# HIERARCHY AND GENDER IN THE EMERGENCY ROOM: PRAGMATICS AND TRANSLATION CHOICES IN THE JAPANESE VERSION OF THE TELEVISION SERIES ER

By

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A thesis submitted in fulfilment of the requirements of the degree of Doctor of Philosophy (PhD)

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#### **DECLARATION**

I hereby declare that this dissertation was carried out in accordance with the requirements of the Faculty of Human Sciences, Human Research Ethics sub-Committee, Macquarie University. I hereby certify that this work is the result of my own research, and that the work has not been submitted for a higher degree to any other university or institution. I also certify that sources of information used, and the extent to which the work of others has been utilised, have been indicated in the thesis, and any help received in producing this dissertation have been acknowledged. The approval from Ethics Committee has been obtained

(Reference: HE27JUN2008-D05966L&P).

Signature:

Date ..1st December, 2017

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#### **ABSTRACT**

The advent of digital media products has enabled international audiences to enjoy TV dramas and films in a variety of languages. The present study focuses on the American TV drama *ER*, which is commercially available in Japanese on a DVD that includes both a dubbed and subtitled version. Because both dubbing and subtitling impose constraints on the process of translation, it is a demanding task for audiovisual (AV) translators to make translation choices within these restrictions. AV translators also need to take into account differences between the source culture and the target culture, including aspects of social structure and interpersonal relationships that can impact upon the approach to translation of the characters' utterances.

This study aims to investigate how translation choices affect the aspects of institutional hierarchy/power and gender in the original version (source text) of episodes of the American TV drama ER, as projected in the Japanese dubbed and subtitled versions (target texts). It also examines the impact of these particular translation choices on the images of the characters. The study consists of two phases. The first phase is a comparative textual analysis of extracts from the English original and the Japanese translated episodes of ER, focusing on address forms (including second-person pronouns) and the use of gender-associated sentence final forms (GASFFs) as pragmatic and gender markers. In the second phase of the study, a group of English speakers and a group of Japanese speakers watched an episode of ER in their respective first languages, and completed a survey and short follow-up interviews, which focused on the impressions of the characters (character images) formed while watching the episode.

The first phase of the study reveals that linguistic markers of hierarchy, power and gender were more clearly displayed in the Japanese versions than in the original English version. This difference could be attributed to the effect of the choice of second-person pronouns and the use of gender-associated sentence final forms (GASFFs) in the Japanese versions. In some scenes, they also appear to contribute to the character images that were portrayed; and this was further investigated in the second phase.

Survey data from the second phase of the study reveals few differences between the groups of English and Japanese speakers in terms of the character images that they perceived. Some of the comments in the follow-up interviews with the Japanese-speaking audience participants suggest that the images formed were influenced by the participants' 'gender filter', which was in turn influenced by their generation and life experience. As participants made limited observations on the details of the Japanese used by characters in the drama, it is possible that their appraisals of the characters' images were made at a subconscious level.

By relating the finds from both the first and second phases, it is possible to conclude that pragmatic markers such as address forms including second person pronouns and gender-associated sentence final forms did not (at least on their own) determine the character image perceived by each viewer in this study.

Although intercultural dimensions of AVT are important, there have been relatively few comparative studies that examine the pragmatics between Japanese text and English text. By drawing on dual perspectives gained from an analysis of linguistic features and audience impressions, the present study provides a model for researching AVT that can be refined and developed in future studies.

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# LIST OF ACRONYMS

# **Abbreviation** Original term

AV audiovisual

AVT audiovisual translation

ER emergency room

ER American television series 'ER'

FTA face threatening act

MD medical doctor

NHK Nippon Hōsō Kyōkai

(The Japan Broadcasting Cooperation)

GASFF gender-associated sentence final form

GASFP gender-associated sentence final particle

SFF sentence final form

SFP sentence final particle

#### ROMANISED JAPANESE

This thesis employs the Japanese Romanisation system (with some minor modifications) used in the second edition of *Genki* I. (Banno, Ikeda, Ohno, Shinagawa & Takashiki 2011) which is a Japanese language textbook widely used in tertiary-level Japanese language courses. The same Romanisation system has been employed in many textbooks and English academic articles. In the above system, the term teacher in Japanese is spelled 'sensee'. However, since the term can also be used as a title and it is now recognised as an English word (e.g. Oxford Living Dictionary, 2016), the more widely accepted spelling 'sensei' is used in this thesis. In addition, some of the original names of the Japanese publishing companies that appear in the references list may also include Romanised Japanese spellings derived from different systems.

#### TRANSCRIPTION CONVENTIONS

The original Japanese subtitles in the DVD utilised for this study appear in the Japanese characters (script) and do not contain any punctuation. These subtitles have been Romanised in this thesis, and (following the original subtitles) the Romanised subtitles do not include any punctuation. Both the dubbed and subtitled utterances of the characters are followed with English back-translations.

The following transcription conventions have been used for the original English version and the dubbed Japanese version of extracts presented in this thesis.

- 1) [ The point where overlap begins
- 2) The point where overlap ends
- 3) ? Interrogative tone
- 4) ! Exclamatory tone
- 5) (.) Pause
- 6) (( )) Comment
- 7) **Bold** Segment marked in the analysis

#### **CHAPTER 1: INTRODUCTION**

#### 1.1 Background and overview

Globalisation and the advent of digital media products, including the digital video disc (DVD), have enabled audiences in many parts of the world to enjoy dubbed or subtitled versions of television (TV) dramas in their first languages. In some respects, watching translated versions of TV dramas may be quite a different experience from watching the same drama in the original language. People may be able to 'travel' to different cultures by watching translated films and dramas. The audience may expect to have some cultural experience watching a translated drama, which might not be possible when watching the drama in the first language. For example, some may find it interesting to know how students address their teachers in a TV drama, and see how it compares with their own experience as students. In Australia, it is generally acceptable for both undergraduate and postgraduate students to address academics by their first names. However, in Japan, students address academics by the honorific address form, sensei, or surname and sensei. Even in other English-speaking countries, such as the United States (US) and the United Kingdom (UK), the use of address forms may not be consistent with the use in Australia. This is not only an issue of linguistic difference between languages, but also involves cultural issues, including social hierarchy and distance between the student and the teacher, which affects language choice. As Shi (2004) points out, translation involves accommodation in many factors that belong to the domain of culture, rather than merely linguistic conversion of transformation between languages. Hence, intercultural aspects are important.

It is worthwhile, therefore, to examine how cultural aspects of an original text transfer to the target text, and how the translator's choices affect the target text and the audience's perception of the target language version. This thesis presents a cross-cultural and linguistic investigation of pragmatic aspects of the original English version and the Japanese dubbed and subtitled versions of the American medical TV drama, *ER*.

#### 1.2 Why ER?

ER is one of the most successful medical TV dramas in the US, Australia and Japan. It was broadcast between 1994 and 2009 in the US, and the home video DVD was first released in 2004. The National Broadcasting Company (NBC, 2009) states that: 'The highly acclaimed drama series holds the distinction of being recognized with the most Emmy nominations for a series in the history of television, with 124 nominations' ("About the Show" para 1). ER won

22 Emmy Awards as well as the prestigious George Foster Peabody Award. In addition, *ER* was broadcast in 195 countries, and has been dubbed or subtitled in 22 languages.

ER is a story about dedicated medical doctors in an emergency room (ER) of a teaching hospital (County General Hospital) in Chicago. The series was created by Steven Spielberg's Amblin Television. The original story and the script was written by Spielberg's friend, Michael Crichton, who was the author of bestsellers such as *Jurassic Park*. Crichton's initial aim was to write a script for a film, rather than for a television series.

Crichton aimed to create a realistic medical drama based on his own experience as a medical student at Harvard Medical School. Pourroy (1995) states: 'Crichton had always maintained that it was fundamental for the series to deviate from established dramatic television traditions and maintain a strong sense of realism — and he remained convinced that audiences would respond positively to that kind of truthful storytelling' (p. 6). Pourroy (1995) continued by stating that the production team of ER made considerable efforts to create realistic medical settings. For instance, in ER, medical terminology is not simplified to help audiences understand, a common practice in medical dramas at the time. This approach was also adopted in the translation of ER into Japanese (Kihara, 2000). Furthermore, the production team of the original version of ER tried to maintain the fast pace of working in real ERs. Professional nurses and doctors also appeared in some scenes in which medical procedures were performed, providing extra authenticity. Hence, ER has been praised for the authenticity of its medical scenes. As a result, ER has been the subject of research in various areas. For instance, De Cicco (2009) studied the professional identities of doctors in ER. Svandra (2013) uses episodes from ER to highlight and discuss ethical dilemmas that occur in medical contexts. Tanaka (2001) highlights the value of ER when teaching English medical terminology and the culture of American hospitals to Japanese medical and nursing students.

I started to watch *ER* in Australia in 1996. It soon became my favourite TV programme. Before long, I found that my mother — who was living in Japan — was also watching *ER* (broadcast by Nippon Hōsō Kyōkai [NHK], the Japan Broadcasting Cooperation). Several years later, I had an opportunity to watch the dubbed Japanese version of *ER* in Japan. I noticed that something was different in the dubbed version of *ER* when compared with the original version in English. In particular, I found the use of female-associated sentence final forms added some extra 'feminine touches' to the female characters. I noticed that the choice of second-person pronouns contributed to a display of 'extra power' by the characters. I thought these two differences might be contributing to the difference in impression I formed when watching the English and the Japanese versions.

Both my mother and I continued to watch *ER* in Japan and Australia, respectively. We were watching the same drama but in different languages. I started to wonder whether it was possible for us to share the same experience, watching the drama in different versions. I became very interested to find out how the translator's choices affected the target text and the audience's perception of the drama. I obtained a DVD of *ER* that included the original English version as well as the subtitled and dubbed Japanese versions. This was the point of departure for my research.

#### 1.3 Japanese versions of ER

ER was broadcast in Japan by NHK between 1996 and 2011. The Japanese title of the series is 'ER kinkyuu kyuumeeshitsu' [ER Emergency Room]. Since then, it has been rebroadcast by four satellite TV channels. In 2016, TV Tokyo — one of the main Japanese TV channels — began rebroadcasting it. The Japanese versions of ER on TV and DVD (both dubbed and subtitled) are translated by an experienced Japanese translator, Mr Takeshi Kihara (1933-). The dubbed Japanese version of the DVD is based on the translation for the TV version broadcast by NHK. Mr Kihara (2000) notes that translating ER was a demanding task, as the length of each line in the script is much longer than average. He also states that, as the translation required considerable medical knowledge, a Japanese medical doctor — Dr Mikio Watanabe — was appointed by NHK, and assisted Mr Kihara in the dubbing process of the Japanese version.

### 1.4 Aims of this study and research questions

The aim of this study is to investigate how power, hierarchy and gender in the original text are reflected in the target text. The study has two main linguistic concerns. One is the choice of second person pronouns and address forms. Address forms including second person pronouns are important pragmatic markers for identifying distance and power between the characters within the hospital hierarchy of ER, as well as from the outsiders, including patients and patients' family, to insiders (doctors / nurses). Although there is just one second person singular pronoun in English (you), audiovisual (AV) translators must choose from numerous options in Japanese.

The other linguistic concern is gender-associated sentence final forms (GASFFs) in Japanese, which do not exist in English. GASFFs are an important class of gender marker, and contribute to the character image. As these forms do not exist in English, it is worth investigating how they contribute to the images of the characters in the drama. I chose to investigate address forms and GASFFs because, when I saw the Japanese version of *ER* for the first time, I noticed that the choice of these forms in Japanese contributes to some differences in impression compared

with the English version. The theoretical background to the various elements of the thesis in these areas will be discussed in Chapters 2, 3 and 4.

The research consists of two phases. The first phase compares the above elements of the source and target texts through textual analysis of scenes from a number of episodes. The second phase involves an audience survey and follow-up interviews focusing on participants' impressions of several key characters, completed during and after viewing one episode of *ER*. The aim of this phase is to compare the impressions of character images between the English- and Japanese-speaking audiences. A detailed description of the methodology will be provided in Chapter 5.

This study aims to answer the following four research questions:

- 1. How are the pragmatic dimensions of communication presented in the English source text realised in the Japanese translated text?
- 2. How do the source text and translated text compare from the perspective of gender-related language choices?
- 3. To what extent can individual viewers' impressions of characters be traced to the translation choices reflected in the target text?
- 4. From an intercultural perspective, what issues arise as a result of the translation choices reflected in the dubbed and subtitled texts?

#### 1.5 Intercultural communication and cross-cultural communication

In recent times, growing numbers of AV materials have been translated and delivered from one country to another in the globalising world. It has been pointed out that any kind of translation is a form of intercultural communication (e.g. Ramière 2006; Lefevere & Bassnett, 1998; Snell-Hornby, 1995). In addition, there are many studies that incorporate 'cross-cultural' perspectives (e.g. Bruti 2009a, 2009b; Hatim & Mason, 1997; Pavesi, 2009a, 2009b, 2014).

Although the terms 'intercultural communication' and 'cross-cultural communication are not often used in the present study, the research involves both 'intercultural' and 'cross-cultural' elements. It is, therefore, important to distinguish clearly between the two terms at the outset.

This study employs the following definitions of 'intercultural communication' by Swann, Deumert, Lillis and Mesthrie (2004).

Intercultural communication is 'Communication between members of different cultural groups, who may bring different language PRACTICES OR WAY OF SPEAKING (emphasis in original), and different expectations and cultural understanding to an interaction.' (p. 149). The concept of 'Intercultural communication' is relevant in the present study, as it investigates how the Japanese audiences perceive interactions (i.e. language practices of ways of speaking) that are taking place in the American cultural context even though the language has been translated.

According to Swann et al. (2004), 'cross-cultural communication' is focused on the characteristics of communication styles, and often on communication difficulties such as misinterpretations and miscommunications (p. 149). The term, 'Cross-cultural communication' is also relevant, as the study compares Japanese speech styles and (American) English speech styles. From a cross-cultural perspective, AV translators attempt to make appropriate translation choices for the target text, to avoid misinterpretation of what was intended in the original text.

#### 1.6 Thesis outline

This thesis consists of nine chapters. Chapters 2, 3 and 4 provide the general theoretical background to this study. Chapter 2 reviews the literature on audiovisual translation (AVT) and its theoretical background. This review includes the history of AVT (subtitling and dubbing), and describes the technical constraints as well as the intercultural issues of translation. Chapter 3 focuses on issues of hierarchy and power, which are investigated by comparing the use of address forms and second person pronouns in the original English versions and the Japanese dubbed and subtitled versions. Chapter 4 discusses the issue of gender, investigated through the use of GASFFs in Japanese. Chapter 5 explains this study's research methodology. This research employs a mixed methods design, which includes two phases that complement each other. The first phase of the study is a textual analysis of ER episodes on DVDs containing both the original English version and the Japanese dubbed and subtitled versions. The second phase includes a survey and follow-up interviews of participants who viewed one episode in their first language. This chapter also includes an account of the pilot study, which was conducted before finalising the research methodology for the second phase of the study. Chapters 6 and 7 present the findings of the textual analysis. Chapter 6 analyses and discusses the issue of character images and gender, with a particular focus on the use of GASFFs. Chapter 7 analyses and discusses issues of hierarchy and power, illustrated by second person pronouns and address forms. Chapter 8 discusses the findings of the survey and the interviews from the second phase of the study. Chapter 9 draws conclusions relating to the four research questions, outlines the limitations of the study, and makes some suggestions for future research.

# CHAPTER 2: BACKGROUND AND HISTORY OF AUDIOVISUAL TRANSLATION

Although ignored by academics and teachers alike, audiovisual translation (AVT) has existed as a professional practice for many years and, since the 1990's, has gained well-deserved visibility thanks to the proliferation and distribution of audiovisual materials in our society. (Diaz Cintas, 2008, p. 1).

#### 2.1 Introduction

As discussed in Chapter 1, the study reported in this thesis is a cross-cultural and linguistic investigation of pragmatic aspects of original English, dubbed Japanese, and Japanese subtitled versions of the television (TV) drama, *ER*.

The purpose of Chapters 2, 3 and 4 is to provide the general and theoretical background of this study. This chapter focuses on the background history and the relevant issues of audiovisual translation (AVT).

This chapter covers the following three areas. The first area involves the definition and history of AVT, which are discussed in Sections 2.1, 2.2 and 2.3. The second area concerns the technical challenges of AVT, which are discussed in Section 2.4. The final section, Section 2.5, encompasses the cultural perspective on AVT, including politeness, and the concepts of foreignisation and domestication.

#### 2.2 Definition

AVT refers to the transfer of the verbal components of an audiovisual text from the language of the original version (source language) to another language (target language). While some categorise AVT as a branch of literary anslation (e.g. Bassnet, 2002; Snell-Hornby, 1995), others accept the autonomy of AVT and acknowledge it as an independent area of translation theory and practice (e.g. Chaume, 2004; Diaz Cintas, 2009). The present thesis embraces the latter view, and employs Karamitroglou's (2000) definition of AVT as a 'translation of recorded audiovisual material' [underlining added by present author] (p. 2).

In addition, Karamitroglou (2000, p. 4) proposes the following typology of language transfer methods in AVT:

- a) subtitling;
- b) (lip-sync) dubbing;

- c) narration (including voice-over);
- d) free commentary.

Koolstra, Allerd and Hermans (2002) make the point that dubbing and subtitling are the most commonly used methods for foreign-language TV programmes to make them available to the domestic market. Hence, the present thesis focuses on the issues of subtitling and dubbing from Karamitroglou (2000)'s typology.

#### 2.3 History of AVT

#### 2.3.1 History of AVT internationally

The history of AVT in the US and Europe overlaps considerably with the advent of the first sounded films (called 'talkies'), following the short-lived silent film era which started 1885, in France. During the silent film era, audiences enjoyed only the picture with 'intertitles' (text drawn or printed on paper, which appeared between the scenes). During this period, there was no technology for sound recording in film. The value of communication in 'intertitles' is not known, nor it is known whether 'intertitles' were used for translation into other languages. (Diaz Cintas 2008a).

The first motion picture with synchronised sound was an American film, *The Jazz Singer*, released in 1927 (Ivarsson, 2004). European countries pioneered the development of film subtitling, and the first appearance of a subtitled film was also 'The Jazz Singer', with French subtitles, in 1929 in Paris. In the early years of 'talkies' there was no technology for dubbing films into other languages. Therefore, production companies reused the same reel of the original film and created alternative language versions, dubbing them with actors who spoke the target languages (Japan Audiovisual Producers' Association, 2001). The first dubbing technology was developed in the 1930s, and since then dubbing and subtitling have been considered as major AVT tools for theatre, film and television.

Under the fascist regimes in Italy and German during the World War II, dubbing of imported American films was used as a part of a strategy to control the media for the purpose of enhancing imperialism. These regimes excluded foreign language from the films, and also manipulated the script by deleting words and lines that caused inconvenience for the government (Japan Audiovisual Producers' Association, 2001).

The recent transition from analogue to digital technology, together with the invention of DVD technology and the Internet in 1990s, has increased demand in the area of AVT. In particular,

the advent of DVDs has contributed to flexibility in watching films, by the use of computers as well as allowing viewers to choose from several possibilities in language modes. For example, many DVDs of American TV series on the Japanese market include Japanese subtitled and dubbed versions, as well as the original English version. According to Gambier (2008), DVDs can accommodate as many as 32 languages in terms of subtitling and 8 languages in dubbing.

