted “a proposal for the national occupational standards and vocational qualification for community interpreter and intercultural mediator and the working definition and description of the trainer profile” (<https://tramig.eu/outputs/>).

Safeguarding children at Greek border points (Merimna)

UNICEF, IOM Greece, METAdrasi, NetHope, NGO Iliaktida, NGO Zeuxis – (March 2019-March 2020)

<https://greece.iom.int/safeguarding-children-greek-border-points-merimna>

One of the objectives of the project is to enhance access of children and their families to formal education and structured Non-Formal Education (NFE) learning opportunities, “through interpretation services aiming to facilitate communication and overcome language barriers between school staff and migrant/refugee students and their parents, thus promoting their integration and inclusion within Greek society”.

The Survivor Project: Enhancing services for refugee and migrant GBV survivors

Diotima – Centre for Gender Rights and Equality (leader) (Sep 2018-Sep 2020)

<https://diotima.org.gr/en/cases/the-survivor-project-enhancing-services-for-refugee-and-migrant-gbv-survivors-2/>

Aim of the project was to “enhance the quality and access of services for refugee and migrant GBV survivors in Greece and strengthen GBV programming through transnational dialogue and sharing GBV best practices, resources and tools in Greece and Europe”. The project was funded by DG Justice. During the programme, telephone interpreting was provided around the clock in Arabic and Farsi, and on site interpreting in the Region of Attica (Arabic and Farsi), and the region of Thessaloniki (Arabic). One of the outcomes of the project was the “Guidance document for cultural mediators working at services for GBV survivors” in English, Greek, Farsi and Arabic. This short 8-page guidebook comprises four sections: 1. Understanding Gender based violence; 2. On culture; 3. Guiding principles for cultural mediators working in support services for GBV survivors; 4. Useful resources for interpreters/cultural mediators (Xythali, 2019, p. 2). The project partners were the General



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Secretariat for Gender Equality (GSGE), the Research Centre for Gender Equality (KETHI), and the International Rescue Committee Hellas.



2.6 Italy

2.6.1 Introduction

Italy, one of the largest European countries with a population of around 60 million, has been receiving very large migration flows from African and Asian countries in the past few years. In the period 2016-2021 412,382 people filed asylum applications in the country (Refugee Data Finder, <https://www.unhcr.org/refugee-statistics/download/?url=sU3T1W>).

The confusion over terms is prevalent here as well, with the term “intercultural mediator” prevailing in public service settings.³² Maurizio Viezzi presents the situation in terms of training and qualifications of intercultural mediators as follows: “Requirements as to the education level, training or accreditation are not always consistent and very often training courses organised by local institutions do not include appropriate interpreting training. Furthermore, anyone may claim to be a ‘mediator’ and public service providers may (and often do) resort to untrained and non-professional mediators. Mediators may be Italian or not; they are typically freelancers working through agencies in all public service settings” (Pokort et al., 2020, p. 25).

In Italy, approaches differ by region, which makes it difficult to shape a national strategy on community interpreting and, for the purposes of this analysis, to present a complete overview of the field in the country.³³ As A. Genova and E. Barberis put it in their paper “Social workers and intercultural mediators: challenges for collaboration and intercultural awareness”, “the Italian integration model for migrants’ is heavily dependent on an unplanned micro regulation in which local practices play a focal role (Barberis & Boccagni, 2014). In parallel there is an increasing regionalisation of welfare policies” (Genova & Barberis, 2019, p. 911).

We should also mention the commendable initiative of the Municipality of Rome to establish a registry for intercultural mediators (<https://www.programmaintegra.it/wp/registro-pubblico-dei-mediatori-interculturali-di-roma-capitale/>).

