

Book review

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Multilingual Practices and Monolingual Mindsets: Critical Sociolinguistic Perspectives on Health Care Interpreting, by Jinhyun Cho. New York, NY: Routledge, 2025. xii + 162 pp., £116.00 (hbk), £34.39 (ebk). ISBN 9781032614847 (hbk); 9781032614854 (ebk).

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In *Multilingual Practices and Monolingual Mindsets*, Jinhyun Cho sets out an ambitious and timely goal: to examine the persistent under-recognition of healthcare interpreting in Australia through the lens of critical sociolinguistics, with particular emphasis on language, race, and class. Drawing on interviews with 67 healthcare interpreters, Cho argues that the marginalisation of interpreting is deeply tied to Australia's English monolingualism and the racialised and classed hierarchies that structure Australian society. The book seeks to highlight how these structural conditions shape interpreters' everyday experiences, limit their recognition as professionals, and undermine equitable access to healthcare for patients who speak languages other than English (LOTE).

I found the endeavour both valuable and necessary. As interpreting scholars have long argued (e.g., Angelelli, 2004; Hsieh, 2016; Wadensjö, 1998), interpreting is never a neutral, transparent act; it is embedded in power relations, institutional constraints, and the ideological assumptions that structure multilingual communication. Cho's work contributes to this ongoing conversation by positioning healthcare interpreting explicitly within the sociopolitical history of English dominance in Australia. At the same time, some claims in the book, especially around research gaps and the scope of monolingualism, would benefit from more explicit engagement with existing scholarship in healthcare interpreting. Nonetheless, the book stimulates important discussion on the social conditions in which interpreters work, and I appreciate its ambition to connect interpreters' local experiences with broader patterns of inequality.

The opening chapter introduces Cho's three research questions: (1) why interpreting remains under-recognised in Australia despite its central role in social inclusion; (2) how this under-recognition affects interpreters' work; and (3) how it relates to broader



societal attitudes towards multilingualism. Cho situates interpreting within linguistic, racial, and class hierarchies and contrasts the status of interpreters in countries like Korea, where bilingualism is perceived as valuable, with Australia's English-dominant context, where LOTEs are treated as peripheral.

This framing is engaging, though I found some of the early comparative claims (e.g., between Korea and Australia) more difficult to interpret. Cho contrasts the high prestige enjoyed by interpreters in Korea with the marginalisation of interpreters in Australia, but the comparison rests on structurally non-equivalent domains. The Korean examples derive largely from elite settings, such as conference, diplomatic, and corporate interpreting, sectors that carry high prestige internationally. In the Australian case, by contrast, the focus is on community and healthcare interpreting, areas that tend to be lower status across many contexts. Even though Cho later distinguishes between different types of clients, the contrast still risks reflecting sectoral hierarchies rather than clear sociolinguistic differences between the two countries. While I appreciate the analytical impulse behind situating interpreting within broader sociolinguistic landscapes, I found this cross-national comparison less persuasive than other parts of the book.

Chapter 2 explores English monolingualism in Australia and presents it as a pervasive societal ideology that shapes institutional attitudes towards interpreting. Cho also reviews existing sociolinguistic approaches to inequality, drawing on linguistic hierarchies and racialisation. A key claim here is that research on monolingualism in interpreting has “exclusively focused on legal contexts.”

While Cho's broader definition of monolingualism is persuasive, her discussion does not fully acknowledge that a substantial body of research has already examined monolingual ideologies in healthcare interpreting. Although it is true that few studies use the specific term *monolingualism*, many scholars have analysed the institutional dominance of English, the marginalisation of bilingual resources, and the expectation that communication proceed in a single “legitimate” language (e.g., Angelelli, 2004, 2019; Bolden, 2000; Davidson, 2000; Hsieh, 2016). In this conceptual sense, monolingualism has long been recognised as shaping interpreter-mediated care. Engaging more directly with this existing literature would strengthen Cho's positioning of her contribution, while still allowing her to argue for the value of making monolingualism an explicit analytical framework.

In Chapter 3, Cho traces the historical roots of English monolingualism in Australia, from the assimilationist policies of the 19th and 20th centuries to contemporary language ideologies. She argues that the under-recognition of interpreting is not new but grounded in a longer history of marginalising LOTE-speakers. This historical review is one of the book's strengths, as it contextualises interpreters' struggles within a broader sociopolitical history. At the same time, I found myself wishing for more caution in comparing linguistic hierarchies across contexts (e.g., Korea, China, Australia), as local forms of linguistic nationalism differ significantly.

Chapter 4 examines interpreting as a “migrant-concentrated profession,” given that most interpreters in Cho's sample were migrants. Cho identifies barriers such as non-recognition of overseas qualifications, sudden increases in demand due to refugee arrivals, and the flexibility of freelance work, particularly for women. She argues that interpreting becomes both shaped by and reflective of migrants' structural disadvantages.

While the interpreters' accounts are powerful, I found this chapter the most difficult to reconcile conceptually. The argument often implies that migrant concentration automatically equates with low pay or low recognition, which overlooks the diversity of migrant labour markets in Australia. Without data on interpreters' prior occupations or comparative socioeconomic backgrounds, some generalisations feel overstretched. Nonetheless, the chapter highlights real structural inequities that merit attention.