#### 2.3.2 Silent film and Benshi

As discussed earlier, the history of AVT is considered to have started with the invention of 'talkies' (unsounded motion films) in the world. However, it is possible to argue that the history of AVT had already started in the silent film era in Japan. According to Dym (2003, 2008), even in the silent film era, films were never silent in Japan. From the first public showing of a motion picture in 1896 in Japan during the epoch of silent film, a profession existed known as benshi or katsudoo-benshi (orator / narrator). A benshi is a person who stands near the screen facing the audience, and plays the role of each character in the film by changing his or her voice and also narrates the story. Narration was deemed essential, since there were considerable differences between Western culture and Japanese culture in terms of customs and lifestyle at the time. Hence, it would not have been possible for the audience to understand the film without additional input from the benshi.

The role of the *benshi* was unique. They played an essential role for showing silent films in Japan. Dym (2003) also states that *benshi* formed a central part of the 'silent movie' experience in Japan by explaining what the motion picture was about, either before, during, or after the show. There was a similar profession, called *bonimenteur* (literaly, cinema lecturer), in the French silent film era (Ivarsson, 2004). However, Dym (2008) states that 'Japan is the only place where narrators proved to be an influential and integral part of silent cinema' (Paragraph 1, Line 5) Because of the fall in demand for *benshi* after the advent of sound film, many *benshi* lost their employment. However, there are still some cinemas today where silent films are shown with narration provided by *benshi*.

#### 2.3.3 Dubbing or subtitling in Japanese TV

In Japan, the first sounded film shown to public was American Film, *Morocco*, in 1931. It was released as the first film subtitled in Japanese (Yamazaki, 2000). Since then, subtitling has become the most common means of screening foreign cinema films in Japan. In 1953, TV broadcasting started in Japan, and in 1956, the American TV series *Cowboy G-Men* was broadcast as the first foreign TV drama dubbed in Japanese.

Interestingly, in Japan's early television history, all three of Japan's TV channels chose a different approach for AVT (Japan Audio Producers' Association, 2001) of the various foreign TV programs that they broadcast. Two commercial TV stations chose a dubbing approach. Firstly, KRT (Radio Tokyo Television, known nowadays as TBS, Tokyo Broadcasting System Inc.) chose to use live dubbing during the broadcast of the drama, *Cowboy G-Men*. This implies that, while the drama was on the air, the Japanese voice actors who were playing the role of each of the characters would be following the Japanese script whilst looking at the image of the drama. At the same time, sound effects would also be incorporated into the dubbing.

Another station, NTV (Nippon Television Network Corporation), chose to record dubbed speech together with sound effects in advance, and to utilise these while the drama was on air. Technically, this was a very demanding process in the 1950's. However, with dedicated research and effort, NTV developed the technology and successfully broadcast the Japanese dubbed version of the American animation series, *Jim and Judy in Teleland*, in 1956.

By contrast, Japan's national public broadcasting organisation, NHK (Nippon Hōsō Kyōkai), chose subtitling over dubbing. The American TV series, 'Whistling man', was broadcast with subtitles in 1956. The year 1959 was a time of transition for NHK, when the French TV series, *Le Tour de la France par deux enfants*, was broadcast with dubbing. Since then, all Japanese TV channels have moved to the use of (recorded) dubbing for their AVT. As noted in Chapter 1, NHK broadcast a dubbed version of the American Television series, *ER*, from 1996 to 2011.

Since the first appearance of the foreign film and drama in Japan, numerous imported Western films and TV series, which are either subtitled or dubbed in Japanese, have been screened or broadcast in Japan. According to the Foreign Film Importer-Distributors' Association of Japan (2016), 576 foreign cinema films were imported and distributed in Japan during 2015.

Prior to the 1960s, Japanese AVT contributed greatly to providing Japanese people with access to Western TV dramas which portrayed a modern, sophisticated lifestyle that Japanese people could only have dreamed of. However, recently, Asian films also have been imported to Japan. Especially since 2002, South Korean TV dramas have enjoyed enormous popularity in Japan. Accordingly, NHK is continuously broadcasting Korean dramas. According to the Foreign Film Importer-Distributors' Association of Japan (2016), South Korean cinema films have also proven to be popular, with 55 films also being imported and distributed in Japan in 2015 alone.

Subtitling and dubbing have both been playing important roles in viewing foreign films and TV series in Japanese society. Traditionally, there was a tendency for films that were screened in cinemas to be subtitled, whereas most TV dramas were dubbed. However, according to the

Nikkei Style (2010), there are increasing numbers of dubbed versions of cinema films in Japan, according to the demand of the audience.

#### 2.4 Technical challenges of subtitling and dubbing

#### 2.4.1 Subtitling and dubbing as translation with constrains

As Diaz Cintas (2009) argues, the translational mode of AVT belongs to a 'superordinate text type' (p. 6) which does not fall neatly into the categories of spoken text or written text. Subtitling and dubbing are, in effect, known as 'constrained translation' (Tilford, 1982). Subtitling and dubbing differ in terms of the process that each requires to render the source material into the target language.

In the case of subtitling, the translator transforms the original verbal text into the form of written text to be read by the audience within the restriction of the time and space. On the other hand, in dubbing, the original text is translated and transformed as a script of the drama within the restriction of time and congruity of the lip movement and body movement. Consideration also needs to be given the fact that the translated script will be read by actors.

Unlike literally translation, where imagery is formed by the reader's own imagination, AVT is accompanied by visual imagery that is provided to the audience. Since the translations have to match the visual images, as Gonzalez-Iglesias and Toda (2011) point out, the actual images thus become another constraint for both forms of AVT.

In a similar vein, Yamazaki (2000) notes that, unlike literally translation, AVT translators are not allowed to create their own version of the character in the story, where that version has basis in their own imagination and creativity. AVT text is expected to support the type of character that the audience perceives by viewing the screen while accessing the target language. In addition, the study of Pettit (2004) reveals that visual image has a great impact upon the processes of subtitling and dubbing.

Synchronised subtitling and dubbing often result in linguistically different translations of the same material. In both cases, the translators are likely to face dilemmas as they are forced to make choices within constrains imposed in each case.

#### 2.4.2 Technical challenges in subtitling

Luyken, Herbst, Langham-Brown, Reid and Spinhof (1991, p. 156) point out following three characteristics of subtitling:

- it does not drastically modify the original opus but it reduces the visible area of its picture;
- it conveys spoken into written language;
- the written text in the target language is much shorter than the full volume of words in the source language.

Subtitling involves a restriction on the number of words that can be displayed on the screen at any one time, and also limits the time frame that the subtitles can remain visible to the viewer. For instance, in the case of the Japanese language, the standard time allocation for each the subtitle is only four characters per second. One line is limited to 13 characters and one subtitle is restricted to two lines maximum (Sato et al., 2000). Therefore, the maximum time frame for viewing one subtitle is 6.5 seconds. This necessitates a certain degree of information density. In terms of the Japanese language, subtitled texts consist of a combination of kanji (Chinesebased characters) idioms together with hiragana /katakana characters, and are thus be able to express complex concepts using few characters, with kanji being an ideographic system of expression. Nevertheless, some degree of 'loss' is unavoidable because of essential reduction in character numbers. This is one of the critical issues in subtitling, and it is important for translators to compensate for such a reduction in meaning (Delabastita 1989). Kaneta (2005) states that, in an interview for Tsuuyaku honyaku jaanaru [Journal of Interpretation and Translation], an experienced AV translator, Katsushige Hirata, explained that only 40 percent of original information can possibly be conveyed by subtitles, while an 80 percent preservation of information is possible with dubbing (p. 16). In addition, Koolstra, Allerd and Herman (2002) point out that audiences may miss out the information available to them from the images whilst engaging reading subtitles. Zojer (2011) notes: 'The big challenge in subtitling lies in projecting of text onto a pre-existing canvas of sound and image while being severely restricted by the negotiation of space and time' (p. 399).

The table below shows an example of Japanese subtitles from a scene in *ER*. The scene is set in the apartment of one of the main characters of the series, Dr Mark Greene. His father is visiting Chicago from San Diego and making a comment comparing the weather report in Chicago with the one in San Diego.

Table 2-1 Example of comparing the English version with the translated versions

(From ER Season 6, Episode 11: 'The domino heart')

English	Dubbed	Subtitled

1	I like that weather channel.	Kocchi no tenki wa omoshiroi na.	Koko no tenkiyohoo wa nakanaka omoshiroi na
		The weather forecast here is interesting.	The weather forecast here is interesting.
2	No sense in kind of watching it in Sun Diego.	San diego wa tsumaranakatta.  The weather forecast of San Diego was boring	
3	"Clear and sunny"  "Clear and sunny"  "Chance of a cloud,	Kyoo mo kaisee, ashita mo kaisee, tokidoki kumori. Sore shika nakatta.	Mukoo dewa "hare tokidoki kumori" shika nakatta
	most sunny".	There were only 'Clear today',  'Clear tomorrow again' and 'occasional clouds'.	There was only 'Clear, occasional clouds there' (San Diego).

Omissions can be clearly observed in both the second and the third utterances in the example above. There is no subtitle for line 2, 'No sense of kind of watching in San Diego'. In line 3, the translator replaced *sandiego* (San Diego), which is a six-character word in Japanese script (サンディエゴ) with the word, 'mukoo' (there), which is a three-character word (向こう) in Japanese script. This difference in character numbers contributes to the audience saving time in reading the subtitles. In line 3, the subtitle is much shorter than both the original version and the dubbed version.

As the example above shows, subtitle translators generally tend to focus on the flow of a story rather than on the semantic equivalence of each item (Sato et al. 2000). In deciding which linguistic items ought to be omitted during the process of editing the subtitled text, Karamitroglou (1998) states:

'The subtitler should attempt to keep a fine balance between retaining a maximum of the original text (essential for the comprehension of the linguistic part of the target film) and allowing ample time for the eye to process the rest of the non-linguistic aural and visual elements (essential for

the appreciation of the aesthetic part of the target film)' (Section 5. Taget text editing, "Omitting linguistic items of the content").

#### 2.4.3 Technical challenge in dubbing

The language used in synchronised dubbing should match the lip movement and the body movement of the actors, including nonverbal language, which can result in the dubbed translated text not being semantically consistent with the original source text. Dubbing also entails a somewhat complex process. Zabalbeascoa (1994, p. 94) explains the nature of this process: (1) a programme is chosen and purchased; (2) a decision is made as to whether the programme should be dubbed, subtitled, or not touched; (3) a copy of the original version on tape is given to a freelance translator or to a number of translators, sometimes with the script; and (4) the translation is adjusted for timing and lip movement and acted out by dubbing actors under the direction of the dubbing director. Finally, the new sound track is dubbed onto the film or tape.

Although dubbing has fewer restrictions in dialogue length as compared to subtitling, achieving a satisfactory standard in dubbing does appear as a demanding process. Fordor (1969. p. 69) explains the requirement for satisfactory synchronization as providing 'a faithful and artistic rendering of the original dialogue, an approximately perfect unification of the replacing sounds with the visible lip movements, and bringing the style of acting'. In addition, in the case of close-up shots, phonetic equivalent is prioritised than semantic or pragmatic equivalence in the process of lip-Synchronisation. (Chaume 2012).

As Chaume (2012) states that each target culture may have different norms and convention with respect to the synchronisation. Chaume (2012) further argues that the degree of perfection in the implementation of the various types of synchronisation (lip synchrony, kinetic synchrony and isochrony) depends on the factors such as canonical norm of each target culture, the viewer's expectations and the audiovisual genre.

The example presented in Table 2-1 shows the importance of matching the lip movement in the Japanese dubbed text of *ER*. In the first utterance, 'kocchi' is used for 'here' instead of 'koko', and length of the dubbed version is as long as the original version. In line 3, although the subtitled version (as discussed earlier) shows both reduction and omission in meaning, the dubbed version does not show any reductions or omissions. Instead, the word 'ashita' (tomorrow) and 'shika nakatta' (There were only) have been added to the dubbed version. This adjustment in the length of utterance would have possibly been made for the specific purpose of synchronisation between the Japanese dubbed version and the actor's lip movement.

Transferring characters' image, as perceived in the source text, to the target text is considered to be very important, particularly if the target text is a dubbed version. A voice actor whose voice sounds similar to that of the actor in the original version is generally chosen for the dubbed version (Date, 2005). Thus, the audiences of the dubbed version of the drama are likely to experience the illusion that the actor of the original version is speaking in the target language (Paquin, 1998).

#### 2.4.4 Research on subtitling and dubbing

Recent empirical research in the area of subtitling and dubbing broadly falls into the following areas. The first involves studies that compare dubbing and subtitling (e.g. Kilborn, 1993; Tveit, 2009; Mingant, 2010). In Europe, there is a categorisation that distinguishes between dubbing countries and subtitling countries (Diaz Cintas 1999; Luyken, Herbst, Langham- Brown, Reid, & Spinhof, 1991) However, as Gambier (2003) observes, the distinctions between dubbing countries and subtitling countries and debates about dubbing versus subtitling are no longer relevant, as the new technology of DVD allows flexibility of mode and language choices for audiences, with both dubbed and subtitled options often available on a single DVD. The second area of research focuses on the technical constraints of AVT (e.g. Allerd & Herman, 2002; Georgeakopoulos, 2009; Gottlieb, 1992; Koolstra; Sokoli, 2009). The third area of research investigates the pedagogical approach for training AV translators (e.g. Skuggevik, 2009; Taylor, 2009). Although all these studies investigate important aspects of AVT, their focus is different from the present study.

In recent times, there are many AVT studies that have been conducted to analyse the text cross-cultural and pragmatic perspectives, which are closely related to the present study. For instance, Fernandez (2009) investigated the aspect of the swear words in a dubbed Spanish version of an American TV animation series, *South Park*. Bruti (2009a) investigated how compliments in the original version of American films are transferred into Italian subtitled versions. Silva and Duarte (2011) investigated the issues of character identity portrayed in the use of compliments in the subtitled Italian version of the American film, *What Women Want*. Furthermore, there have been studies conducted on the basis of Politeness Theory by Brown and Levinson (1978, 1987), including Gartzonika and Serban (2009), and Ushie and Nishio (2009). The details of the relevant studies in this area will be discussed later in this chapter and in the next chapter.

#### 2.5 Cultural aspects of AVT

#### 2.5.1 Role of audiovisual (AV) translators

An increasing amount of AV material is being translated and shared between countries. Translation requires a series of choices to transfer the text of one language into another. These choices are not restricted to choices between linguistic elements. In particular, AV translators are required to convey the original message between cultures, by fitting the screen image to the target audience. As the source language must be filtered through culture and context, pragmatic choices must be made. Swann, Deumert, Lillis and Mesthrie (2004) define pragmatics as follows: 'pragmatics is the study of language in use: how language is produced and interpreted in context' (p. 248).

Within the constrained parameters of audiovisual translation (AVT), it is possible that cultural elements, such as politeness, which are important for understanding a text, could be omitted (Mijas, 2008). As Oto (2001) points out, AVT must pass through a filter consisting of the translator's cross-cultural understanding and his/her ability to explain the background knowledge of the subtitled or dubbed message. Ramière (2010) states that AV translators play a role in choosing the best way to facilitate the transfer of a film to a new environment.

#### 2.5.2 Pragmatics and politeness in translation

As translation is a form of intercultural/cross-cultural communication, transferring cultural elements, such as politeness (a pragmatic aspect), from the source text to the target text is an important task for translators. As politeness correlates with human society and relationships, the concept varies across cultures. Baker (1992, p. 234) describes politeness as a 'relativistic norm, and the norm of 'polite behaviour' as depending on the culture. In some contexts, politeness is more important in translation than is grammatical accuracy. Sidiropoulou (2004) has stated that, 'in translation, varying politeness or im/personality patterns across cultures should be reflected in the target version for pragmatic equivalence to be achieved' (p. 8).

As professionals, translators are expected to be aware of the differences in social structures and relationships that exist in the original and target cultures. The translator's intercultural awareness is important in order to convey the intended message (El-Sakran, 1999). El-Sakran (1999) argues for the importance of training translators in the 'politeness phenomenon'. As Hatim and Mason (1997) suggest, the dynamics of politeness require a degree of linguistic modification at the level of text, although politeness can also be relayed transculturally in translation.

Within the constrained processes of subtitling and dubbing, it is possible that cultural references (including markers of politeness) are at times omitted (Mijas, 2008). In such cases, an important message in the source text may be not be transferred to the target text. Therefore, the present study investigates how aspects of politeness in the source text are at times not transferred to the target text.

#### 2.5.3 Brown and Levinson's politeness theory

Brown and Levinson (1987) introduced the concept of positive and negative 'face' in politeness. This theory is based Goffman's (1967) notion of face, or a person's public self-image. Goffman (1967) defined 'face' as 'positive social value a person effectively claims for himself by the line others assume he has taken during a particular contact' (p. 1).

The politeness theory is also based on the premise that individuals desire to establish a good self-image accepted by others (positive face), and also desire to maintain the distance between themselves and others and have the freedom to determine their own action (negative face). Brown and Levinson's (1987) conception of politeness aims to establish and maintain smooth communication between individuals. According to this theory, speakers estimate the degree of 'threat' involved in face-threatening acts (FTAs) as follows:

$$Wx = D(S, H) + P(H,S) + Rx (p. 76)$$

where: Wx (weightness): is the numeral value that measures the weightiness of the FTAx; D (distance) is the value that measures social distance between the speaker (S) and the hearer (H); P (power) is a measure of a power that H has over S; and Rx (ranking of imposition) is a value that measures the degree to which the FTAx is rated to be an imposition in that culture.

The above formula calculates the seriousness of FTA, and selects the appropriate strategy from the options below. The strategies are listed in order of their power to reduce the potential for a threat to the hearer's face:

- 1 bald on record (without redress);
- 2 positive politeness (desire of what s/he wants);
- 3 negative politeness;
- 4 off record;
- 5 does not perform the FTA.

Brown and Levinson (1987) also introduced 15 specific strategies for positive politeness, and 25 for negative politeness.

#### 2.5.4 Challenge of politeness theory with Japanese politeness

Since Brown and Levinson proposed their politeness theory (1978, 1987), much research has been undertaken on the theory, and attempts have been made to determine its limitations (Gu, 1990; Hill, Ide, Ikuta, Kawasaki & Ogino, 1986; Ide, 1989, 2006; Matusmoto, 1988, 1989; Morisaki & Gudykunst, 1994; Ohashi, 2003; Raynolds, 1995). In particular, there is a significant volume of research and debate surrounding the application of politeness theory to the Japanese language.

Morean (1988) and Niyekawa (1991) emphasise that Japanese people are very sensitive to the use of language in the society. A survey conducted by the Japanese Agency for Cultural Affairs in 2004, and recent book publishing trends concerning the use of honorifics, show that Japanese people have high expectations regarding the use of appropriate polite language. Therefore, it is valuable to examine politeness theory and the ways in which it applies for the Japanese language.