2.6.2 CI Training

Italy is one more country where training for interpreters working with migrant communities is not formally organized by state institutions. M. Viezzi refers briefly to training practices in the country: “Several regions and provinces organize ad-hoc courses for aspiring ‘linguistic-cultural mediators’. There are considerable differences in terms of course structure and length. The emphasis, however, is generally on areas such as legislation, rights, and services. They are typically attended by foreign residents with some experience in the field. The language and language mediation aspects are largely neglected or play just a minor role” (Pokorn et al., 2020, p. 26).

The training of interpreters working for the asylum procedure is mandatory by law but the implementation is not in place; as the AIDA Report informs us: “By law, the National Commission

³² For a detailed analysis of this confusion see contribution of M. Viezzi, C. Falbo, A. Chiarenza, & A. Ciannameo in “The profiles of a community interpreter and of an intercultural mediator in Greece, Italy, Norway and Slovenia” (Pokorn, et al., 2020, pp. 25-31).

³³ The case of the Region of Emilia Romagna, for example, is presented by Chiarenza and Ciannameo, in their contribution in the paper “The profiles of a community interpreter and of an intercultural mediator in Greece, Italy, Norway and Slovenia”; the Region of Emilia-Romagna is one of the few Italian regions that defined the profile of these practitioners, as the authors inform us (Pokorn et al., 2020, 26-31).



should also provide training to interpreters to ensure appropriate communication between the applicant and the official who conducts the substantive interview. However, in practice interpreters do not receive any specialised training. Some training courses on asylum issues are organised on *ad hoc* basis, but not regularly” (Bove, 2022, p. 25). After some research, I found a few courses for interpreting in the asylum context, but they charge fees, which makes it difficult for TCNs to attend.

Asylum training excluded, there are a plethora of courses by NGOs and other institutions (see a short list below) that tend to be generic in nature.

There are some university courses in Intercultural Mediation (e.g., BA in Linguistic and Intercultural Mediation, Università di Catania, BA in Linguistic Mediation and Intercultural Communication, Università degli Studi “G. d’ Annunzio”, Chieti, Pescara), but they are mainly addressed to Italian candidates who are interested in working in other sectors.

1. **Health care and other services**

Intercultural Mediator courses by private institutions (this is only a small list of courses offered – no fees)

IUL online university (1500 hrs both online and in person)

<https://www.iuline.it/en/specialisation-refresher-courses/mediatore-europeo-per-linterculturale/#>

Mediali Impresa Sociali S.r.l. (420 hrs of theory + 180 hrs practice)

https://mediali.it/corsi_gratuiti/corso-gratuito-per-mediatore-interculturale/

Proxima (250 hrs of theory + 250 hrs of practice)

<https://www.proximaformazione.it/mediatore-interculturale/>

ENAIP, Ente Nazionale Acli Istruzione Professionale (400 hrs theory + 200 hrs practice)

https://www.enaip.piemonte.it/page/corsi/corso/MEDIATORE-INTERCULTURALE_20717_.html

SFEP – Città di Torino (400 hrs of theory + 200 hrs of practice)

<http://www.comune.torino.it/sfep/sfep/formazione/mediatore.shtml>

Assofram.it (600 hrs)

<https://assofram.it/mediatore-culturale/#toggle-id-3>

TRAMIG – Training newly arrived migrants for community interpreting and intercultural mediation

Italian partners: The University of Trieste

The Local Health Authority of Reggio Emilia (AUSL-IRCCS RE) (2019-2020)

<https://tramig.eu/>

See above (Greece)

Co-creating a counseling method for refugee women gender-based violence victims

Italian partner : Consiglio Italiano per i Rifugiati & G.I.R.A.F.F.A. Gruppo Indagine

Resistenza alla Follia Femile (November 2017-November 2019)



http://heuni.education/ccm_gbv_outcomes#rec127208142

See above (Croatia).

2GEM – Second Generation of European Migrants

Italian partner: PRISM Impresa sociale s.r.l.