In Chapter 5, Cho explores interpreters' experiences with front-desk staff, doctors, and hospital systems. Cho argues that many healthcare professionals treat interpreters as "automatic channels," speaking without pausing and misunderstanding the process of interpreting. I appreciated the examples illustrating institutional constraints; Cho convincingly shows that interpreters are often positioned outside the healthcare team rather than recognised as part of it. At the same time, the analysis tends to foreground doctors' and other healthcare practitioners' attitudes more than the interactional work that interpreters themselves can and do undertake. Issues such as short consultation times, lack of training, and wider system pressures are primarily structural, yet they are often read through the lens of individual indifference or ignorance. As Hsieh (2016) shows, effective interpreter-mediated clinical communication depends on both provider collaboration and interpreter agency, including interpreters' capacity to manage turn-taking, request pauses, and negotiate participation. Cho's argument would be even stronger if it engaged more fully with this mutual, interactional dimension. At present, it focuses predominantly on healthcare practitioners' behaviour.

Chapter 6 examines how interpreters adapt to or resist monolingual norms. Using Bourdieu's concept of *illusio*, Cho argues that interpreters remain committed to the profession because of moral fulfilment, intellectual stimulation, and a desire to help others. Although Cho acknowledges low pay and precarious working conditions throughout the book, her explanation for why interpreters continue in the field is framed largely in terms of these moral and affective motivations. Research by Li (2025), however, suggests that economic sustainability and limited career progression opportunities also play a crucial role, with many experienced interpreters leaving the profession or moving into better-paid domains. Bringing this dimension into the analysis would offer a more comprehensive account of interpreters' professional trajectories. Cho also discusses "machine-translated" and "machine-like" interpreting, though these terms are used inconsistently to refer to distinct phenomena (literalism, loss of nuance, and rigid adherence to accuracy norms). A clearer distinction would strengthen the analysis.

Three further areas, in my view, would strengthen the book: conceptual clarity, methodological considerations, and representation.

First, in terms of conceptual clarity, Cho's overarching framework linking interpreting with language, race, and class is compelling, but I found "class" the least developed of the triad. Defined broadly as "social stratification systems," class becomes largely synonymous with migrant precarity. This conflation blurs the analytical distinctions between race, language ideology, and socioeconomic position. A fuller engagement with Bourdieu (e.g., class fractions, capital, field, and habitus) would have given the argument greater sociological depth. Similarly, the book's use of monolingualism oscillates between describing a universal sociolinguistic condition (every society has a dominant language) and a uniquely Australian ideological formation tied to whiteness and colonial

history. This ambiguity occasionally makes it difficult to evaluate whether monolingualism is being used as a general theory or a specifically Australian concept.

Second, there are methodological limitations. While qualitative interviews offer valuable insight into interpreters' lived experiences, some of the book's broader claims are extrapolated from a relatively small and untriangulated sample of interpreters. Because healthcare professionals were not interviewed, generalisations about their attitudes risk being one-sided. For example, interpreters' feelings of being seen as "machines" are important, yet without healthcare practitioners' perspectives, it is hard to determine whether this metaphor reflects actual beliefs, institutional constraints, or interpreters' interpretations of provider behaviour. Claims about research gaps are also overstated. As illustrated earlier, Cho argues that monolingualism in interpreting has been studied only in legal contexts. However, decades of research across healthcare, translation and interpreting studies have examined the structural and interactional challenges of interpreter-mediated communication, ranging from early medical reports documenting language barriers (e.g., Reisman, 1977; Richie, 1964; Riffenburgh, 1962) to later scholarship explicitly analysing institutional ideologies and power relations (e.g., Angelelli, 2004; Hsieh, 2016; Wadensjö, 1998). Acknowledging this broader trajectory would have strengthened the book's positioning within the field.

Finally, the book's representation and framing would benefit from further nuance. Some representations of interpreters, migrants, and patients could be more balanced. Interpreters are sometimes portrayed as morally heroic, sometimes as structurally trapped, but rarely as complex professionals exercising agency, strategising, and making high-level interactional decisions (e.g., Hale, 2007; Wadensjö, 1998). LOTE-speaking patients are occasionally framed through "low education" or "cultural unfamiliarity," which risks reinforcing deficit perspectives. Similarly, healthcare professionals are treated as a homogeneous group, with insufficient attention to systemic pressures such as limited consultation time, staffing shortages, and a lack of interpreter training. A more explicit distinction between institutional constraints and individual attitudes would strengthen the argument.

In summary, *Multilingual Practices and Monolingual Mindsets* is a valuable and thought-provoking contribution to the study of healthcare interpreting. Cho highlights interpreters' voices, brings important systemic inequities into view, and situates interpreting within Australia's broader sociopolitical landscape. She also offers a compelling historical contextualisation and a sustained commitment to analysing interpreting through the intertwined lenses of language, race, and class. At the same time, some conceptual and methodological issues, such as ambiguous terminology, overstated research gaps, and limited triangulation, make certain claims less convincing. These critiques do not diminish the book's contribution; rather, they point to the need for continued interdisciplinary dialogue. Despite its limitations, the book opens up important conversations about linguistic justice, migrant labour, and the lived realities of interpreters in healthcare settings. It will be of interest to scholars in interpreting studies, sociolinguistics, and health communication, as well as practitioners seeking to understand the structural challenges shaping interpreter-mediated care.

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Biography

Li Li is a lecturer in Interpreting and Translation Studies at the University of Stirling. She completed her PhD at the University of East Anglia, where her research examined maternity interpreting services in UK healthcare settings. Her research focuses on healthcare interpreting service provision, interpreter workforce sustainability, and the implementation of video-mediated interpreting, with particular attention to language barriers in maternity care and their impact on women who rely on interpreting services to access quality healthcare. Li Li's work adopts sociologically informed and practice-based approaches to interpreting research and engages with questions of inequality, professional recognition, and institutional responsibility in interpreting-mediated healthcare. She is a qualified Chinese–English interpreter and translator, a member of the Institute of Translation and Interpreting (ITI) and the Chartered Institute of Linguists (CIOL), and a registrant with the National Register of Public Service Interpreters (NRPSI). Her research has been published in *Frontiers in Global Women's Health*.