The study of Japanese politeness falls into two groups. One challenges the compatibility of politeness theory with the Japanese language. For instance, Hill, Ide, Ikuta, Kawasaki and Ogino (1986) conducted a qualitative study that compared manifestations of politeness between Japanese and American university students, and their findings supported Brown and Levinson in terms of the universality of politeness. The results found that the degree of *wakimae*, or 'discernment' (politeness decided by social rules), in Japanese is greater than in American English. Ide, as an instigator of the debate on the universality of the politeness theory, claimed that Brown and Levinson's (1978) framework is based on a view of non-honorific speakers, and is not compatible with Japanese as it neglects linguistic aspects of the use of 'discernment' (Hill, Ide, Ikuta, Kawasaki & Ogino, 1986), in which it is important to choose specific language forms, including the use of honorifics based on discernment (Ide, 1989).

Matsumoto (1988) also challenges Brown and Levinson, pointing out the differences in the concepts of 'Japanese face' and 'Western face'. Matsumoto defines the Japanese honorific system as 'relation-acknowledging devices', as Japanese politeness is strictly linked to social rules. Matsumoto (1989) also claims that Brown and Levinson's (1978, 1987) politeness theory is not compatible with the Japanese language. She explains that the social context is not taken into account in that theory, although it plays an important role in the Japanese language.

Conversely, Pizziconi (2003) challenges criticisms - such as those made by Ide and Matsumoto (1988, 1999) - and claims that 'Ide and Matsumoto's observation may have prompted subsequent reflection on the notion of "appropriateness", but their analysis does a disservice to the characterization of Japanese and to the larger discussion on cross-cultural correlates' (pp. 1472–73). As Pizziconi (2003) states, the problem with Ide and Matsumoto's argument is that their view of politeness has been restricted to the use of Japanese honorifics, rather than investigating overall cross-cultural views of politeness. In this vein, Fukuda and Asano (2004) point out that their perspectives are closely linked to the 'appropriateness' of honorific language use, which in their view is restricted by social rules.

The debate revolves around the different definitions of 'honorifics' and 'politeness' in Japanese, and reconsiders these definitions. In fact, these terms have been redefined by the Japanese government, as examined below.

#### 2.5.5 Japanese politeness and honorifics

According to Asada (2005), before the Meiji Restoration (during the feudal era of Japanese history), Japanese honorifics were based on social classes, and were mainly utilised for the purposes of requests, apologies and vindication from lower status people to those of a higher status. They were important tools for lubricating communication between people of different classes.

In Japanese language education, the phrase *taiguu hyoogen* has been used for Japanese politeness strategies or expressions. As the Japanese Agency for Cultural Affairs (1971) states, althouth *taiguu hyoogen* was originally used to refer mainly to honorifics, its definition has broadened. For example, the Japanese Agency for Cultural Affairs (1995) has defined it as 'speakers' language choice based on the context, situation and consideration to others. It includes various expressions such as honorifics' (Translated by the author).

In 2000, the Council for Japanese Language, proposed the term *keii hyoogen* in the report titled, '*Keei hyoogen* (respectful expressions) in Japanese linguistics'. Compared to traditional Japanese politeness (*taiguu hyoogen*), which includes the use of honorifics, *keei hyoogen* is not necessarily linked to social rules. Rather, it is context-dependent, and includes not only honorific expressions but also holistic language choices based on mutual and respectful human relationships, rather than on power relationships.

Essentially, *keei hyoogen* is based on the theory of *wakimae* (discernment). As mentioned earlier, research by Hill et al. (1986) presented ideas on the difference between Japanese

politeness and universal politeness. They found that the degree of *wakimae* (politeness decided by social rules) in Japanese is greater than in American English. Ide (2006) later admitted that *keei hyoogen* aligns with Brown and Levinson's (1987) politeness theory, in that:

- 1 it not only restricts itself to keigo (honorifics), but includes other elements of language that contribute to politeness;
- 2 it includes expressions relevant to positive politeness;
- 3 honorifies are intended to show deference and negative politeness;
- 4 it includes unfixed forms, such as the use of sentence final particles;
- 5 it is used as a communicative strategy (pp. 154–57).

Ide (2006) also defined the basic difference between universal politeness and *keei hyoogen*. According to her, by utilising *keei hyoogen*, people can exhibit an attitude of maintaining Japanese cultural traits, such as awareness of social rules and indication of modesty and humbleness via language use, and are able to choose a speech style dependent on the identity of the speaker. In 2007, the Council proposed a new categorisation of honorifics on the basis of *keei hyoogen*. All of this demonstrates that the notion of honorifics (*keego*) in Japanese is shifting towards a notion of universal politeness.

#### 2.5.6 Application of politeness theory to AVT research

As discussed earlier in this chapter, AV translators are required to convey the original message to the target audience in a way that fits the image on screen. Within the constraints of AVT, some cultural elements (i.e. politeness) that are important for understanding may be omitted (Mijas, 2008). Although Brown and Levinson's politeness theory has been challenged by a number of scholars, it is still commonly utilised for analysing AVT text.

As a pioneer of this area, Hatim and Mason (1997) conducted a comparative analysis between the French original version and the English subtitled version of the French film, *Un Coeur en hiver*, employing the concept of positive and negative politeness based on Brown and Levinson's (1987) theory. The study suggests the possibility of misleading the audience of the subtitled version in terms of the meaning. In particular, they suggest the importance of testing the difference between source and target language auditor impressions of characters' attitude, as it is possible that the interpersonal meaning of the source text is not conveyed appropriately to the audience.

In addition, Gartzonika and Serban (2009) aimed to investigate the basis of Brown and Levinson's (1987) politeness theory, and examined how a FTA (Face Threatening Act) in the original Greek film, *Loafing and Camouflage*, was transferred to the English subtitled version. The study showed that no consistent strategy was used to transfer FTA in the original text to the English subtitled version.

More recently, Abuarrah and Istetih (2016) conducted a comparative study between the English original versions and translated Arabic versions of cosmetic audio-visual advertisements, based on the notion of 'face' and politeness by Brown and Levinson (1987). The findings of their study suggest that politeness strategies could be used in translation as the 'domestication' of English advertisements into Arabic.

As far as the present author is aware, relatively few Japanese AVT studies have been conducted on the basis of the politeness theory of Brown and Levinson (1978, 1987). Ushie and Nishio (2009) compared the original English and Japanese subtitled texts of two English films, *Notting Hill* and *Love Actually*, and investigated how positive and negative politeness used in the source text were transferred to the target text. The results suggest that, while the use of politeness strategies in the original English version are likely to be determined by the imposition of individual utterances, the distance and power between the speaker and the addressee tend to affect the subtitled Japanese text.

## 2.5.7 Application of politeness theory to this study

Although the application of Brown and Levinson's (1978, 1987) theory of politeness into Japanese has been debated, the present study chose to apply this theory for the following reasons. The notion of politeness in Japanese is shifting from the use of honorifics, which includes only deference ('negative politeness'), towards a theory of universal politeness, which includes elements of 'positive politeness' in Brown and Levinson (1978, 1987). Secondly, many AVT studies apply the theory of politeness of Brown and Levinson (1978, 1987). Hence, politeness theory, and in particular the dual concept of 'positive politeness (strategy)' and 'negative politeness (strategy)', will be applied in the analysis undertaken in the present study.

# 2.5.8 Foreignisation and domestication

Since Lefevere and Bassnett (1998) advocated the integration of translation and cultural studies, intercultural transfer between source language and target language has often been discussed on the basis of two translation strategies, explained by Venuti (1995): domestication and

foreignisation. Domestication involves adapting the source text into the target culture; while foreignisation aims to accommodate the target text into the source culture.

The argument of Venuti (1995) comes from his ideological stance against the imbalance of power that exists between Anglo-American language and other languages in translation. The UNESCO (2017) index of translation reveals the fact that there are overwhelming numbers of publications written in English which are translated into other languages. In domestication, the source text is adapted to the target culture and is likely to be construed with fluent natural target language. Hence, the reader (audience) would not have the opportunity to perceive the source culture, and consequently would be under the illusion that text was originally written in the target language. Venuti (2008) argues that, because of domestication, translators' hardships tend to be ignored and the translators themselves become 'invisible'. Moreover, there is no copyright protection for their work. Venuti (2008) characterises domestication as being a product of ethnocentrism, and suggests foreignisation as a better solution, in which the source culture is preserved in the target text.

However, it is questionable to what degree foreignisation can actually be achieved (Tymoczko, 2006; Baker, 2010). For instance, in the case of AVT, in order to successfully sell the dubbed / subtitled version of a DVD as a 'product' in the market, the needs of consumers (the audience) should be taken into account. Hence, there is a possibility that, to meet the demand of the audience, the translator would aim to transfer the source language into the fluent natural target language, which amounts to 'domestication' in Venuti's sense of the term.

Furthermore, Venuti (2008) states: 'No language can afford the stagnation that results from restricting or excluding contacts with other languages. No culture can afford the complacency of allowing the hierarchy of values that structure it to go unexamined and uncriticised' (pp. 19-20). An example of this was mentioned earlier in this chapter, where the dubbing of imported American films used to be part of a strategy to control the media for the purpose of enhancing imperialism, under some governments and also under the fascist regimes of Italy and Germany during the World War II. They excluded foreign language from the films and also manipulated the script by deleting words and lines that caused inconvenience for the government. This is considered to be an example of the risks associated with domestication that Venuti identified.

#### 2.5.9 Foreignisation and domestication in the Japanese context

In the early years of history of literary translation in Japan, foreignisation was a strong phenomenon. Japan reopened its border with the Meiji Restoration in 1868 after having had the border closed for 260 years. During that 260-year period, Japan had limited contact with

overseas, as limited under the policy of the Tokugawa Shogunate. After the Meiji restoration, Japan and its people were eager to adopt Western cultures, during the modernisation under the slogan of 'Bunmee Kaika' (Civilisation enrichment). Hence, translation was a highly regarded profession in the 1890s, as translators were the pioneers in the introduction of Western literature and helped to shape the new modern Japanese language and culture (Komori, 2000). The priority of translation was to facilitate the importation of new ideas and information from overseas. Issues such as the authenticity and naturalness of the translated text were considered to be of secondary importance (Furuno, 2005). As Toyama (2007) explains, Japanese translators in those days struggled to translate from foreign languages to Japanese, as they could not find Japanese equivalents for some of the original words. Consequently, they were forced to create new Japanese words such as ginkoo (bank). In addition, a Japanese language style that was influenced by the European languages (honyakuchoo) had gained status. In addition, as discussed earlier in this chapter, in the history of silent film in Japan, the benshi (orator) played an important role in showing films. The benshi stood near the screen facing the audience and narrated the story, as well as playing the role of each character in the film by changing his or her voice. The application of *benshi* to silent film is unique, and is considered to be an example of domestication as the Western films were transferred into the Japanese context.

Recently, there has been increasing discussion and argument regarding the importance of being faithful to the original text as well as being acceptable to the audience (Furuno, 2005). In the current trend in Japanese translation, naturalness of the translated Japanese text receives greater attention. As an example, Furuno (2005) conducted a survey of 45 translation course students. As a part of the questions relating to 'adequacy' and 'acceptability', 5 percent of the students chose 'translation should be faithful to the original even if the resulting text becomes somewhat unnatural', 57 percent chose 'it is better to have a reasonable text even if the translation does not follow the structure of the original', and 38 percent selected 'not sure which is better'. The findings of Furuno's (2005) study suggest that 'acceptability' is the norm for translation in Japan. In recent years, foreignsation can only be found in very limited Japanese contexts (Tamaki, 2005).

# 2.5.10 Application of Venuti's concepts into AVT

Since most of the research adapting the concepts of domestication and foreignisation focus on literary translation, it would be beneficial to identify the basic technical differences between AVT and literary translation, in order to understand how these concepts apply to AVT. AVT has more constraints than literary translation. Either subtitled or dubbed, the translation is supported with the visual image in motion pictures. On the other hand, a reader can only access

written information in literary translation. AV translators face dilemmas in achieving an appropriate balance between foreignisation and domestication, as they try to be faithful to the source text, but at the same time, are expected to produce a text that is acceptable to the target audience (Lourdes, Pereira & Xoubanova, 2003). According to Chaume (2012), within the general production chain of Western European dubbing workflow, there is a process of the 'rough translation' by the translator being domesticated by the dialogue writer to make the dialogue sound natural and being successfully synchronised. The process of 'rough translation' may be aimed to speed up the work and reduce the cost of translation. However, this also shows the recent trend of emphasising domestication and naturalness of language in dubbing in Western European countries. Naturalness is one of the important element often discussed in the area of AVT (Pavesi, 2004; Pavesi, Formentelli & Ghia, 2014; Romeo Fresco, 2009, 2012). Naturalness is often referred as idiomaticity. Naturalness in an AVT target text is achieved the language choices which are idiomatic or conventionally approved by the native speaking audience and fits within the given context. (Romero Fresco 9, 2012).

Limited studies have been conducted concerning the issues of domestication and foreignisation in the area of AVT. Ramière (2006) has analysed the English subtitles of the culture-specific references of three French films in terms of translation strategies, on the basis of domestication and foreignisation. The study of Ramière (2006) suggests that AV translators choose the best solution for each translation problem without having pre-established general strategies.

# 2.5.11 Application of foreignisation and domestication in the present study

As discussed in Section 2.5.8 Venuti (1995, 2008) criticised domestication as a product of ethnocentrism and suggested foreignisation as a better translation strategy. Nevertheless, as previously mentioned, the present study examines the impact of translators' choices on the pragmatic dimensions of the translated version of the television series, *ER*. Therefore, it is not within the scope of this research to judge the translator's choice of strategy as being either domestication or foreignisation. As mentioned in Section 2.5.10 the study of Ramière (2006) suggests that AVT translators are likely to choose the best solution for each translation problem, rather than having pre-established general strategies, including domestication or foreignisation. The present study aims to analyse the domestication or foreignisation effect of linguistic features at the micro interaction level as a translation solution, by focusing on the product of the translation rather than on its process. Moreover, since those strategies may be utilised at both macro and micro levels of the text (Venuti, 1998), it is worthwhile to consider those strategies in terms of reason for choices made by the translator of *ER*.

In addition, there are two other issues to be investigated in the present study. On the one hand, Venuti (2008) points out that more foreignisation has been found in the case of English source texts translated into a less powerful target language, while more domestication is seen in English target texts translated from other source languages. On the other hand, Hatim and Mason (1997) state that domestication is clearly observed in the dubbing of imported English language television series into minority-status languages. Those two contradictory views are considered worthwhile to be examined in the present study, for the following two reasons. Firstly, Venuti compares English with other European languages, and limited attention has been paid to the comparison between English and Asian languages. Therefore, it is interesting to investigate Venuti's view in the case of Japanese dubbed and subtitled versions of *ER* as a case of an English original text translated into an Asian language.

Secondly, it is obvious that the Japanese language is not considered as a minority-status language. Nonetheless, UNESCO Index Translationum (2017) shows that, from 1979 to March 25<sup>th</sup>, 2017, 126,630 published originally English books have been translated into other languages, which is significantly more than for Japanese original texts (29,246). Therefore, it would be possible to say that Japanese is less powerful than English. Hence, it is also considered to be plausible to investigate the above point by Hatim and Mason (1997), regarding the presence of domestication in the dubbing of imported English language television series into minority-status language, by examining whether domestication is observed in the case of the Japanese dubbed version of the American TV drama, *ER*.

For the reasons explained above, it is considered of value to investigate the phenomenon of domestication and foreignisation as part of the present study.

# 2.6 Chapter Summary

This chapter has provided the background of AVT, which is essential to understand the present study. The chapter began with the definition of AVT employed in this thesis, followed by the history of AVT, with a particular focus on AVT in Japan. This was followed by a discussion of the technical challenges of subtitling and dubbing as translation within constraints. The chapter then shifted its focus to intercultural/cross-cultural perspectives on AVT, along with the issues of foreignisation and domestication. The chapter concluded by providing reasoning to support the inclusion of the concepts of foreignisation and domestication in the present study.

The next chapter will provide the background information of hospital hierarchy and theoretical framework from which cross-cultural and linguistic issues of hierarchy and power will be examined in this thesis.

### **CHAPTER 3: HIERARCHY IN THE HOSPITAL**

As in any workplace interaction, navigating power hierarchies while conforming to standards of polite interaction are critical for success. In a complex hospital setting where there is a wide array of medical experts who must communicate effectively, the strategies for politeness that help caregivers function as a team must be enacted within an extremely complex hierarchical system, which makes participants' expectations for what constitutes polite/politic behaviour more difficult to determine and enact.

(Graham, 2009, p. 14)

#### 3.1 Introduction

As discussed in Chapter 2, the aim of Chapters 2, 3 and 4 is to provide the general and theoretical background of the study. In particular, this chapter focuses on the issues of politeness within the hierarchy of the hospital setting. This chapter addresses the following three areas. The first involves the settings of the drama and background of emergency medicine, which are discussed in Section 3.2. The second area concerns the hierarchy in the hospital, which is discussed in Section 3.3. The third, in Section 3.4, encompasses the communication problems within the hierarchy of the hospital from the perspective of cross-cultural pragmatics, including issues relating to forms of address. Section 3.5 discusses the concept of 'footing' as well as the 'participation framework' by Goffman (1981) which will be employed for the analysis in Chapter 7.

#### 3.2 The setting of the TV drama ER

#### 3.2.1 A scene of the County General ER

The lobby of the ER of the County General Hospital is constantly busy and filled with patients awaiting treatment. Some patients complain about how many hours they have been required to wait. Triage is conducted to distinguish those patients who need urgent medical attention from those who do not. Once an ambulance arrives, doctors and nurses treat the genuine emergency patients with priority.

Since County General is a teaching hospital that is affiliated with a university, many of the doctors are residents who are engaged in postgraduate medical training work in the hospital. Within the institutional hierarchy of the hospital, these young doctors are considered higher than nurses with extensive experience. All the doctors and nurses are portrayed as dedicated

professionals: they do not have time to sleep or eat meals, and are forced to sacrifice their family life. They choose to work in these demanding circumstances and devote themselves to saving human lives. Most of the characters in the *ER* drama are medical staff, patients and their family members. As Pourroy (1995) explains, unlike other medical dramas, the focus of this drama is the emotional journey of the doctors, rather than the patients. More importantly, in this drama, doctors are portrayed as normal human beings who can suffer or struggle throughout their lives, just like the audience.

## 3.2.1 Emergency medicine in the US and Japan

Emergency medicine has developed significantly in the US since the 1960s. In 1963, James D. Mills and four other physicians began an emergency department in Alexandria, Virginia (Emergency Medicine, 2006; Suter, 2012). In 1968, the American College of Emergency Physicians was formed by eight physicians (Suter, 2012). The first emergency medicine residency program was established at the University of Cincinnati (Emergency Medicine, 2006) in 1970. Emergency medical services and systems were established by law in 1973. In 1979, emergency medicine was recognised as the twenty-third medical specialty by the American Medical Association and American Board of Medical Specialties (Emergency Medicine, 2006). Since that time, emergency medicine in the US has continued to develop as an area of specialist medical practice. Suter (2012) points out that media attention - including the broadcast of television dramas within the context of emergency medical services, such as ER - has contributed to this area.