<https://2gem.eu/>

See above (Bulgaria)

2.6.3 CI Services

As we saw above with training, interpreting services are mainly offered through NGOs or private organisations that employ interpreters. There are numerous such bodies, who offer services in various areas relevant to migrant communities; some of these organisations include: Cooperative ITC Interpreti Traduttori (<https://www.cooperativaitc.org/>), AMIr – Associazione Mediatori Interculturali Reggio Calabria (<https://amirintercultura.org/>), Emergency ONG (<https://en.emergency.it/what-we-do/italy/>), the Italian Refugee Council (<http://www.cir-onlus.org/>), MSF Italy (<https://www.msf.org/italy/>), and many others.

1. Asylum

Interpreting for the asylum procedure is undertaken by the Cooperative ITC Interpreti Traduttori. As they mention in their website, they have been working with EASO (presently EUAA) since 2016 to provide interpreting services to relocation, pre-identification, registration, asylum hearings, etc.

The European Union Agency for Asylum (EUAA) in its Operational Plan 2022-2024 for Italy refers to a number of measures where it will provide interpreters/mediators to support Italian authorities: Measure IT1 – Access to asylum procedures: support to the timely and harmonised lodging of international protection applications; Measure IT2 – Support the quality and standardization of the Dublin and asylum determination procedure; Measure IT3 – Support to the management of judicial backlog (“cover for interpretation needs of the specialised sections of the tribunals” and “support interviews at hearings through the provision of cultural mediators, according to needs”, pp. 27-28); Measure IT4 – Support to the quality management and monitoring of the Italian reception system; Measure IT5 – Support to the cooperation mechanism/ solidarity among EU MSs and to improve timely coordination of the main stakeholders, including emergency situations such as SAR disembarkation events and voluntary relocations; Measure IT6 – Support the access to information provision for international protection applicants and the timely identification and referral of vulnerable applicants and persons with special needs; Measure IT7 – Support the effective implementation of the Temporary Protection Directive (TPD).

In the case of Italy, AIDA again refers to a “shortage of professional interpreters and linguistic mediators” in reception facilities which means that applicants are not properly informed (Bove, 2022, pp. 104, 153, 189). The same lack is mentioned in the *GREVIO Baseline Evaluation Report* which focuses on victims of violence; the Report repeatedly



suggests the lack of stable intercultural mediators, or complete absence of mediators, in reception centres and the asylum system (GREVIO, 2020, pp. 13, 82, 83). The same conclusion is reached by Genova & Barberis who researched intercultural mediation services in the Marche region, in central Italy and found that “Only one of the 23 local social service districts had a structured intercultural mediation service, settled as part of the social service staff. A man and woman, mediators in different cultural-language areas (Arabic/French, Spanish/English), had been recruited with permanent full-time contracts” (Genova & Barberis, 2019, p. 912-913).

We should also note the commendable legal framework for unaccompanied foreign minors (UFM) which provides for cultural mediation at various stages: 1. Identification & socio-medical age assessment (Article 5); 2. Right to health and education (Article 14); 3. Right of UFM to be heard in court hearings (Article 15) (L n. 47/2017, Provisions on protective measures for unaccompanied foreign minors).

2. **Health care and other services**

In Italy, health care interpreting is provided through intercultural mediators, since the general belief is that in a health care setting cultural proximity to the patient is as important as interpretation.

As in the majority of the other countries we examined so far, in Italy, access to health services is greatly impeded by a lack of interpreters: “One of the most relevant obstacles to access health services is the language barrier. Usually medical operators only speak Italian and there are no cultural mediators or interpreters who could facilitate the mutual understanding between operator and patient. Therefore asylum seekers and refugees often do not address their general doctor and go to the hospital only when their disease gets worse. These problems are worsening due to the adverse conditions of some accommodation centres and of informal settlements” (Bove, 2022, p. 144).

Emergency ONG runs a number of outpatient clinics across Italy, mobile clinics, they provide psychological support to agricultural workers in Sicily, Information and prevention for the “commercial sex workers”, information points for socio-medical counselling in Brescia and Palermo (<https://en.emergency.it/what-we-do/italy/>).

The *ITC* has also been offering interpretation services to the Department of Social Policies, Subsidiarity and Health of the Municipality of Rome for unaccompanied minors.

Many regions offer similar services to citizens who face language barriers in their communication with public services. Again, services are not always available.



2.7 Sweden

2.7.1 Introduction

Sweden, a relatively small Nordic country with a population of just over 10 million, has a long tradition in community interpreting, in terms of research, practice and training. One of the seminal works in the field came from a Swedish scholar, Cecilia Wadensjö (Stockholm University, Department of Swedish Language and Multilingualism), who wrote *Interpreting as Interaction: On dialogue interpreting in immigration hearings and medical encounters* in 1992, and paved the way for academic research in the field and for establishing a professional profile for community interpreters.

What is important to note in this case is that in the country there is no reference to “intercultural mediators” or any other practitioners, other than interpreters. All services in the field, whether in the asylum process or any other social service (health care, education, housing, courts, etc.) are provided by interpreters who are authorized at national level by a national authority, which also keeps a national register of interpreters but does not mediate in the process of hiring their services. Community interpreting services are funded by the state and, since 2017, they are mandatory when a citizen who does not speak Swedish needs to go to a public service.

2.7.2 Training

As Gustafsson, Norström, & Fioretos (2012) inform us in their paper “Community interpreter training in spoken languages in Sweden”, “Interpreter training programs have [...] existed in Sweden since the end of the 1960s, built on public-service needs in the areas of social insurance, the labor market, health care, and the courts. The Swedish Immigration Board and municipal immigrant service bureaus led the development of these programs, initially at the Nordic Folk High School and then at other folk high schools, study organizations, and universities in Stockholm, Gothenburg, and Lund” (p. 29).³⁴

Sweden has a highly organized system for authorization of interpreters. Based on Norström, Fioretos, and Gustafsson, “[t]he first community interpreters were authorised by the National Board of Trade in 1975. Since then, *authorized interpreter* and *authorized translator* are protected professional titles” (2012, p. 244). At present, the Legal, Financial and Administrative Services Agency (Kammarkollegiet) has the task of authorizing translators and interpreters. As the agency mentions on their website: “We conduct authorisation tests for interpreters in about 50 languages. For interpreters, the tests are held at two levels: authorised interpreters and authorised interpreters with special expertise as legal interpreters and healthcare interpreters” (Kammarkollegiet, 2022). That means that the state offers further specialization in legal and healthcare settings, which enables better quality services for interpreters working in these two settings.

They same agency keeps a national register for authorized interpreters and translators (<https://www.kammarkollegiet.se/engelska/start/all-services/interpreter/search-interpreter>). The

³⁴ Kammarkollegiet, on their website, explain what a folk-high school is: “Folk-high School provide post-secondary education and are common in the Nordic countries and northern Europe. Folk-high schools do not grant academic degrees, although they may teach academic topics” (<https://www.kammarkollegiet.se/engelska/start/all-services/interpreter/search-interpreter>).



webpage informs us that there are two types of interpreters: 1. “Authorised interpreters have passed an advanced professional examination and are subject to the supervision of Kammarkollegiet. In some languages there are authorised interpreters with special authorisation as health care interpreters or court interpreters”; 2. “Trained interpreters have completed a programme organised by a Higher Education Institution or with the support of the Swedish National Agency for Higher Vocational Education (Myndigheten för yrkeshögskolan)”.

There are three lists of selection on the registry: 1. Language (65 languages listed); 2. Competences: Authorised interpreter, Court interpreter, Health care interpreter, Educated interpreter (you can select more than one); and 3. Location.

Based on the AIDA Report, to be authorized, interpreters must not only have language and interpreting skills, but “must also have a basic understanding of areas such as social services and social security, health care, employment and general law, and of the terminology used in these fields” (Nyman et al., p. 31).