In Japan, the system of Japanese emergency medicine has been overseen by the government from its beginning (Hori, 2010). In the 1960s, the implementation of emergency medical services was regulated by the government, while emergency hospitals were designed and founded by the government. The Japanese Association for Acute Care Medicine (JAAM) was established in 1973, and the Japanese government founded emergency medical service centres and approximately 6,000 medical facilities that were categorised into three levels: primary, secondary, and tertiary facilities. Hori (2010) further explains that, in 2003, the JAAM established a committee to promote the US model of emergency medicine system. The committee named the model the 'ER-type', after the TV drama *ER*, which illustrate the popularity of the drama in Japan.

## 3.3 Institutional hierarchy in the hospital

#### 3.3.1 Graham's (2009) study

As Graham (2009) points out, although many studies have examined communications between patients and medical staff, much less research has considered the interactions between medical staff. Graham (2009) investigated the potential conflict between physicians and caregiving teams at an American teaching hospital, by analysing the data from individual interviews with various members of the hospital. The context of Graham's (2009) study is considered relevant to ER, because the fictional County General Hospital featured in ER is also an American teaching hospital.

Graham (2009) found that the communication problems and conflicts between some of the medical and nursing staff were affected by fact that there were two coexisting hierarchy systems operating in one hospital. One was an institutional hierarchy, which was based on the institutional station. The other was a social/expertise hierarchy, based on experience, age and expertise. For instance, although registered nurses (RNs) were considered lower in status than medical doctors (MDs) in the institutional hierarchy, some RNs had much greater experience treating patients than did young MDs. Therefore, they were higher on the social/expertise hierarchy.

# 3.3.2 Hierarchy systems according to Graham (2009)

#### 3.3.2.1 Categories of MDs

Below are the categories of MD as set out by Graham (2009. p. 16).

- Medical students in their third and fourth years come to the hospital to observe the caregiving process and begin the socialisation process into their MD careers.
- Interns are physicians-in-training who have completed medical school (i.e. have their MD degrees) and are engaged in their first year of training. Although these doctors have their MD degrees, they are not allowed to practice medicine unsupervised.
- Residents are licensed MDs who have chosen a speciality area and are receiving further training in that discipline. (Some residents continue their training even further through post-residency fellowships).

- Attending physicians are MDs who have completed their residencies. In addition to practicing medicine in their speciality area(s), attending physicians can also supervise residents and medical students. Legally, attending physicians have final responsibility for patient care, even when many of the minute-to-minute decisions are being made by subordinates.

The above categorisation reflects the hierarchy portrayed in the drama. However, 'intern' is used for the first year of residency in the drama. In addition, in the drama, 'senior residents' supervise residents and medical students.

## 3.3.3 Hierarchy of the hospital

#### 3.3.3.1 What are residents?

Since ER is set in a teaching hospital where practical training is provided for medical students and residents, many of the characters of ER are beginning their medical careers as residents of the ER. As Coats and Burd (2002) state, the role of the residents in teaching hospitals is complex. This is because, in both the American and Japanese medical systems, hospital-based residents are MDs who are qualified to practice medicine but are still completing postgraduate training and thus do not have the authority to make final decisions. Patients are admitted under the care of a fully qualified specialist who bears the ultimate responsibility for their care.

#### 3.3.3.2 Residency in American medical systems

After completing a four-year postgraduate medical degree, graduates move on to a residency program. Akatsu (2008) and Tsuda (2009) describe the key features of the residency system in the US. The length of the program differs from three years to five years, depending on the area. In the US system, medical students focus on clinical training in the final two years of their medical degree. Therefore, upon completion of the degree, they have already acquired some basic clinical skills. For them, residency is the period during which they improve and develop their clinical skills and ability further within the set curriculum. Although all final decisions have to be made by the attending doctors, the residents play central roles in treating patients in the hospital. Both Akatsu (2008) and Tsuda (2009) also highlight that the responsibilities of residents, include educating medical students.

## 3.3.3.3 Residency in Japanese hospitals

In Japan, the clinical experience as a medical student is very limited, even after completing a six-year undergraduate medical degree and passing the national examination. Before the advent of the mandatory two-year residency training in 2004, the only, non-mandatory postgraduate training was available at university hospitals, where doctors belonged to a department called *ikyoku*. In *ikyoku* there exist strict hierarchical relationships between the professor and other staff. Alumni can also be members of *ikyoku*. A famous Japanese novel, *Shiroi Kyotoo* by Toyoko Yamazaki (1965) which became a film in 1996 and was the basis of four different television dramas in 1967, 1978, 1990 and 2003, disclosed the problems of university hospitals and hierarchical relationships between doctors in *ikyoku*, with the professor having the power to make all decisions, including those relating to the employment of doctors in local hospitals, before the implementation of the mandatory residency system.

Since the implementation of new mandatory postgraduate training programs by the Japanese government in 2004, residency programs have been conducted not only at university hospitals but also at other teaching hospitals. Many residents still choose to undertake training in university medical institutions and to belong to *ikyoku* (Rao, 2008). However, more doctors choose to train at non-university hospitals than before, because the residency program and clinical skills training of non-university hospitals show significantly higher satisfactory outcomes than do those of university hospitals (Nomura, 2011).

#### 3.3.3.4 Nurses in ER

Nurses also play important roles in the television drama *ER*, and are all portrayed as skilled and dedicated. 'The truth about nursing' (2008-2017) states that "ER" is the only drama now on television to make any real effort to show that nurses are skilled, intelligent, and important to patient care' ("Midnight in the Garden of Nurses and Murses"). In fact, during ER, two nurse characters pass the exam to medical school, and one successfully completes the course and transfers from being a nurse to a doctor. This storyline indicates the producer's intention to demonstrate the capability of nurses. Furthermore, the following *ER* episode may give the audience an opportunity to consider the professional value of nursing. *ER* Season 8 episode 16, 'Secrets and Lies', includes the following discourse. The character of Abby Lockhart states to her doctor colleagues: 'You all think you're smarter than nurses because you have an MD. It's part of the educational caste system we have in this country'. Lockhart then states that she quit

medical school and chose to become a nurse because she believed that nurses could make more difference to a patient's life than could doctors.

#### 3.3.3.5 RNs in the US and Japan

In order to practice as a registered nurse (RN) in the American system, an applicant must pass an examination to obtain a license from the board of nursing of the relevant state. The license is valid only for that particular state. The following degrees are required to apply for licensure to practice nursing:

- an Associate Degree in Nursing (ADN) offered after two years of study at a community college or hospital-based school of nursing; or
- a Bachelor of Science in Nursing (BS/BSN), which is a four-year university/college undergraduate degree.

(Source: American Nurses Association, 2017; The Truth About Nursing, 2008-2017).

In the Japanese system, applicants have to pass a national examination to be qualified to practice as an RN in the country. The following is required for a nurse to apply for the national examination:

- completion of a three-year course at a nursing junior college or nursing school; or
- completion of a four-year course at a nursing university.

(Source: Japanese Nursing Association, 2017).

In addition, the qualification of Nursing Practitioner (NP) was implemented in 1960 in the US. An NP requires a higher qualification than an RN, and is allowed to diagnose patients and write prescriptions. Implementation of a similar system to NP is currently being considered in Japan (Yokota, 2015).

Based on her own experience working as an RN in Japan and studying to become an RN in the US, Yokota (2015) explains the similarities and differences between the nursing system in Japan and in the US. According to her, there is no significant difference between the quality of nurse education between the US and Japan. Yokota (2015) also explains the differences in the job descriptions of RN between countries. One difference is that, in Japan, RNs are responsible

for various duties relating to patient care. On the contrary, in the American system, many of these duties tend to be the province of other professions in the hospital. For instance, while nurses take patients' blood samples at the hospital in the Japanese system, in the US system a phlebotomist is responsible for this.

## 3.4 Communication within the hospital hierarchy

# 3.4.1 Communication between residents and attending physicians

Issues surrounding communication between attending physicians and residents have previously been discussed in the literature (e.g. Belyansky et al., 2011; Shilverman, Golfarb & Baker 2008; Walton, 2006). Since residents are doctors who are licensed to practice in the hospital, they are lower in the hierarchy than the attending physicians, and can be hesitant to raise their concerns or to disagree with the attending physicians. In particular, residents' ethical disagreements with attending physicians are common in the US (Benjamin, 2002; Shreves & Moss, 1996). In addition, the lack of communication between surgical residents and attending physicians is crucial in emergency situations, because it can cost the life of a patient. Since there is a hierarchical relationship between surgical residents and attending physicians, residents tend to hesitate to speak up to the attending physician, which can affect patient safety (Balyansky et al., 2011).

Although there are no studies or articles examining communication between residents and attending physicians in Japanese hospitals, a cross-cultural survey of residents' perceived barriers to questioning or challenging authority was conducted by Kobayashi et al. (2006). A questionnaire was completed by 175 US residents and 65 Japanese residents. The results did not show a significant difference between the two groups in terms of the residents challenging their superiors. However, interestingly, more US residents than Japanese residents agreed with the statement, 'Senior staff should encourage questions from junior medical staff if appropriate' (88.6 per cent of US residents answered, 'very consistent', compared to 19 per cent of Japanese residents).

#### 3.4.2 Communication between doctors and nurses

Traditionally, there has been a hierarchical relationship between doctors and nurses in the US, the UK and Japan. Stain (1967) explained the hidden rules of communication between doctors and nurses in the US as the 'doctor-nurse game', in which nurses are subordinates who make

suggestions to doctors, and doctors consider the suggestions from the nurses and make decisions as the authority. This hierarchical relationship between doctors and nurses is based on occupational roles and gender roles. When Stain's article was written in 1967, the majority of doctors were male and the majority of nurses were female. However, since the 1970s, gender roles have shifted in US society, and there are now more female doctors and more male nurses than in 1967. Gremov and Freji (2009) explain that, since 1970, the nursing profession has changed, including university qualification, and the role and status of nurses have begun to be redefined. The study of Zelek and Phillips (2003) suggests that the traditional imbalance of power between a doctor and a nurse diminishes if the doctor is female. Although recent research shows the importance of collaboration between doctors and nurses (Fagin, 1992; Larson, 1999), there is a remaining communication barrier between doctors and nurses (Larson, 1999; Morinaga, Ohtsubo, Yamauchi & Shimada, 2008).

As Ohtsubo, Shimada, Yamauchi, Morinaga and Misawa (2003) state, nurses tend to hesitate to challenge doctors about their decisions because of their lower position in the hierarchy, which has the potential to lead to critical errors. Similarly, the study by Morinaga et al. (2008) shows that the doctors' reluctance to communicate with nurses contributed to the communication barrier between nurses and doctors.

#### 3.4.3 Issues of politeness and address forms

#### 3.4.3.1 Research focus

As mentioned earlier, one of the purposes of the present study is to investigate how pragmatic aspects of the source text transfer cross-culturally to the target text. In particular, this study investigates how the distance and power portrayed by address forms (including the singular second person pronoun) as a pragmatic marker used in the source text are translated (transferred) into the subtitled and dubbed text.

#### 3.4.3.2 Definition of 'address form'

The term 'address form/term' and 'form/term of address' have been used differently in the area of linguistics, because of differences in address systems in language communities. As Suzuki (1975) points out, although address forms are categorised into vocative use and referential use in English, these usages can overlap in Japanese. For instance, the honorific address form, *sensei*, cannot be replaced by the second person pronoun in Japanese:

#### Eg. **Sensei** mo ikaremasu ka.

(Teacher/ doctor, are you going as well?)

Accordingly, the present study applies the definition of forms of address by Braun (1988): 'The term denotes a speaker's linguistic reference to his/her co-locutor(s)' (p. 6); and includes both vocative use and referential use.

#### 3.4.3.3 Address forms as pragmatic markers

Norrby and Warren (2006) state that:

The way we address one another is crucial in marking social relations, and is thus central to human relationships. Address also reflects cultural values and as an indicator of major social and political changes that affect human relationships and social networks. (p.15.1)

Address form is an effective pragmatic device that indicates distance, power and solidarity. Thus, within AVT as a cross-cultural context, it is crucial for the translator to choose the appropriate form in the source language. In terms of translating from the English original of 'you' to Japanese, translators have to select the most appropriate form out of numerous options. The pioneer of Japanese audiovisual translation, Toda (199, pp. 167–168), states that the inappropriate choice of first- and second person pronouns when translating English film to Japanese has the danger of projecting different relationships between characters, or even entirely different stories.

Much of the research in this area is based on the distinction between the casual second person pronoun known as 'T', which is equivalent to French *tu*, and the formal form 'V', which is equivalent to the French *vous*, in European languages. Brown and Gilman (1960) analysed the use of 'T 'and 'V', and argue that the choice between 'T' and 'V' by the speaker is based on relative power and solidarity. They also discovered its correlation with social relationships. For example, they found that reciprocal 'T' or' V' has a function of solidarity, while non-reciprocal 'T' or 'V' indicates a power relationship. Writing in the middle of the 20<sup>th</sup> century, Brown and Gilman (1960) noted that there had been a shift of forms of address in European countries. A recent series of studies was conducted by a group from the University of Melbourne (Clyne, 2009; Clyne, Kretzenbacher, Norrby & Schupbach 2006; Clyne, Norrby & Warren 2009; Kretzenbacher, Clyne & Schupbach, 2006; Norrby, 2006; Warren, 2006), based on the differentiation of 'T/V' by Brown and Gilman (1960). They conducted an investigation of the

relation between the choice between 'T' and 'V' and the human relationship, by comparing French, German and Swedish. The study shows the tendency of contemporary speakers to prefer individual choices of address forms rather than choices imposed by the workplace or institutions.

The choice of address forms works as a pragmatic marker, because it indicates that the speaker is showing deference to the interlocutor by acknowledging distance, or is showing solidarity by shortening the distance. As discussed in Chapter 2, Brown and Levinson (1978, 1987) introduced politeness strategies for saving face in order to mitigate face threatening acts (FTAs). Some of the studies in this area have applied positive and negative politeness strategies to analyse address forms (e.g. Arnaiz, 2006; Liu, 2009).

Moreover, as Hatim and Mason (2000) point out, by switching one pronoun for another in languages that have distinct pronouns of address to encode the addresser/addressee relationship, there is the potential to create FTA because of a sudden reduction of distance between the interlocutors. From the intercultural perspective, Clyne (2009) argues that negotiating address mode is crucial, and highlights the importance of understanding the social significance of the address mode between the addresser and addressee.

Since the system of forms of address in Japanese is complicated and different from European languages, applying the T/V system in the Japanese language is a different process. For instance, personal pronouns are not easily categorised into two groups, because using no second person pronoun ('zero pronoun') is more formal than using any second person pronoun. In addition, within a hierarchical society, a Japanese speaker would identify the distance between himself or herself and the hearer by choosing a particular address form. The choice can be a presupposition of the relationship (Takiura, 2007, 2008), which is not always the case in English and other European languages.

As mentioned in Chapter 2, Miwa (2000, p. 86) points out that the choices of personal pronouns and address forms in dubbed versions of television dramas and films can cause problems in terms of politeness. Through dubbing and subtitling, the social structural system of the source culture can be replaced with the system of the target culture. As a result, if the dialogue of an English drama is translated into Japanese, the Japanese audience may have the illusion that the source culture also has a hierarchical power relationship in its society, like Japan (Miwa 2005, p. 97).

## 3.4.3.4 Difference between English and Japanese systems in personal pronouns

As discussed above, one of the purposes of this study is to investigate how the English source text is translated into the Japanese target text. Therefore, it is useful to discuss the difference between the English and Japanese address systems. Suzuki (1975) explains the difference between the system of Japanese personal pronouns and the systems of English and other Indo-European languages. Firstly, although there are a limited number of second person pronouns in English and other Indo-European languages, there are numerous options in the Japanese language. Secondly, second person pronouns tend to be omitted in Japanese where they would be obligatory in languages such as English. Suzuki (1975) also points out that, although the use of personal pronouns is often reciprocal in English and other Indo-European languages, it is often non-reciprocal in Japanese. Below is a summary of the characteristics of the Japanese address system in comparison to those of English and other Indo-European languages.

## 3.4.3.4.1 Japanese second person pronouns

As discussed earlier, the most significant difference between forms of address in English and Japanese is that modern English has only one second person pronoun, 'you'; other Indo-European languages have one or two second person pronouns; and Japanese has numerous second person pronouns. Ono and Hamanishi (1985) enumerate 28 Japanese second person pronouns. Within these pronouns, the most frequently used singular second person pronouns are *anata*, *kimi*, *omae* and *anta* (Makino & Tsutsui, 1989). Makino and Tsutsui (1989, p. 28) divide the second person pronouns into the following categories: very formal (none), formal (*anata*), informal (*kimi*), and very informal (*omae* and *anta*). These categories indicate that there are no very formal second person pronouns in Japanese, and that to avoid using the pronoun is more formal than using any other pronoun.

#### 3.4.3.4.2 Omission of pronouns

Although grammatically it is possible to omit subject pronouns in some European languages, such as Spanish, they are essential for English clauses/sentences. In Japanese, first- and second person pronouns tend to be omitted unless they are marked or not identifiable by the context:

#### Example 1:

		English translation
Ashita	eega ni iku	I will go to a film
_		tomorrow
Tomorrow	go to film	
	Ashita Tomorrow	

(Anata wa)	Ashita	eega ni iku [with rising	Will you go to a film
		intonation]	tomorrow?
(You)	Tomorrow	film go	

Accordingly, in the Japanese system, it is possible to consider the non-use of first and second person pronouns as the default. Japanese second person pronouns as address forms are particularly likely to be avoided. Takiura (2008) explains that, historically, people in various cultures often tried to avoid addressing someone directly in order to indicate distance between them and their interlocutors. As a result, address forms that have functions to show distance/deference were formed in many languages. For example, as mentioned above, there is a classification of 'T'-equivalent (casual forms) that show solidarity by having closeness, and 'V'-equivalent (formal forms) that show deference by having distance in European languages. In addition, the avoidance of 'you' can be observed in languages other than Japanese. In English, if 'you' is used in an attention-seeking phrase, this could potentially result in face-threatening (Brown & Levinson, 1987).

#### Example 2:

'Excuse me, you' and 'Hey, you' (Brown & Levinson 1987, p. 203).

## 3.4.3.4.3 Reciprocity and restrictions

In English and other Indo-European languages, reciprocal exchanges are common in the use of forms of address (Suzuki, 1975). This is especially the case in egalitarian societies such as the US, with reciprocal first-name exchanges common in American English. However, there are

cases in which the exchange is often un-reciprocal, such as in teacher-student and employeremployee relationships (Okamura, 2009).

The Japanese address system, including personal pronouns, is not as simple as the categorisation and choice of T/V or first name/last name. For instance, based on the categorisation of formal 'V' and informal 'T' in European languages, Yanagisawa (1995) explains that *anata* is the only 'V' equivalent among the numerous second person pronouns in Japanese. However, the use of *anata* is less likely to be reciprocal; thus, a speaker of higher status may use it with an addressee of lower status, but not vice versa. Yanagisawa (1995) states that, 'normally, people of a lower status never use you to their address of a superior or senior status' (p. 230). In other words, if it used in this manner, it is clearly marked.

As explained earlier, the default form of Japanese discourse is without the second person pronoun. Therefore, there is always a special reason to use pronouns. There are restrictions on using second person pronouns in Japanese, and they can be used only between people with the same status or higher to lower status (Takubo, 1997). Hence, when a translator chooses pronouns, it is essential for them to consider the distance and hierarchy between the interlocutors. For example, although *anata* is categorised as a formal personal pronoun, there are restrictions on its use, as Yanagisawa (1995) points out. If a speaker ignores these restrictions, this is likely to give an unpleasant feeling to the interlocutor. For instance, Japanese teachers would feel uncomfortable being addressed with *anata* by their students. Students are expected to address their teachers as *sensei* in Japanese schools.

## 3.4.3.4.4 Terms replace the second person pronouns

As discussed earlier, in terms of translating the English original 'you' to Japanese, translators have to select the most appropriate form from numerous options. For example, in the case of doctor-patient discourse, patients are likely to choose the word *sensei* as an occupational title to show respect to the doctor. The doctor is expected to be addressed simply by *sensei*, or with their surname and *sensei*, rather than with the singular second person pronoun *anata*, by junior doctors and other staff of the hospital.

#### Example 3:

This conversation is from a scene in *ER* Season 4, episode 3, "Friendly fire". The English word 'you' in the original text has been replaced with '*sensei*'. In this scene, Mark Green (an ER staff doctor) talks to an eminent emergency physician Dr Lawrence:

Table 3-1 Example of terms replace the second person pronouns

Speaker	English	Dubbed Japanese
Carter	I've heard a lot about you.	Sensei no uwasa wa itsumo mini ni shiteimasu.
		I have always heard about <b>you</b> , (doctor).

Suzuki (1978) considers that Japanese terms of self-reference and address are defined as generally expected behaviour by each individual with specific qualifications or qualities within a social context. Suzuki further explains that it is often the case that singular second person pronouns are replaced with a term denoting the specific role. For example, when a child is angry with his or her mother, the child might say 'I hate you' to the mother. However, in Japanese (Suzuki, 1978, p. 148), the child would say 'I hate mother' ('you' would be replaced with 'mother'). In addition, it is often the case in Japan that, even without the presence of their child/children, a husband addresses his wife as okaasan (mother), rather than by her name or with personal pronouns.

## 3.4.3.5 Gender differences

Gender difference in terms of choosing second person pronouns in Japanese has been discussed in previous research. Masuoka and Takubo (1992) state that, while the second person pronouns *omae* and *kimi* are mainly used by men, forms such as *anata* and *anta* tend to be used by women. In contrast, Kanamori (1997) states that *anata* is commonly used in a formal context, while *otaku*, *kimi*, *omae*, *kisama* and *temee* are mainly used by men. Kobayashi (1999) collected the data of first and second person pronouns and other forms of address used in the workplace, and analysed them in terms of gender difference. The results reveal that there is still a significant gender difference in terms of using first and second person pronouns. However, females have more variation in other form of address and show more flexibility in using them.

## 3.4.3.6 Japanese as a hierarchy-conscious language

It has been pointed out that Japanese people are very conscious of social ranking, hierarchy and status (Niyekawa, 1991). As mentioned, the Japanese address system is based on the hierarchical relationship between the interlocutors. As Payne (2003) explains, hierarchy has a long history in Japan: it is associated with Confucius, whose ideas were introduced from China in the fifth century. Within Confucian thought, people are bound to submit to their elders and superiors. The following sections seek to explain the Japanese address system within common hierarchies in Japanese society, family, school and the workplace.

## 3.4.3.6.1 The family hierarchy

The hierarchy or ranking in Japanese society not only refers to social status or position within the professional/institutional context, but also includes the hierarchy in families and educational institutions. Two important factors decide one's position in the hierarchy: age, and time of entrance to the institution/group. As noted earlier, unlike English and European languages, the reciprocal exchange of address forms is limited in Japanese. Therefore, although the person with the upper status may use the name or second person pronouns with the person with the lower status, the person with the lower status is expected to avoid using any second person pronouns.

Hierarchy still exists in a context of contemporary Japanese family in address forms. In the family context, entrance to the group and seniority overlap, given that the birth of a person indicates his or her entrance to the family. People with lower status address those with higher status with kinship terms (Suzuki, 1998). People with higher status address those with lower status by their first names or second person pronouns. In the Japanese address system, it is essential to identify who is higher (older) or lower (younger) in the family. Although it is becoming more acceptable among the younger siblings to address elder siblings by their first names in recent times, traditionally only twins are expected to call each other by their first names (for the Japanese family register, the seniority of one twin is required to be identified). When translating English sentences such as 'I have two brothers', the translator may seek to determine who is older and who is younger, and choose the word ani (older brother) or otooto (younger brother), accordingly. If this is not possible, the translator may choose otooko (no) kyoodai, which means 'male sibling(s)'. This is because, in the Japanese language, there is no equivalent for the English term 'brother', which semantically does not indicate seniority.

#### 3.4.3.6.2 The school hierarchy

Japanese people start to learn acceptable behaviour within the institutional hierarchy, including language choice, at school. Students are expected to address their teachers as *sensei* or with the surname and *sensei*, to show deference, which is considered a form of negative politeness. Teachers address students with their surname and the suffix 'san' (female) or 'kun' (male), or use the second person pronouns *anata* or *kimi*. The address between teacher and student is generally non-reciprocal in other cultures as well (e.g. Clyne, 2009). However, in Japan, the non-reciprocal exchange between a teacher and a student is perpetual. Therefore, the student is expected to address the teacher as *sensei* for the rest of his or her life. The term *sensei* is a form of address that is also used for people in highly regarded occupations, such as MDs, lawyers and politicians.

At secondary school, Japanese students learn to choose language style based on *senpai* (senior) and *koohai* (junior) relationships. This *senpai* and *koohai* relationship is particularly strong in university male sports clubs (Aizawa, 2013). Within the hierarchy of the male sports club, the individuals in the lower position are expected to addresse the individuals in the higher position by their surname with the suffix '*senpai*' or '*san*' or just '*senpai*', while the individuals in the higher position are likely to address the others only by their surnames (sometimes with suffix '*kun*') suffix *ku* or nicknames. Although surname with suffix *san* would be reciprocally used within female *senpai kohai* relationship, second person pronouns can be used only from *senpai* to *koohai*, in any (males, females, mixed-gendered) *senpai koohai* relationship of both male and female. This non-reciprocal exchange also tends to continue throughout the course of their lives.

#### 3.4.3.6.3 The work (company) hierarchy

As mentioned earlier, Japanese people are less likely to consider themselves to be in an equal relationship unless they are the same age and enter forms of the institution or group at the same time. Thus, one must always have an awareness of whether a relationship is senior or junior. Within the institutional hierarchy of the Japanese workplace (company), an individual in a lower position would address an individual in a higher position by title or surname, with the title of position of responsibility, if he or she has one. A person without a position or title would be addressed with his or her surname and the suffix 'san' or 'kun'. The suffix 'kun' is more likely to be used to address male workers from the same status, or from someone (both male and female) in higher to lower status. In addition, there are some cases where a senior male workers addresses a junior female workers with 'kun'.

The concept of the relationship between *senpai* (senior) and *koohai* (junior) explained in the previous section can exist in people or groups in the workplace, and some use the term *senpai* or the surname with *senpai*. In addition, similar to the relationship between *senpai* and *koohai* in school or university, senior males may address junior males only by their surname in some cases. There is no equivalent of the English word 'colleague' in Japanese. In a Japanese setting, there are distinctions between *jooshi* (superior), *dooryoo* (equal) and *buka* (subordinate/junior). There is expected behaviour based on hierarchy, and people choose their language forms accordingly.

In addition, as mentioned earlier, the term *sensei* (meaning 'teacher') is an address form used for people in highly regarded occupations, such as teachers, MDs, lawyers and politicians (Koyama, 1992). Hence, people with this status are likely to be addressed by their occupational titles, irrespective of the social context. Since doctors and teachers are likely to address each other as *sensei*, the address system within the context of hospital and educational institutions does not apply completely to the company context. There has been no research examining address forms within the contemporary hospital hierarchy in Japan. Japanese medical TV dramas generally employ either a combination of surname with the word *sensei* or surname with job title.

This discussion has demonstrated the importance of hierarchy and social ranking in Japanese society, and how this is reflected in address forms in the Japanese language.

#### 3.4.3.7 Investigating issues of address forms in AVT

Earlier in this chapter, the use of address form as a face-saving strategy in discourse was discussed. In AVT, the choice of address form is an important tool for translation, because it is likely to have the effect of projecting the distance and power between the characters. However, it tends to be overlooked in the area of AVT (Hatim & Mason, 2000).

The problems that can arise in AVT when making choices about the use of address forms and second person pronouns in the target language, in the area of AVT, have been discussed (Ivarsson & Carroll, 1998; Miwa, 2000; Whitman-Linsen, 1992). For example, Whitman-Linsen (1992) points out the unnaturalness of dubbed text due to the inappropriate choice of second person pronouns. Miwa (2000) highlights the danger of replacing the source culture into target culture, in the translation of second person pronouns of English television drama into Japanese. These problems are considered to be associated with the following two main issues.

Firstly, as discussed in Chapter 2, AVT translators face dilemmas when making choices within the process of restricted translation. As a result, cultural references, including politeness, tend to be ignored (Hatim & Mason, 2000). Secondly, translators are forced to make crucial choices in the context of two different address systems (Ivarsson & Carroll, 1998).

As Miwa (2000) explains, this problem occurs because there are cases in which English 'you' can be translated as a less polite form in Japanese, in a context where a superior person addresses an inferior person. When the same pronoun is used from the inferior to the superior, it is likely to be translated as a polite address form. In both cases, the target text would seem complete as a natural piece of Japanese discourse; however, it may include nuances that do not exist in the source text. This is because the choice of the Japanese system of personal pronouns and forms of address is based on the hierarchical relationship, while this relationship would not be marked either way by the use of the English pronoun 'you'. There is a danger that the audience may lose the opportunity to see some aspects of the source culture, including semantics and human relationships (Miwa, 2000, 2005).

## 3.4.3.8 Research of address forms in the area of AVT

As discussed earlier, the choice of the address forms, including the second person pronouns, is an important pragmatic marker which may display distance and power between the characters of the film/dramas. Hence, issues of pertaining to address forms, including second person pronouns, in dubbed/subtitled version of English speaking dramas or films have recently received greater attention in AVT research (e.g. Arnaiz 2006; Meister 2016, Pavesi, 2012; Pavlovic 2004; Szarkowska, 2013)

Most studies in this area aim to investigate how address forms including second person pronouns, in the English source text are transferred into the target texts as well as the translator's intensions and motivation for the translation choices. For instance, Pavlovic (2004) conducted comparative analysis of how various forms of address in the English source version of *ER* (as important pragmatic marker in terms of 'power' and 'solidarity') were translated into the Croatian subtitled version. The study suggests that the translator is likely to make choices based on their decisions on pragmatic parameters of 'distance' and 'power'. The study of Pavlovic (2004) is particularly relevant to the present study since Pavlovic (2004) focuses 'power' and 'solidarity' in the use of address forms.

The studies in this area provide valuable outcomes and insights in this area; however, many of these studies are focused on translation of English texts into European languages that have two choices of address pronouns: a formal 'vous'-equivalent and an informal 'tu'-equivalent. For instance, the study of Pavesi (2012) explores the address shift (between formal *lei* and informal *to*) *in* the Italian dubbed version of 15 American and British films. The study suggests that the address strategies in translated texts may be motivated by attitudinal and diegetic changes expressed contextually and paralinguistically in the original English. Also, Meister (2016) has explored how the address forms in two American TV dramas and one British TV drama are translated into Swedish subtitles. The result of this study indicates that as a stylistic device, forms of address express sociolinguistic code and they are closely intertwined with both diegetic and extradiegetic functions of subtitling.

As discussed earlier, the systems of address including second person pronouns in Japanese are complex and there are numerous options for Japanese address forms. Smith (2005) investigate the gender issues translation of the three English Harlequin romance novels into Japanese. In terms of translation of first and second person pronouns, Smith discusses the association between gender power and gender roles with those pronouns. However, as far as the author is aware, there is no AVT research that has investigated how the address forms including second person pronouns, in the English audiovisual text have been transferred into Japanese dubbed or subtitled version. Hence, it is worthwhile investigating — as the present study does—how these translation choices as pragmatic markers the aspect of hierarchy/ power and gender images in the target text.

#### 3.5 'Footing' and 'Participation framework' as analytical tools

The notions of 'participation framework', along with 'footing', by Goffman (1981) have been widely utilised as tools to analyse discourse data in various contexts. Goffman (1981) introduced the notion of 'footings' as 'Participants alignment, or set or stance, or posture, or projected in someone at issue' (p. 128).

Goffman (1981) considered that the discourse is constructed not only by 'speaker and hearer' but may include the people overhearing the conversation. The difference in each participant's role is expressed in how the message is framed and how it is interpreted. Goffman (1981) devised a three-party distinction for production roles as follows:

Production roles (p. 226):

1. Animator: 'the sounding box';

2. Author: 'the agent who scripts the lines';

3. Principal: 'the party to whose position the words attest'.

Reception roles (pp. 132-133):

A: ratified

Addressed recipient: 'the one to whom the speaker addresses his visual attention and to whom, incidentally, he expects to turn over his speaking role';

Unaddressed recipient: the rest of the 'official hearers', who may or may not be listening.

B: Unratified

Overhears: 'inadvertent', 'non-official' listeners or bystanders;

Eavesdroppers: 'engineered', 'non-official' followers of talk.

Goffman's (1981) participation framework - including the notion of 'footing' - has been applied as a tool to analyse discourse in various contexts in the area of pragmatics and socio-linguistics (e.g. Eisenlauer, 2014; Larson, 2002; Leung & Gibbons, 2008; Lü, 2006). The framework does not limit the participant of the discourse to 'speaker' and 'hearer', but extends roles to the third party. Therefore, in combination with 'footing', it is considered appropriate to apply the framework to the present study.

#### 3.6 Focus of this study

This study seeks to investigate how the aspect of politeness and gender in a source text are portrayed in the target text. One of the focuses is how the address forms, including second person pronouns, work as effective pragmatic markers that show distance and power within the hierarchy of a hospital in the setting of *ER*. As mentioned earlier, although there is only one second person pronoun in English ('you'), there are numerous options in Japanese, including 'zero pronoun'. Making an appropriate choice within the restriction of AVT would therefore be a demanding task for translators. As Miwa (2000, 2005) points out, the choice of the translator is crucial because there is the possibility that this choice would work as an effective power

marker in the discourse. In addition, as mentioned above, Goffman's (1981) participation framework, with the notion of 'footing', will be utilised a for the analysis.

There are many studies that investigate the speech style shift between the polite *desu/masu* form and the plain form in the area of Japanese discourse and politeness (e.g. Bajrami, 2016; Ikuta, 2008). Most of these studies aim to investigate the shift between *desu/masu* form as discourse strategy or to uncover the psychological reasons behind the shifts. However, the purpose of the current study is different from these studies in that it seeks to investigate how the aspect of hierarchy, power and gender in the English original text are transferred in to the Japanese translated version. Hence, the main focus of the analysis in the current study are address forms including second person pronouns and GASFFs which are important pragmatic markers to display the aspects of hierarchy, power and gender.

## 3.7 Chapter summary

This chapter has provided the background knowledge and framework for address forms within the hierarchy of politeness in the hospital setting. It began with a discussion of ER, followed with the background and history of emergency medicine. The chapter discussed the hierarchy in the hospital setting, including the residency system and register nurses. The chapter then shifted its focus to communication issues from the cross-cultural pragmatic perspective, focusing on issues regarding address forms. The chapter concluded by providing reasoning to support the inclusion of the concept of footing and the participation framework by Goffman, as additional tools for analysis. Chapter 4 will discuss the issue of gender-associated language with reference to the characters in ER.

# CHAPTER 4: CHARACTERS AND IMAGES

The audience has learned who are the characters and the ways they make friends with each other. A friendship evolves out of understanding who the other person is over a period of time, not overnight. So the audience who watch *ER* learn about the characters the way they would make a friend, slowly and with a great deal of respect and admiration. (Steven Spielberg, cited in Pourroy, 1995, p. 21

#### 4.1 Introduction

Continuing on from Chapters 2 and 3, Chapter 4 aims to provide a general and theoretical background for the present study. The chapter focuses mainly on the issue of gender-associated language, which contributes to character image. It covers a number of areas. Section 4.2 provides a profile of the main characters of *ER*. In Section 4.3, the issues of character in TV dramas, including stereotypical gender images and character equivalence, are discussed. The chapter then shifts focus to consider the relationship between gender and language, in Section 4.4, and discusses how the aspect of gender will be investigated in the present study.

#### 4.2 Characters in *ER*

### 4.2.1 Characters in Season 1

As *ER* has been broadcast for 15 years, many characters appear in the series. The first episode of the first season of *ER*, which was broadcast in 1994, began with the main characters described below, based on Binns and Jones (1996).

As chief resident of the emergency room (ER), Mark Green is 'extremely well liked and easy to get along with' (p. 9). Douglas Ross is a paediatrician who is 'highly skilled and hardworking' (p. 16). Susan Lewis is a 'first-class resident' (p. 21). John Carter is a third-year medical student, and Peter Benton is a surgical resident. Carol Hathaway is the chief nurse and 'one of the finest, most dedicated members of staff at County' (p. 35).

#### 4.2.2 Character Profiles

The profiles of important characters in the episodes employed in this study are provided below.

Most of the characters in *ER* are addressed with surnames in this thesis. However, first names were used for some of the characters whose surnames do not appear in the series. First names

are also used in the cases where two characters who have the surname are present in the same scene.

# **Peter Benton**

Born:	1966
Portrayed	Eriq La Salle
by:	
Occupation:	Surgeon
Title:	Surgical Resident (1994–1998)
	ER Trauma Fellow (1999–2001)
	Attending physician (2000–2001)
Notes:	Benton is a talented surgeon who is passionate about medicine and
	displays a remarkable level of surgical skill. He is confident and arrogant.
	In Season 1–3, he is responsible for teaching medical students and interns,
	and has conflicts with John Carter, who is a medical student and an intern
	at this time. However, in Season 6 (February 2000), Benton saves Carter's
	life by sending him to a drug rehabilitation centre.

# **Mark Greene**

Born:	1964
Portrayed	Anthony Edwards
by:	
Occupation:	Physician
Title:	Chief Resident (1994–1995)
	Senior Attending Physician (1995–2002)
Notes:	Green is one of the main characters of the first eight seasons. A gifted and
	dedicated doctor, and a role model for young doctors and residents, he has
	professional conflicts with Dr Kerry Weaver. In 2000, Greene marries his
	colleague, Dr Elizabeth Corday. (He divorces his previous wife, Jennifer, in
	1995.) Green and Kerry's baby, Ella, is born shortly after their wedding.
	However, he passes away in 2002 (Season 8) as the result of a brain tumour.