The Migration Agency also arranges seminars for interpreters “to standardize terminology”, but “the need for terminological support has not yet been addressed regarding religion-based claims” (Nyman et al., p. 30).

2.7.3 Services

1. *Asylum*

Swedish Migration Agency (Migrationsverket)

The Swedish Migration Agency (Migrationsverket) has an exceptionally organized website, where information is available in 24 languages (Amharic, Arabic, Danish, Dari, English, Finnish, French, Icelandic, Kurmanji, Meänkieli, Northern Sami, Norwegian, Pashto, Persian, Romani, Russian, Somali, Sorani, Spanish, Swedish, Tigrina, Turkish, Ukrainian, and Yiddish).

The Agency “is the authority that considers applications from people who want to take up permanent residence in Sweden, come for a visit, seek protection from persecution or become Swedish citizens”, as its website states. On the 2021 update of the AIDA Report, we are informed that it is responsible “for examining all asylum claims at first instance but also for assessing subsequent applications and determining whether new circumstances can lead to a different outcome in cases that have already been fully processed and where there is a legally enforceable removal order” (Nyman et al., 2022, p. 21).

The importance they give to interpreting is manifested on the website for LGBTQ people seeking asylum; apart from the reference to the right of the asylum seeker to choose the gender of the interpreter, there is a short section titled “Interpreter”, where the beneficiary is informed that “[t]he most important thing is that you describe your own emotions and experiences, and explain how they relate to the reason why you are afraid”; so, “[i]f you do not understand the interpreter or if you think that the interpreter might not be translating everything you say impartially, you must say so”

(<https://www.migrationsverket.se/English/Private-individuals/Protection-and-asylum-in-Sweden/If-you-are-an-LGBTQ-person-who-is-seeking-asylum.html>).



Problems relating to interpreting are on a different level here, compared to the previous countries in the report. The problems no longer move along the axis of lack of availability, or lack of training, but they are related to substantial issues pertaining to specific groups of applicants; for example, “the level of trust in the interpreter can vary, and sensitive issues may be avoided by the applicant” (Nyman et al., 2022, p. 30); or “[o]ccasionally, interpreters request to be relieved of their tasks because the case concerns a convert from Islam” (ibid.), in case the former does not share the same faith.

Another problematic issue mentioned in the AIDA Report in relation to interpreting is about remote interpreting where, in rare cases, “some difficulties arise if the interpreter is not in the same room as the applicant or if the interpreter is not visible by not using the video-function” (Nyman et al., p. 29).

When quality issues become apparent, then either the case worker or the applicant and/or their legal representative can have the interview discontinued and “a competent interpreter will be engaged on the next occasion” (p. 30).

2. **Health care and other services**

Although interpreting services in public settings are usually performed by trained and certified interpreters, as stated above, there are cases when non-professionals are used for a number of reasons and are considered “a necessary evil” by social service staff. The study conducted by Gustafsson, Norstöm, and Höglund on the use of children in multilingual communication found that public service staff relied on children for unplanned meetings and emergency situations and “[i]nstead of waiting for an interpreter to arrive, they sometimes allowed an accompanying child or relative to interpret in immediate and simple situations, e.g. when booking an appointment or to submit or read forms. Public service staff sometimes found it disrespectful to call for a professional interpreter when the service user had brought someone with them to interpret, and also expressed unease at calling for a professional interpreter when service users claim not to trust interpreters and say they feel safer when a relative interprets” (p. 21). However, from the perspective of the individuals who had such a role when children, this role was seen as a serious burden (given that most of the times they interpreted for a number of public services) that sometimes marked their entire childhood (p. 29). Currently, Swedish legislation that passed in 2017 does not allow the use of children as interpreters in public service settings.

A significant drawback to quality that Norström, Fioretos, and Gustafsson identify in their study of the working conditions of community interpreters in the country is the lack of state supervision: “without public supervision of this costly service, legal, medical and social security and the rights of individuals will continue to be compromised” (2012, p. 254).



3. Concluding remarks

3.1 General comments

After examining the interpretation services and training provided by the 7 seven partner countries of the PLOUTOS project, I believe it would be safe to draw a number of conclusions.

With the exception of Sweden and, partly, Belgium, services and training for interpreters working in public services are fragmented, dispersed, unorganized, lacking specific content and structure. This evidently gives rise to a multitude of problems in terms of quality, assessment, availability but also appropriate and dignified working conditions, suitable remuneration, and stability for CIs. If we consider that the majority of practitioners are third country nationals, we can understand that these problems are multiplied, since quite often they do not feel safe to demand better working conditions, and can fall prey to the manipulations of intermediary parties.

The confusion of terms (inter/cultural inter/mediators, interpreters) further deteriorates conditions, since there is a lingering belief that mediators have fewer skills, perform less important tasks, do not adhere to Codes of Ethics, and, thus, should not get better pay or working conditions.

The issue of “nomenclature” aside, I believe some key take-aways naturally emerge from the study:

1. CI services should be provided for all public service settings free of charge;
2. CI specialised training should be provided for different settings;
3. Training and certification should be organized and operated at national level, by a competent authority, since this is an integral part of quality of service in interpreting for public services.
4. A national register of certified interpreters should be formed, so that any interested party can have access to the information, and intermediary bodies are avoided;
5. Training needs should be assessed and reviewed regularly, since conditions and needs change;
6. Codes of Conduct should be drawn up by national authorities for all settings;
7. Research and practice should always cooperate, because their interaction is of paramount importance for a high level of services;
8. Higher education institutions should definitely be involved in the training and certification process, which should be state funded.

Community interpreters are of paramount importance for the smooth communication between state authorities and migrant communities, in areas and times of their lives that are sometimes life-changing. In Sandra Hale’s words from her book *Community Interpreting* :

Community Interpreting takes the interpreter into the most private spheres of human life. It does not take place at negotiations about major international political decisions or conferences on recent scientific discoveries; it takes place in settings where the most intimate and significant issues of everyday individuals are discussed: a doctor’s surgery, a social worker’s or a lawyer’s office, a gaol, a police station or courtroom. These are only a



few examples of settings where community interpreters work and where they are made privy to confidential information that would never have been available to them except in their capacity as an interpreter. (Hale, 2007, pp. 25-26)

For these “most intimate and significant” moments of often highly vulnerable individuals, all stakeholders should work together in order to offer high quality training and education for community interpreters, better working conditions for the practitioners, and quality services for all the involved parties in these interactions.

3.2 Community interpreting in the financial sector

In terms of CI in the financial sector, which is the focus of Work Package 3 in the PLOUTOS project, the findings of this research show a complete lack of such services. I know, from practitioners in SolidarityNow, an NGO with offices in Thessaloniki, that CIs working for the organisation have been offering such services sporadically to TCNs,³⁵ and I imagine this is the case in many other countries.

It is evident that, given the dire conditions of migrant communities in many nations, these services are not in the forefront of their needs, when they have other much more pressing and life-changing matters to deal with. Nevertheless, the fact that we are now considering such services means that, to a certain extent, communities are moving ahead, toward a more thorough inclusion in the host country.

Being part of the labour force or, even more daringly, the business community in a completely new, unfamiliar, and quite often hostile, environment is a huge leap toward the empowerment of TCNs in host countries. Without disregarding the very fundamental needs of TCNs for CI services in critical sectors of their daily lives (asylum, health care, education, etc.), a training programme for CIs that will focus on the financial sector is going to be a positive step toward the direction of enabling individuals to gain autonomy and dignity in their new communities.

³⁵ I am thankful to Ms Sofia Tzelepi, a former graduate student, interpreter and lawyer working for the NGO, for giving me this information.



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³⁶ All sites were retrieved in June 2022.



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