# **John Carter**

Born:	1970
Portrayed	Noah Wyle
by:	
Occupation:	Physician
Title:	County General:
	Medical student (1994–1995)
	Surgical Sub-intern (1995–1996)
	Surgical Intern (1996–1997)
	Emergency Medicine Intern (1997–1998)
	Intern (1996–1998)
	Resident (1998–2001)
	Chief Resident (2001–2003)
	Attending Physician (2005)
	Other:
	Chairman of the Carter Family Foundation (2003)
Notes:	Called 'Carter' by his colleagues, he is from the millionaire Carter family and
	the chairman of the Carter Family Foundation. Carter is a compassionate
	and dedicated physician. His first appearance is in Series 1 as a medical
	student. Later, he is promoted into intern, Resident, Chief Resident, and
	Attending Physician. The character of Carter is believed to have been
	modelled on the author of ER, Michael Crichton, who wrote the story when
	he was a student at Harvard Medical School. One of the focuses of the story
	is the process of a young doctor developing confidence and experience at
	County General.

# **Susan Lewis**

Born:	1965
Portrayed	Sherry Stringfield
by:	
Occupation:	Physician
Title:	Resident (1994–1996)
	Attending Physician /Deputy Chief (2001–2009)
Notes:	Lewis is a very capable doctor. However, she has difficulty asserting herself.
	Her sister, Chloe, has problems, including with drugs and alcohol, even after
	giving birth to her daughter, and she relies on Lewis. As a result, Lewis feels
	stressed. She leaves County in 1996 but returns as an attending physician.
	Susan has dated a psychiatrist, Div Cvetic, and a resident, John Carter. At
	one stage, Mark Greene has a crush on her but does not divulge his feelings
	for her.

# Douglas (Doug) Ross

Born:	1962
Portrayed	George Clooney
by:	
Occupation:	Physician
Title:	Paediatrics Fellow (1994–1998)
	Paediatrics Attending Physician (1998–1999)
Notes:	Ross is a dedicated ER paediatrician, prioritising children's welfare
	regardless of the consequences. Although he is a Fellow and later a
	paediatric attending physician, Ross spends most of his time in the ER. He
	has relationships with many women. Although it is on-again, off-again, his
	relationship with Carol Hathaway is very special. They have twins and, later,
	marry. In 1999, Ross leaves County General Hospital for Seattle, facing
	criminal charges after being suspended from work for violating hospital
	policy.

# **Carol Hathaway**

Born:	1967
Portrayed	Juliana Margulies
by:	
Occupation:	Registered Nurse
Title:	Nurse Manager (1994–2000)
Notes:	Hathaway is a responsible and capable nurse manager, trusted by all the
	staff. In Season 3, she intends to become a medical doctor and passes the
	Medical College Admission Test (MCAT). However, she later chooses to
	remain a nurse. She has a relationship with Doug Ross and gives birth to
	twin babies with him. Hathaway leaves County General to join Ross in
	Seattle in 2000 (Season 6).

# **Angela Hicks**

Portrayed	CCH Pounder
by:	
Occupation:	Surgeon
Title:	Senior Surgical Attending Physician (1994–1997)
Notes:	Hicks is one of the most capable and talented surgeons of County General.
	She is responsible for training residents and medical students, and
	influences Peter Benton and John Carter, whose skills she regards highly.
	Hicks mediates between Benton and Carter on several occasions when they
	argue.

# **Kerry Weaver**

Born:	1963
Portrayed	Laura Innes
by:	
Occupation:	Physician
Title:	Chief Resident (1994–1995)
	Attending Physician (1995–1996)

	Acting Chief of Emergency Medicine (1997–1999)
	Chief of Emergency Medicine (1999–2003)
	Chief of Staff (2003–2009)
Notes:	Weaver is a confident, ambitious and accomplished physician, who is
	dedicated to administrative policies. She is a responsible leader but is not
	always trusted by the staff because of her abrasiveness and coldness. The
	character of Weaver is contrasted with Mark Greene during the series.
	Although both are in administrative positions, Green is a warm, considerate
	figure trusted by everyone, while Weaver is not as popular because of her
	coldness and ambition.

# **Robert Romano**

Born:	1963
Portrayed by	Paul McCrane
Occupation:	Surgeon
Title:	Surgical Attending (1997–1999)
	Chief of Staff & Chief of Surgery (1999–2003)
	Chief of Emergency Medicine (2003)
Notes:	Robert (Rocket) Romano is a gifted and very high profile surgeon in County
	General Hospital. However, he is an arrogant and insensitive man who often
	insults other staff by making discriminative comments. He does not have
	any hesitation to use his power to harass other staff. In Season 5, ER
	resident Maggie Doyle accuses Romano of sexual harassment. In Season 9,
	Romano loses his left arm by a helicopter tail while he is treating an
	emergency patient. He is not capable of conducting surgery anymore, and
	he loses his position as a Chief of Staff. In Season 10, he is killed in an
	accident caused by an explosion in the ambulance bay after a helicopter
	crashes to the ground.

#### Luka Kovac

Portrayed	Goran Visnjic
by:	
Occupation:	Physician
Title:	Temporary doctor (1999)
	Attending Physician (1999–2007)
	Chief of Emergency Medicine (2005–2007)
	Hospice Physician (2007–2008)
Notes:	Kovac was born in Croatia. He lost his wife and two infants during the
	Croatian War of Independence and moved to Chicago. However, post-
	traumatic stress disorder (PTSD) emerges. He has a strong sense of morality
	as a doctor. He has relationships with some of the ER medical staff. He
	marries Abby Lockhart. She is an ER nurse in early seasons and becomes a
	doctor in a later season, and has a son with Kovac.

# **Lucy Knight**

Portrayed	Kellie Martin
by:	
Occupation:	Medical student (1998–2000)
Notes:	Knight joins County General as a gifted and knowledgeable third-year
	medical student. She is assigned to John Carter during her ER rotation.
	However, she has a conflict with Carol Hathaway, who is the ER chief nurse.
	Knight is stabbed by a psychiatric patient and, despite every effort by the
	ER medical staff, she passes away.

(Sources: Binns & Jones, 1996; Jones, 2003; IMDb, 1990-2016)

# 4.3 Stereotypes and Character Image in TV Dramas

# 4.3.1 Stereotype and Gender

Bednarek (2010) indicates that characters in long-running TV dramas are important because they keep viewers emotionally engaged with what is portrayed on the screen. The character images of TV dramas are likely to contribute to the stereotypes of gender image. Gender

stereotypes in the media contribute to gender bias in society (Kamise, 2006). As mentioned in Chapter 1, since the purpose of the present study is to analyse the language of TV drama, examining the association between the gender image of each character and their language is essential in this research.

Garcia-Munoz and Fedele (2012) state: 'Television exercises an undeniable power in the transmission of representations and stereotypes' (p. 83). According to the literature, the characters of English-language primetime TV are likely to be portrayed according to traditional gender stereotypes. Table 4.1 presents gender images generally portrayed in English-language primetime TV dramas.

Table 4-1 Gender image portrayed in English-language television dramas

Female characters	Male characters
Less-powerful; emotional; nurturers; tend to	Powerful; assertive; aggressive;
represent more victims of episodes of	experiencing anger; problem-solving agents
violence than men; submissive position	

(Sources: Based on Glascock, 2001; Plant, Hyde, Keltner & Devine 2000; Thompson & Zerbinos, 1995.)

#### 4.3.2. Character Image of the Medical Profession in Television Drama

The literature indicates that the character images portrayed in medical TV dramas have shifted recently. The image of the medical doctor/physician as the 'star/hero' in US medical TV shows of the 1950s, 1960s and 1970s has changed (Jiwa, 2012; Jones, 2003) in recent times. According to Strauman and Goodier (2011): 'Although it is important to note how television portrays of physicians have been largely traditional representations, contemporary television physicians show greater depth and diversity of characters' (p. 32).

A shift has also been observed in the nurse character. In the past, the nurse characters of TV dramas were not very strong. Instead, they were 'angels of mercy' or 'mere handmaidens' (Spear, 2010, p. 319). This may be a reflection of the real-world hierarchy of and power between the doctor and the nurse, which was discussed in Chapter 3 (doctor and nurse game). However, since there are now more female doctors and male nurses in the real world, professional roles and gender roles are no longer align to the degree that they once did. The images of nurse characters in TV dramas have also shifted. Spear (2010) states that US TV channels, TNT, CBS,

and HBO networks, have recently launched new TV dramas such as *Nurse Jackie*, *HawthoRNe* and *Mercy*, with strong nurse characters in leading roles.

## 4.3.3 Japanese gender roles and stereotypical images

Historically, in Japan, there have been great expectations for females in terms of manners and social attitudes. As Okamoto (2010) points out, while there are many books and courses teaching appropriate female talk, similar resources devoted to male language are not common. According to Nakamura (2012), books on manners for Japanese females already existed in the *Kamakura* era (12<sup>th</sup> to 14<sup>th</sup> Century).

Traditional gender roles and expectations remain strong in Japan. This is demonstrated by the following facts and statistics. The Gender Empowerment Measurement (GEM) used by the United Nations Development Programme Human Development Report (2009) places Japan at number 57 in the world rankings, while the US is at 17. Furthermore, the Global Gender Gap index used by the World Economic Forum (2016) ranks Japan at number 111 and the US at 45th. This includes 'Economic participation and opportunity', for which Japan ranks 118 and the United States 26. These figures show the difference in gender gap in terms of empowerment in the society, between Japan and the United States. It can also be interpreted that traditional social roles in Japanese society (men work outside the home while women stay home to do housework) still largely remain in Japan. In fact, although growing numbers of women are staying in the workforce after marriage, polls conducted by the Cabinet Office, Government of Japan (2016), show that 40.6% of people accept the norm of traditional gender roles, 'Husband should work outside while the wife should work domestically' (translated by present author), while 54.3% people do not accept it. In addition, this survey also shows that 74.2% of people think that men have more advantage than women in terms of overall gender equality in Japanese society.

These traditional gender roles have contributed to maintaining stereotypical images of each gender in modern Japanese society (Dohi, 2006). In addition, the study of Morinaga (2006) reveals that Japanese parents have different expectations for children of different genders; this is also reflected by the stereotypical gender images. For instance, Japanese parents are likely to expect sons (more than daughters) to have more 'responsibility' while expecting their daughters (more than sons) to show greater 'consideration toward others'.

## 4.3.4 Petrucchi (2012) and 'Character equivalence'

As explained earlier, this study aims to investigate how the aspects of politeness and gender in the original English version of *ER* are projected in Japanese subtitled and dubbed versions. One of the aims is to examine how the characters from the source text are projected in the target text. Petrucchi (2012) states: 'Character equivalence, the extent to which translated dialogue distorts identities in the original film, may pose a special challenge for the screen translator' (p. 231). Petrrucchi (2012) conducted a comparative text analysis of the original English version of the American film, *Talk to me*, which has two different English speech styles, African American English and Standard American English, with the Brazilian Portuguese subtitled and dubbed versions. The analysis shows the difficulties and importance of rendering both linguistic and pragmatic aspects of the source text into the target text. Petrucchi (2012) concludes that the translation plays significant role in transferring character equivalence of the source text into the target version.

As mentioned previously, audiovisual translation (AVT) is expected to support the type of character that the audience perceives by viewing the screen while accessing the target language. Success in character equivalence is a demanding task for translators within the restrictions of AVT, including numbers of written characters for subtitling and lip-movement (for dubbing). As part of the present cross-cultural/intercultural and linguistic study, the findings of a survey and interview regarding viewers' impressions of characters in one episode of *ER* are reported, to compare the audiences' impressions of the original version and the Japanese dubbed version.

## 4.4 Issues of Gender and Language

# 4.4.1 History of Gender and Language

Against the backdrop of the feminism movement in the US, Robin Lakoff was the first linguist to discuss the issue of gender in language. Lakoff (1973) identifies characteristics of female language as follows:

- 1 precise colour terms
- 2 meaningless adjectives
- 3 tag questions
- 4 intensifiers

- 5 lexical hedges or fillers
- 6 rising intonation on declaratives
- 7 hyper-correct grammar
- 8 super-polite forms
- 9 avoidance of swear words
- 10 emphatic stress

Lakoff argues that the use of female-characterised language reinforces women's role in society. Her argument was based on the perception that women have less power in society and use language with less persuasion and less confidence than men. Since stereotypical images of gender are apparent in Lakoff's theory, the theory was not supported by feminist groups (Nakamura, 2004).

Later studies of language and gender can be categorised into those that adopt a 'dominance theory' perspective and those that take a 'difference theory' approach. Spender's (1980) dominance theory is based on the view that women are at a disadvantage in communicating with men in their female speech style, since the language itself was initially created for men when men were at the centre of society (for instance, the word 'men' standing for human beings). Therefore, men tend to have more power and to dominate the conversation. Like Lakoff (1973), dominance theory perceives gender and language issues from the same angle: that is, that female language use contributes to women's subordinate role in society. An examination of the usage of linguistic features was the main focus of language and gender studies in the 1970s.

In contrast, Tannen's (1990, 1994) 'difference theory' is based on the premise of gender equality. She perceives the difference in gender communicative styles as a cultural difference. For instance, while men are likely to focus on conveying information in communication, women value empathy and rapport. Tannen insists on the importance of cross-cultural understanding between men and women to avoid misunderstandings.

Later studies of language and gender are based on the view that language is a social phenomenon. These studies are more focused on analysing linguistic behavior, such as Tannen (1990, 1994) and Holmes (2001), than on an empirical approach that examines the linguistic

features used by men or women or both. In addition, in recent years, the notion of 'gender' has been re-examined. Research based on stereotypical, binary heterosexual gender forms has been questioned (Reynolds, 2004).

## 4.4.2 Gender and Language in Japan

## 4.4.2.1 Female -associated Language in Japanese

In Japan, Jugaku was a pioneer of the studies of women and language. In her (1979) publication, *Nihongo to onna* (*The Japanese language and women*), Jugaku begins by querying the definition of 'female-like' (a stereotypical image of Japanese women). She then investigates the correlation between female-like (female-specific) language and the various problems and issues faced by Japanese women because of gender discrimination in their society. She indicates that female-like language is itself likely to influence a woman's life. For instance, female language features are based on the expectations of Japanese women and include manners and attitudes. As expectations of women in this respect are higher than those of men, women need to make more effort than men to meet social expectations in Japan. Jugaku (1979) laid the foundation for further research in this area.

A recent phenomenon, observed in studies since the late 1990s, is that language used by the younger generation in Japan is becoming less marked in terms of gender (Mizumoto, 2005; Ogawa, 1997; Ozaki, 1999, 2001, 2004). This phenomenon is evident by the decreasing number of both males and females using gender-associated sentence final particles (SFPs) in Japan. For instance, Mizumoto (2005) analysed 30 minutes of naturally occurring casual spoken discourse between individuals who have a close relationship with each other. The participants were 30 female Japanese speakers in their 30s, 40s and 50s (10 participants in each group) living in the Tokyo metropolitan area. The study shows that, although gender-associated SFP no and combination of no+ne are used by the speakers in all the different generations, the younger generation's use of other female-associated SFP is less frequent than that of the older generation. In addition, the studies of Kawasaki and McDougall (2003) and Mizumoto (2015) reveal that the gender-associated SFP used in the Japanese textbooks does not reflect the language used in current Japanese society.

#### 4.4.2.2. Male-associated-language in Japanese

Less attention has been paid to the investigation of language behaviour of Japanese men in comparison to that of Japanese women. However, there is some interesting research that focuses on male-associated language in Japanese that is relevant to the present study.

SturtzSreetharan (2004a, 2004b, 2006a, 2006b) conducted a series of studies of Japanese men speaking in the Kansai (a Western region of Japan) dialect. Her studies are based on the view of Matsumoto (2002), investigating gender forms as types of linguistic strategy. For instance, SturtzSreetharan (2006a) analysed the use of clause-final forms in five Japanese male conversations involving 16 men (aged 16-68) living in Kansai. The data was divided into three groups according to the men's age group, and was analysed both quantitatively and qualitatively. The data analysis showed that, while white-collar office workers used the polite forms frequently, students did not use these forms. In addition, SturtzSreetharan (2006b) investigated the use of terms of address and SFPs by Japanese men. The naturally occurring conversation data was taken from two groups, of three male Japanese native speakers each, living in the Osaka and Hyogo prefectures (The Hanshinkan dialect is spoken in these prefectures.) SturtzSreetharan categorised some of the stereotypically masculine SFPs into 'strongly masculine' and 'moderately masculine'. She also placed some of the SFPs of standard Japanese into the same two categories. She then investigated the distribution of the two categories in both standard Japanese (SJ) and Hanshinkan dialect (HKD). She found that, across the conversations, the use of 'strongly masculine' and 'moderately masculine' SFPs in both SJ and HKD was low.

SturtzSreetharan (2009) also investigated the use of male-associated first and second person pronouns of Japanese male company workers (aged 19 to 68) born and brought up in the *Kansai* region, where the Hanshinkan Dialect is spoken. Findings from both quantitative and qualitative data in this study suggest that these Japanese company workers tended to avoid using any pronouns (not only male-associated personal pronouns). The same workers were likely to use personal pronouns to achieve specific goals in conversation.

In addition, Saito (2013) has investigated the language behaviour of Japanese male superiors when talking to male subordinates in the workplace. The analysis focused on the use of two particular forms, 'Vroot + (y)oo' (Let's do X/We shall do X), which relates to normative male language, and 'Vroot + ro/e' (Do X!), which is a stereotypical male-associated form. The study reveals that the use of these two forms in the professional context contributes to the 'facework' of male superiors.

Although the research is limited in the area of male-associated language in Japanese, the findings of the above studies imply that Japanese men do not show strong masculinity in linguistic practice. However, Japanese men are likely to use male-associated forms to achieve a communicative goal.

# 4.4.2.3 Choice and Image, and Impression Management

The theory of sociologist Erving Goffman (1922-1982) focusing on social interaction has had a profound influence in the area of sociology as well as in linguistics. In 'The presentation of Self in Everyday Life' (1959), Goffman develops a dramaturgical approach. Goffman (1959) considers human life as a stage, therefore people are like actors as well as audiences. They play different roles in the society depending on the social settings. There is a 'the front of the stage' and 'back of the stage' in their lives. In the front stage, people use communication deliberately and strategically to create particular impressions of themselves, a phenomenon he refers to as 'impression management' (Goffman, 1959, p. 4). Based on the original notion of Goffman (1959), Ellis (2008, pp. 965-966) defines impression management as 'the way speakers make use of their linguistic resources in interaction to create social meanings favourable to themselves'. Impression management is an approach widely discussed in the area of sociology and social psychology. In sociolinguistics, impression management has been examined as an approach to achieve communicative goals. The concept of impression management has been used in the analysis of interactions in a variety of contexts, including job interviews (Lipovsky, 2006, 2008); media talk (Lorenzo-Dus, 2005) and courtroom communication (Hobbs, 2003).

As discussed above, the concept of 'impression management' has been examined as an approach to achieving communicative goals in sociolinguistics. Although the term 'impression management' has not been mentioned, some studies investigate how gender-associated language in Japanese has effects in creating an impression of the speaker, and these studies are relevant to the concept of 'impression management'.

For instance, a study of Takasaki (1996) examined the use of gender-associated language in Japanese TV programs. The results of this study imply that both male and female actors in Japan have started to choose gender-associated language depending on the role being played in TV program.

Endo (1997) investigated the language used by characters in the Japanese TV drama, *Reiko no haishasan (Reiko's dental office)*. In particular, she focused on the language of the leading

character (a 45-year-old female dentist, Reiko). According to Endo (1997), Reiko was reviewed as a 'male-like character with rough language use' by an Asahi newspaper. Endo analysed the language used in the drama, and found that Reiko used male-associated language but also female-associated and gender-neutral language. Her language choices exhibited a wide range of variation depending on the context and her interlocutor. Endo (1997) views this drama as an ideal example of a Japanese society in which both males and females are able to make language choices depending on their context, interlocutor and content, rather than according to social rules.

Other cases use female forms as a strategy to project specific images. For instance, Matsumoto (2007) analysed 120 minutes of natural casual discourse between four Japanese women. The women were aged in their late thirties and early forties, and lived in a middle-class suburb in Tokyo. Their children went to the same junior high school. She compared the speech styles, including the gender-associated SFPs, of each speaker. Her analysis shows that one speaker used two different styles (with or without female SFPs), depending on her context, and used SFPs as a communicative strategy. The other speaker consistently used the same style (with or without female SFFs). Matsumoto (2007) concludes that the language used by speakers in this study successfully reflects each person's persona, including the self-image they want to present to others.

As mentioned earlier, the concept of impression management is not addressed in the studies above; however, they indicate that the use of female SFPs has contributed to the character image and the impression of each person.

#### 4.4.2.3 Language and Filter

In recent times, Japanese scholars have developed a view that linguistic text can be influenced by a stereotypical image of gender if it is reproduced via certain devices or views and, therefore, it may be different from the language currently used in Japanese society. Some Japanese academics use the term 'filter' to describe these devices/views, which behave like the filter on a camera lens, providing extra effects.

The first filter is the gender filter of scriptwriters, as described by Mizumoto (2005, 2006) and Mizumoto, Fukumori and Takada (2008). According to Mizumoto, Fukumori and Takada (2008), on the basis of a questionnaire completed by 80 scriptwriters of Japanese TV dramas, many of the scriptwriters had 'feminine', 'refined' and 'polite' images of female SFPs. These

perceptions may contribute to the stereotypical female character images in the TV dramas written by these scriptwriters.

In terms of the language used in TV dramas, Mizumoto (2006) compares the use of female SFPs in authentic discourse by women in their twenties, thirties and forties with those used in Japanese TV dramas. The study reveals that few women use these gender-associated SFPs in real situations; however, they are used 10 times more frequently in TV dramas. The study highlights the effect of a 'gender filter' (people's expectation of the use of SFPs by women, i.e. 'preferred language') on scriptwriters, and their tendency to ignore the contemporary trend towards neutralisation in the Japanese language, by continuing to use gender associated forms. In a similar vein, Sakurai (2001) states that the language of female characters in Japanese TV games, which are mostly written by men, tends to reflect the stereotypical image of women, which is in general preferred by men.

In contrast, Yabe (2001) uses the term 'filter' with reference to the translation process. Yabe (2001) investigated the interview discourse of foreign athletes translated into Japanese. She found that in comparison to the discourse of Japanese athletes interviewed in Japanese, the translated discourse included more gender associated SFPs with plain forms. In original Japanese discourse (of Japanese athletes), polite forms are used more often, with few gender-associated SFPs. Yabe (2001) argues that because of the way translation operates as a filter, the stereotypical images of each gender became apparent in the translated interviews.

In addition to the metaphorical filters for Japanese female language discussed above, Nakamura (2007) uses the term 'linguistic resource'. Nakamura explains that each of us chooses words from our linguistic resources, but these resources do not always present our true identity. To illustrate this point, one could consider the example of staff in a Japanese fast-food shop who always use polite language to speak to their customers, in line with their customer-service manual. However, this does not mean that the staff are all polite people; they are simply operating in a professional context. Nakamura (2007) argues that translators choose words from their linguistic resources and, although Japanese female language has been disappearing from society, it is likely to be recycled in translation and in the language of TV dramas.

#### 4.4.3 Gender Markers

#### 4.4.3.1 Focus in this Study

In her (1994) book, *Jimaku no naka ni jinsee* (*The life in subtitles*), the pioneer Japanese film subtitle translator Natsuko Toda explains that, in Japanese subtitle translation, a distinction is made between female language and male language that does not exist in English (p. 167). As noted in Chapter 1, before starting the present research, as an audience of *ER*, the researcher noticed the effect of Japanese gender-associated forms on character images.

Ogawa (2004, 2006) compared the features used to identify gender difference in Japanese language in literature and dictionaries with the results of a survey conducted with native speakers of Japanese. She asked questions of 454 Japanese university students regarding gender differences in Japanese language use. The findings suggest that the choice of SFPs and address forms are the two most important factors for identifying gender differences in Japanese language; and this finding is consistent with the literature and dictionaries. Yamaguchi (2007) states that the use of SFPs and personal pronouns plays an important role in character image in fictional stories. Hence, in the present study, gender issues associated with SFPs (forms) and address forms will be a focus of investigation.

#### 4.4.3.2 Sentence Final Particles and Sentence Final Forms

Takahashi et al. (2005) points out that Japanese sentence final particles (SFP) have the function to recognise and to fill an information gap between the speaker and the hearer. For instance, according to Takahashi et al. (2005), the SFP *yo* is used when the speaker has information that the hearer does not have, which information the speaker considers necessary for the hearer to comprehend the meaning. On the other hand, SFP *ne* is used when the hearer has better recognition of the information and the speaker wants to raise recognition of the information by confirming it with the hearer.

There is a view that Japanese female-associated language is a reflection of the expected image of the female gender. Many gender studies (e.g. Ide, 1979; Kawasaki & Mcdougall, 2003; Matsumoto 2007; Mizumoto 2006; McGloin, 1990; Ogawa 2004; Okamoto & Sato, 1992) have dealt with sentence final particles or forms as some of these reflect the gender of the speaker.

Female-associated SFPs can be used with both polite forms and plain forms of the verb. (Plain forms, without auxiliaries, are likely to be used for casual conversation, while polite forms are

used in formal contexts.) However, male-associated SFPs are more often used with the plain form of the verb. Therefore, they tend to be used in casual conversation or interactions between speakers in close relationships. For example:

#### Female-associated form wa

Rainen amerika ni iku wa. [I will go America next year.]

(Iku is the plain form of the verb to 'to go')

Rainen amerika ni ikimasu wa. [I will go to America next year.]

(Ikimasu is the polite form of the verb 'to go')

#### Male-associated form zo

rainen amerika ni iku zo.[I will go to America next year.]

Many of the studies in this area employ the term 'sentence final particles' (SFP) for gender-associated forms. However, some of the forms are used as a combination of particles (e.g. *wa yo*). In addition, *kashira* is grammatically not categorized as a SFP. Therefore, the present study employs the term 'sentence final form' (SFF), in line with the practice of authors such as Terao and Zimmerman (2000).

#### 4.4.3.3 Categorisation of Gender-associated Sentence final Forms

The Japanese grammatical system does not categorise Japanese gender forms. Therefore, different researchers employ different categorisations. For instance, Okamoto and Sato (1992) categorise SFFs as: 'strongly feminine', 'moderately feminine', 'neutral', 'moderately masculine', and 'strongly masculine'. Chinami (2003) categorises SFFs as 'female language', 'female neutral', 'neutral', 'male neutral', and 'male language'.

In the present study, Japanese gender-associated language has been categorised according to a system that is slightly modified from that of Kawasaki and McDougall (2003, p. 44), to incorporate the information from Takahashi et al. (2005), as follows:

Gender-neutral (i.e. not associated with either male or female speech):

ne

```
yo
yone
plain predicate without SPF
Male-associated (i.e., associated with male speech):
zo
ze
sa
na
wa with falling intonation
plain imperative form of verb alone or followed by yo
Female-associated (i.e. associated with female speech)
deletion of plain form copula da
wa (to be used independently or with ne and/or yo in rising intonation)
no with ne and/or yo after a noun, pronoun or a na adjective
yo used after noun or na adjective, noun or pronoun
kashira
```

## 4.4.3.4 Gender-Associated Form as a Pragmatic Marker

Although there is no grammatical equivalent of GASFF in English, in the present study the use of Japanese GASFFs is examined because they are important pragmatic markers. On one hand, male-associated SFFs are likely to contribute to the forcefulness or assertiveness of the utterance. On the other hand, female-associated SFFs tend to have a softening effect that establishes rapport between the interlocutors. Hence, the use of these female-associated SFFs is interpreted as a positive politeness strategy (McGloin, 1990) on the basis of Brown and

Levinson (1978, 1987). However, Ide (1990) views this as 'two sides of the same coin' (p. 76), because, while the use of female-associated SFFs/particles can be interpreted as positive politeness, it can also be interpreted as negative politeness, because the softening of statements reduces imposition. The present study will employ McGloin's (1990) view, interpreting the use of female-associated SFFs/particles as a positive politeness strategy.

## 4.4.3.5 Gender Differences in Address Forms

As mentioned in Chapter 3, the literature shows the significant gender difference in terms of choosing second person pronouns in Japanese. (Masuoka & Takubo, 1992; Kanamori 1997; Kobayashi, 1999). For example, the study of Kobayashi (1999) reveal that a significant gender difference remains in the use of first and second person pronouns. However, females demonstrate more variation in their forms of address and greater flexibility in using them.

As stated earlier, Ogawa (2006, 2008) shows that sentence final particles/forms and address forms are the two main factors used to identify gender differences in Japanese. Therefore, address form including the second person pronouns as a gender marker will also be investigated in the present study.

# 4.4.4 Character image and 'role language'

As mentioned in the previous section, previous studies reveal a trend towards neutralisation of Japanese gender-associated language. As a result, members of younger generations are using fewer gender-associated sentence final forms (GASFFs) than do members of older generations. However, it has been highlighted that GASFFs tend to be used more in the virtual world, including in TV dramas, than in the real world (Chinami, 2003; Mizumoto, 2006). Therefore, it is understandable that Japanese GASFFs have been used as a device to support character image in the Japanese virtual world. Hence, it is possible that GASFFs used in the Japanese dubbed and subtitled versions of *ER* contribute to portraying the character images. The results of a survey of 80 Japanese TV drama scriptwriters (Mizumoto, Fukumori & Takada, 2008) reveal that, for scriptwriters, drama is a virtual world and they use female forms to mark particular characters as stereotypically polite and gentle Japanese women. This strategy may also be used by translators of TV dramas, including *ER*. Furthermore, the translators of *ER* may use female forms as a tool to distinguish some of the female characters; and this will be investigated in the present study.

Kinsui (2003) defines the term 'role language' (*yakuwarigo*) in Japanese as 'the particular language use with which people can associate an image of a particular character, or vice versa' (present author translation, p. 205). According to Kinsui (2003, 2007), native Japanese speakers are naturally equipped with the skill to connect 'role language' with a particular character image, as most of the language or speech styles associated with 'role language' are different from the standard Japanese. These points of differentiation include personal pronouns and SFFs that are not used in modern Japanese society. Kinsui (2007) explains, for Japanese people, the SFF *ja* conjures up an image of the speaker as an elderly male scholar. Similarly, the use of the singular first person pronoun *atakushi* suggests that the speaker is a sophisticated and stylish lady. As mentioned earlier, it is possible that the use of GASFFs contributes to the gender image of *ER* characters, and that some of the GASFFs and personal pronouns are categorised as 'role language' in Kinsui (2014).

The present study adopts the categorisation of 'role language' in Kinsui (2014). In addition, the present study has broader view of 'role language', as some of the language elements and forms not categorised in Kinsui (2014) may also have the effect of 'role language' in discourse (e.g. Ota 2011). Those languages/forms are thus categorised as 'role language effect' in the present study.

## 4.5 Focus of this Study

As stated previously, one of the aims of this study is to investigate how the characters in the original English-language version of *ER* have been portrayed in the subtitled and dubbed versions. Hence, the issue of character equivalence (Petrucchi, 2012) is important. In the first phase of the study, gender and language markers will be investigated at the discourse level. The study will also examine how gender markers, including 'role language' (Kinsui, 2003), are effectively used in Japanese to identify characters. In the second phase of the study, the audience's impressions of the characters in the original version and the Japanese dubbed version will be compared.

Although female-associated SFPs/forms are now disappearing from Japanese society, many of what Nakamura (2007) terms 'linguistic resources' are being recycled in the virtual world, including in TV dramas and films, through the filters of gender and/or translation. Hence, the present study will investigate whether gender-associated language has been recycled in *ER*. As discussed earlier, given the restrictions of subtitling and dubbing, it is likely to be a demanding task for an AVT translator to transfer the character image of the source text to the target text.

# **4.6 Chapter Summary**

The discussion in this chapter has provided a backdrop to the issue of gender and language associated with the investigation of character image in *ER* to be presented in the forthcoming chapters. It began with a profile of the main characters in *ER*, followed by an overview of research that has examined the issue of character image in TV dramas, including the concept of 'character equivalence'. The chapter then shifted focus to the issues of language and gender, including Japanese gender markers such as GASFFs and address forms; and concluded by explaining how the issue of gender will be examined in the first and second phases of the present study. Chapter 5 will discuss the methodological issues of the present study.

## **CHAPTER 5: METHODOLOGY**

#### 5.1 Introduction

This chapter discusses the methodology employed in this study. As explained in Chapter 1, this study is a cross-cultural linguistic investigation, in terms of gender and politeness, of the original English, the dubbed Japanese, and the Japanese subtitled versions of the American TV drama *ER*. There are four research questions:

- 1. How are the pragmatic dimensions of communication presented in the English source text realised in the Japanese translated text?
- 2. How do the source text and translated text compare from the perspective of gender-related language choices?
- 3. To what extent can individual viewers' impressions of characters be traced to the translation choices reflected in the target text?
- 4. From an intercultural perspective, what issues arise as a result of the translation choices reflected in the dubbed and subtitled texts?

Section 5.2 provides an outline of the two phases of this mixed-methods research. Section 5.3 provides a detailed description of the first phase of the study, which is followed by a description of the second phase in Section 5.4.

#### 5.2 Mixed-methods research

The notion of mixed-methods research, which is the integration of quantitative and qualitative approaches, has been paid increasing in social and behavioural research recently. Although it is a relatively new approach in applied linguistics, the potential and benefits of the approach in this area have been discussed in the literature (e.g. Hashemi & Babaii, 2013; Ivankova & Creswell, 2009).

There are a number of different definitions of mixed-methods research. Johnson, Onwergbuzie and Turner (2007) analysed 19 different definitions by methodologists, and offer a broad definition:

Mixed methods research is the type of research in which a researcher or team of researchers combines elements of qualitative and quantitative research approaches (e.g. use of qualitative

and quantitative viewpoints, data collection, analysis, inference techniques) for the broad purposes and depth of understanding and corroboration' (p. 123).

According to Dörnyei (2007): 'A mixed methods study involves the collection or analysis of both quantitative and qualitative data in a single study with some attempts to integrate the two approaches at one or more stages of the research process' (p. 163).

The present thesis uses two different approaches to examine the impact of AV translators' choices on the pragmatic dimensions of the translated Japanese versions for the TV series ER. Two phases of data collection were designed. The first phase, text analysis, compared aspects of pragmatics and gender-associated language in the original English episodes and the Japanese dubbed and subtitled episodes, using DVDs as data. As previously mentioned, the second phase consisted of a survey conducted in order to investigate the projected character image of each character in one episode of ER ('The Gift'), together with a follow-up interview with participants. As the present study consisted of two phases, and involved the collection and analysis of both qualitative and quantitative data, it can be categorised as mixed-methods research on the basis of the definitions above.

The benefits of the mixed methods approach have also been discussed in the literature (e.g. Greene, Caracelli, & Graham 1989; Hashemi 2012; Ivankova & Creswell, 2009; Tashakkori & Teddle, 1998). For instance, Ivankova and Creswell (2009) state: 'Mixed methods research, with its focus on the meaningful integration of both quantitative and qualitative data, can provide a depth and breadth that a single approach may lack by itself' (p. 136).

The main reason for using a mixed-methods approach here was to mitigate the subjectivity that may have arisen if the study relied solely on the results of a text analysis by one researcher. By including the views of several participants, a stronger result would be achieved. Furthermore, it was anticipated that the results of the second phase may form a more solid basis for the study, complementing the text analysis in the first phase and subsequently developing an in-depth discussion and argument; and for this reason, it was decided to examine the same data from two different perspectives.

In designing the present study, the researcher was aware that undertaking a text analysis would necessarily involve decisions about which scenes and segments to analyse, which linguistic/pragmatic elements to concentrate on, and the potential impact on an audience of the translation choices identified. The influence of the researcher's perspective here was inevitable;

therefore, for the second phase, a complementary approach to the research problem was sought that would bring to bear a different set of perspectives.

# 5.3 First phase of the study

# 5.3.1 Purpose of the first phase

The first phase of the study is a comparative text analysis of the source text (original English version) of the TV drama *ER* and the target text (dubbed and subtitled versions), in terms of the aspects of politeness and gender.

#### 5.3.2 Data collection

#### 5.3.2.1 Material

The materials used for this study were:

- Warner DVDs of ER. The discs are formatted for the Japanese market;
- Toshiba and Dell Notebook computer.

#### 5.3.2.2 Procedure

Eighty-eight episodes of the dubbed Japanese version of *ER* were utilised as data, together with the English-language originals and Japanese subtitled versions.

## 5.3.2.3 Data analysis

As mentioned in Chapter 1, seasons 1–15 of *ER* were broadcast in the US, Australia and Japan between 1994 and 2016. The following episodes of Season 1–10 were used for the data analysis (commercial DVDs of the Japanese dubbed and subtitled versions were obtainable when the data analysis began in 2007):

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Season 1: discs 1–4 (episodes 1–13); discs 5–7 (episodes 14–25)
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Season 2: discs 4–6 (episodes 11–22)

Season 3: discs 4–6 (episodes 11–22)

Season 4: discs 4–6 (episodes 11–22)

Season 5: discs 1–3 (episodes 1–10); discs 4–6 (episodes 11–22)

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Season 6: discs 1–3 (episodes 1–10); discs 4–6 (episodes 11–22)
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Season 7: discs 4–6 (episodes 11–22)

Season 8: discs 4–6 (episodes 11–22)

Season 9: discs 1–3 (episodes 1–12)

Season 10: discs 1–3 (episodes 1–12)

Season 11: discs 1–3 (episodes 1–12)

Series 15 is the final season. However, since many of the characters changed after series 11, series 12–15 were not included in the study. The duration of each episode is 45 minutes. Initially, series 1, 2, 3, 4, 5, 6 and 8 were viewed in sequence. During and after watching each episode, in order to ascertain the issues for investigation, notes were taken regarding the significant pragmatic features and how those pragmatic markers were used in different contexts. The following categorisation and arising issues were then formulated for the analysis:

1. Issues of gender image

2. Issues of address form in the context of hospital hierarchy

The original English data and the Japanese dubbed and subtitled versions were compared, focusing on the pattern and use of pragmatic markers (gender-associated sentence final forms, and address forms including second person pronouns) associated with the issue of gender and politeness.

# 5.3.2.3.1 Issues of gender image

The use of Japanese gender-associated sentence final forms (GASFFs) as pragmatic markers was investigated. As explained in Chapter 4, this study categorised GASFFs according to the system proposed by Kawasaki and McDougall (2003, p. 44), with minor modifications and incorporating information from Takahashi et al. (2005). Gender differences in address form were also investigated. The following broad patterns were observed:

- frequent use of gender-associated sentence final forms
- use of marked gender-associated address forms such as omae & anta

The overarching issues arising from these categorisations were:

- an apparently unnatural use of gender-associated forms in the context by some of the characters;
- apparent gaps between the character images in the English version and the Japanese version.

## 5.3.2.3.2 Issues of address form in the context of hospital hierarchy

As explained in Chapter 3, the use of address forms, including second person pronouns, was investigated. As the second person pronoun tends to be omitted in Japanese, the translation of English second person pronouns is challenging. When the second person pronoun is used in Japanese society, it tends to be as a 'power maker' in a hierarchical relationship. The following patterns were observed:

- the replacement of 'you' with other address forms, such as sensei, or names;
- the use of marked forms of 'you' in Japanese (e.g. omae, omee, anata).

The issues arising from these observations were:

- hospital hierarchy and power relationship are reflected in the choice of address form;
- gender-related issues are reflected in the choice of address form.

For the formal analysis, the original English version, the dubbed Japanese version and the subtitled Japanese version of the target segment of the text were transcribed. In the thesis, back-translation into English of each Japanese segment is provided for readers who do not speak Japanese. However, the back-translation was not included in the process of the data-analysis.

The following procedure was followed for the analysis.

**Issues of gender image:** There is no equivalent of GASFFs in English. Therefore, for this analysis, the Japanese version was examined first to identify the extracts in which GASFFs were used. These extracts were then compared to the original English version in order to find the equivalent gender markers (if any) in the original text, as part of an investigation of how the character image of the original text was projected in the target text. The use of some address

forms and second person pronouns as gender markers in both English and Japanese were investigated.

Issues of address form in the context of hospital hierarchy: The English original and the Japanese dubbed/subtitled texts were compared to analyse how the original address forms — including the second person singular pronoun 'you' — were translated into Japanese. Address forms are often power makers, and their use can be a reflection of the social structure. As mentioned earlier, in the Japanese language, the omission of 'you' is common. Therefore, any use of second person pronoun is considered to be a marked form. Analysis leads to a discussion of the issues raised above.

Analytical framework at the discourse level: As explained in Chapter 3, the following tools were employed to analyse the text at the discourse level. Politeness Theory by Brown and Levinson (1978, 1987), in particular the concept of 'positive politeness' and 'negative politeness', was applied to the analysis. In addition, Goffman's (1981) participation framework, in particular, the notion of 'footing', was employed at the discourse level.

# 5.4 Second phase of the study

# 5.4.1 Purpose of the second phase

As discussed earlier in this chapter, two phases of data collection were conducted in this study. For the second phase, there were two groups of participants (6 Japanese speakers and 6 English speakers), and the following steps were taken. Firstly, a survey was conducted for each participant in order to gauge the impressions formed by participants while viewing one episode of *ER*. English speakers viewed the original English version of one episode of *ER* and Japanese speakers viewed the same episode in Japanese dubbed version. During the viewing, participants filled out a survey regarding their impressions of each character in the drama. Secondly, after viewing the drama and completing the survey, participants were interviewed individually. The results of the participant surveys and interviews after watching the original English version were compared with the results of the surveys and interviews after watching the Japanese version.

The purpose of the data collection was to compare the native Japanese speakers' impressions of each character in the drama with those of the native English speakers. As mentioned in Chapter 3, Bednarek (2010) indicates the importance of the characters in long-term TV dramas; and the notion of 'character equivalence' (Petrucci, 2012) is of particular importance in the

present study. As explained by Yamaguchi (2007), in Japanese, the use of sentence final particles (SFP) and personal pronouns plays an important role in character image in fictional stories.

As discussed in Chapter 4, Kinsui (2003) takes this issue to the next level by coining a term, 'yakuwarigo' ('role language'), meaning 'the particular language use with which people can associate an image of a particular character, or vice versa' (present author translation, p. 205). Many instances of 'role language' fall within the categories of personal pronouns, address forms or SFP and sentence final forms (SFF). Since Japanese SFP/SFF, personal pronouns and address forms are associated with aspects of gender and politeness, and these issues have been investigated in the first phase of the study, the results of a comparison of the impressions of each character gained by viewers who watched the drama in the source language and the target language contributed to answering the original research question: 'To what extent can individual viewers' impressions for the characters be traced to translation choices reflected in the target text?'

Hatim and Mason (1997) suggest that there is a case for arguing that the interpersonal meaning is missing in the subtitled text. One of their suggestions for empirical research for the investigation of this issue is 'comparing the source language and the target language auditor impressions of characters' attitude' (p. 96.) Although the focus of Hatim and Mason (1997) is misleading impressions of the characters and is thus different from that of the present study, which focuses on the viewers' impressions of the projected image of each of *ER* characters, their study was used as a point of departure to design the methodology for the second phase of the study.

However, since viewing the drama while following the spoken lines of the characters, and viewing the drama while reading the subtitles, are two different processes, only the viewers of the original English version (for English native speakers) and the Japanese dubbed version (for Japanese native speakers) were compared.

In addition, open-ended follow-up interviews were conducted to investigate how the participants may have been affected in terms of their survey responses. The details of the data-collection procedure, including the pilot study, will be discussed in Sections 5.4.4. and 5.4.5.

#### 5.4.2 Materials

The materials used in the second phase of the study were:

- one Warner DVD of ER (Season 1, Disc 4, episode 11, 'The Gift' (NTSC-formatted for the Japanese market)
- one Sony Trinitron VEGA KV–AR 29 colour TV
- one Panasonic S-33 DVD player
- one Panasonic RX-M40 radio cassette recorder
- survey sheets

The survey included information regarding the chosen *ER* characters. Each survey included an image and brief description of each character. The purpose of the survey was to discover each viewer's impression of each character. To enable each viewer to describe their impression of each character, five character aspects were chosen: modesty, gentleness, diligence, confidence, and gender femininity/masculinity (as shown in Figure 5.1). These aspects were chosen to give the viewer the opportunity to see: the characters' images from different perspectives, for instance, the character's approach to work, which is an important aspect for health professionals; and the characters' approaches to others, including colleagues/patients (this includes how they communicate with others). Moreover, since there was a special focus on gender-associated language in this study, the gender-associated image of each character was included in the selection. For each aspect of the survey, participants were asked to rate candidates on visual scale with polar adjectives in each end (e.g. Arrogant-Modest) within choice of five boxes. The survey sheet will be presented in Chapter 8.

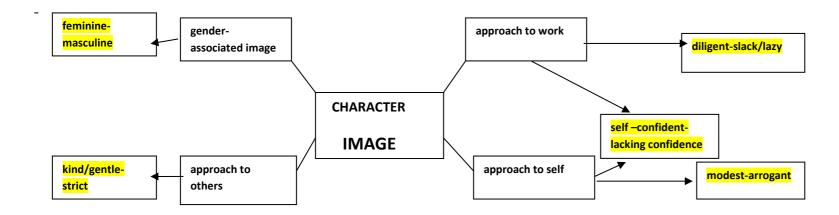


Figure 5.1: Basis of the Questionnaire Items

#### 5.4.3.2 The characters

Initially, three male characters and three female characters were chosen for this study. They were Dr Mark Greene, Dr Douglas Ross, Dr Peter Benton, Dr Susan Lewis, Dr Angela Hicks, and nurse Carol Hathaway. The reason that these characters were selected is that they are the characters who contribute most to this episode. Furthermore, this selection included both genders, a number of specialities (surgeons, paediatricians and a nurse), and two levels of training (resident and specialist), because the County General Hospital, which is the main scene of this drama, is a teaching hospital. However, Carol Hathaway was excluded after the pilot study. The reason for this exclusion is explained in Section 5.4.4.2.

# 5.4.3.3 'The Gift' episode summary

This episode consists of a main story along with various subplots. This episode summary focuses on the stories in which the five characters for the data collection — Mark Greene, Susan Louis, Douglas Ross, Angela Hicks and Peter Benton — play important roles.

## 5.4.3.3.1 Main story

On Christmas Eve at the County General Hospital, Dr Peter Benton and Dr John Carter have a 25-year-old patient by the name of Teddy Powell, who has been injured in a snowmobiling accident. Benton's supervisor, Dr Angela Hicks, and Benton confirm that the patient is braindead. Hicks asks Benton to find his family to obtain consent for organ donation even though Powell's driver's licence states his consent. Prior to receiving the family's consent, Benton begins to search for patients who need organs and proceeds to arrange a transplant. Hicks is astonished that Benton has arranged the transplant without obtaining consent from Powell's family. Benton then finds Powell's wife but she is reluctant to give consent. Benton asks Greene to persuade her. Finally, Powell's wife signs the consent and at the end of the episode, the organ transplant is conducted successfully.

#### 5.4.3.3.2 Subplots

Alongside the main story, several other stories run through this episode.

**Subplot 1.** The chief resident, Dr Mark Greene, is always busy working and has not bought a Christmas present for his wife. His colleague, Dr Susan Lewis, agrees to cover Greene's work for an hour so that he is able to go shopping. However, every time he is about to leave the hospital, another patient comes in. During one attempt to leave, he is stopped by the father of a

little boy, Marey, who has fallen into the water while ice-fishing with his father. Greene and Dr Douglas Ross try to save Marey, who requires a bypass operation because he has stopped breathing. After the operation, Marey is unconscious and Green has concerns about possible brain damage. However, he recovers well and starts to talk.

**Subplot 2.** Lewis is as busy as Greene, treating various patients. She is frustrated that she has not been able to contact her boyfriend, Dr Cvetic. She asks Carter to give her a lift to get to Cvetic's apartment, but when they arrive, the apartment is empty. Lewis is shocked that Cvetic has disappeared without telling her. She was planning to spend Christmas with Cvetic, her sister Chloe and her boyfriend. Lewis goes home and Chloe excitedly tells Lewis that she is pregnant. However, this is not exciting news for Lewis, who has spent a great deal of time helping the self-centred Chloe, and it is especially bad timing, when Lewis is upset about Cvetic's disappearance.

**Subplot 3.** Ross has an elderly patient who claims to suffer from insomnia. According to her, every year she has a health problem at Christmastime. She believes that it comes from a mistake in her past: she did not marry her Jewish boyfriend because of her parents' disapproval. Ross is due to have dinner with his girlfriend's parents after work. Instead (promoted by his patient's story) he goes to the restaurant where Ms Carol Hathaway, his former girlfriend and the nurse manager of the ER, is having her engagement party. He confesses to her that he still loves her and believes that she still loves him. Hathaway's fiancé, Dr John Taglieri, punches Ross and Hathaway tells Ross to 'stay out of my life'.

#### 5.4.4 Pilot

The pilot study was conducted in order to examine the operability of the survey procedure for the second phase, which involved filling out the survey within a limited time during and after viewing the chosen episode of *ER*.

## 5.4.4.1 Participant

The pilot participant was a Japanese female who had not watched ER previously.

#### 5.4.4.2 Procedure

Prior to the session, the participant was informed of the data-collection procedure and provided with brief information concerning the five characters of the drama. She also received the survey, including images of the characters. She was given one minute to review the survey. The

participant was asked to complete the survey during and after watching the episode. Since the participant was a native speaker of Japanese, she watched the Japanese dubbed version. The duration of viewing was 45 minutes, and the participant received an extra three minutes after viewing the episode to finalise her survey responses. Since the purpose of the pilot was to examine the operability of the survey procedure, a follow-up interview was not conducted for the pilot study. However, the participant was asked whether she found any difficulties with the procedure. She indicated that she had found it difficult to fill out the six survey sheets within the time given, and especially the sheet on Carol Hathaway, as it was difficult to make selections about this character. As a result, the sheet for Carol Hathaway was excluded from the actual study. Since there were no other reported problems in the survey operation, the actual data collection was structured exactly as for the pilot except for the number of survey sheets.

#### 5.4.5 Data collection

The materials used for the pilot data collection were also used for the real data collection. However, as mentioned in Section 5.4.4.2, six survey sheets were used for the pilot but only five survey sheets were used for the actual data collection.

#### 5.4.5.1 Participants

Twelve people participated in this study. There were two groups of participants: one group consisted of participants who are native speakers of English; while the other group consisted of participants who are native speakers of Japanese. Research ethics clearance was obtained from Macquarie University Human Research Ethics Committee prior to commencing the data collection. The participants were all friends or acquaintances of the researcher, and recruitment was conducted via email or telephone. An information sheet regarding the data-collection procedure was provided to each participant in advance.

In order to optimise internal reliability and to obtain consistent survey results in the second phase of this study, the following conditions were taken into account. Firstly, the conditions for the data-collection procedure were controlled for all participants, including time for viewing the drama and filling out the survey, and materials used. The interview was conducted individually for all the participants. Therefore, all participants took part in the data collection under the same circumstances.

Secondly, the number of participants and the gender ratio were controlled so that they were the same for each group. In addition, it was ensured that none of the participants in either group

had watched *ER* previously. This was because, if a participant had viewed the series before, they might have already established an image or impression of the characters and might have filled out the survey on the basis of their established images rather than the images formed during the study.

Brodie, Foehr, Rideout, Baer, Miller, Flournot and Altman (2001) present the results of the 'Demographics of all U.S. adults and regular ER viewers, 1996 and 1997' by the U.S Bureau of Census. According to the results, 49 per cent of ER viewers are between the ages of 30 and 49 years, and 51 per cent of ER viewers have finished 'some college or more'. In order to maximise external validity, participants' profiles were controlled so as to be as close to this demographic as possible. Participants from the same age bracket (30–49) with tertiary educations were deliberately recruited (see Table 5.1). Nevertheless, since the size of the sample is small, the generalisability of the findings from this data collection is limited. Gender was also controlled for balance: there were three male and three female participants in each group.

#### 5.4.5.2 Procedure

Prior to the session, participants were informed of the data-collection procedure, provided with a brief introduction to the five characters, and given the survey, including images of the characters. They were given one minute to review the survey. Participants were asked to complete the survey during and after watching the episode. The group of English speakers watched the episode in the original English and the group of Japanese speakers watched the dubbed Japanese version. The duration of viewing was 45 minutes, and the participants were given an extra three minutes after viewing the episode to finalise their survey responses. This procedure was conducted with participants in groups of two or three speakers of the same language. However, they were not allowed to discuss their survey responses with each other.

After completion of the survey, each participant was asked to participate in a follow-up interview regarding the language use of the characters in the episode. The interviews were conducted individually.

**Table 5-1 Summary of participants** 

	Gender	Age group	First language	Education
А	F	30–39	Japanese	Postgraduate
В	F	30–39	Japanese	Undergraduate
С	F	30–39	Japanese	Postgraduate
D	M	30–39	Japanese	Undergraduate
E	M	30–39	Japanese	Undergraduate
F	M	40–49	Japanese	Postgraduate
G	F	30–39	English	Postgraduate
Н	F	30–39	English	Postgraduate
I	F	40–49	English	Postgraduate
J	M	30–39	English	Postgraduate
K	M	30–39	English	Undergraduate
L	М	40–49	English	Undergraduate

The participants were informed of the procedure of the interview in advance. Dörnyei (2007) indicates that interview is the method most often employed in qualitative inquiries, and is regularly applied to a variety of contexts in applied linguistics. The purpose of this interview was to obtain additional information from the participants. Therefore, in order to enable participants to discuss the issues in a less restricted manner, the interview was semi-structured. Three questions were asked in the interview. The first was: 'Did you have any difficulties in choosing your answers in the survey? Please explain if you did'. This question was chosen because, although feasibility was tested in the pilot study, it is important for the researcher to be aware of any problem or issues experienced by participants in assessing the central characters. The second question was: 'Were there any particular scenes or language use that affected your choice of answer? Please explain if there were'. This question was asked because it is important to investigate the association between the language use and the participants' survey responses.

In particular, there is a possibility that GASFFs contribute to the character images. The third question was: 'Did you find any unnatural use of language in this episode? Please explain if you did'. This question was asked to ascertain whether the participants encountered any 'unnatural' language use by any of the characters, especially in the dubbed Japanese version. As mentioned earlier, much of the literature discusses the phenomenon of unnatural use of language in dubbed Japanese TV series and films, and it was therefore of interest to determine whether or not participants identified instances of language use in the dubbed Japanese version of this episode that they would characterise as unnatural.

The interviews were conducted individually in each participant's first language. The same three questions were asked of each participant, in the same order. The interview was audio-recorded and later transcribed for analysis.

## 5.4.6 Data analysis

The results of the survey were recorded graphically. The results of the two groups (Japanese-speaking participants and English-speaking participants) were compared. The Japanese transcriptions of the interviews conducted in Japanese were translated into English. The results of the survey were analysed together with the transcriptions of the interview data. The findings of the second phase of the study will be presented and discussed in Chapter 8.

## 5.5 Chapter summary

This chapter discussed the methodological choices made in the study, and the research process. It began with the aims and reasons for choosing a mixed-methods research design. It then provided an account of the development process for each phase, together with detailed descriptions of the procedures followed. The next three chapters will provide the analysis and results from the both first and second phases of the study.

# CHAPTER 6: FINDINGS FROM THE FIRST PHASE OF THE STUDY: PART 1

#### **6.1 Introduction**

As discussed in Chapter 5, the purpose of Chapters 6 and 7 is to present the findings of the first (text analysis) phase of this study. In particular, this chapter focuses on the issues of gender-related language and character image. Section 6.2.2 considers female-associated language, and Section 6.2.3 analyses male-associated language. The chapter then presents a summary and discussion of issues relating to gender-associated language and character images.

Each extract of the dialogue chosen in this chapter and the next chapters are presented with the English original text along with Japanese dubbed text and translated version, including back-translation from Japanese into English for the non-speaking Japanese readers. However, as noted in Chapter 5, the translation was not included in the process of analysis.

As mentioned in Chapter 4, most of the characters in ER are addressed with surnames in this thesis. However, first names were used for some of the characters whose surnames do not appear in the series. First names are also used in the cases where two characters who have the surname are present in the same scene.

In order to avoid unreasonable length of numbering, continuing from Sections 6.2.2.2 and 6.2.3.2, sequential serial numbering system will not be applied these sections.

## 6.2 Findings and analysis

#### 6.2.1 Female-associated language and male-associated language

The first phase of this study revealed that many gender-associated sentence final forms (GASFFs) were used by characters in Japanese dubbed and subtitled versions of *ER*. However, there were some differences between the use of female-associated forms and male-associated forms. Female-associated forms were used in a wide range of contexts for many characters. On the other hand, male-associated language was observed only in limited contexts, where it appeared to be used as a communicative strategy to show power or solidarity between the characters. Hence, the analysis of female-associated language and male-associated language will be discussed separately in this chapter.

## 6.2.2 Female-associated forms and character image

## 6.2.2.1 Use of female-associated forms

Female-associated sentence final forms (SFFs) are used by many female characters in *ER*. They are used in various contexts and scenes. As mentioned in Chapter 4, female-associated SFFs are more likely to be used together with plain form of the verbs rather than with polite forms. Many SFFs are observed in dialogue between those of equal status, or in speech from those of higher status within the hospital hierarchy to lower-status colleagues. In addition, in cases where female members of medical staff talk to younger (child and adolescent) patients, they tend to use these particles/forms. Medical staff in this drama generally use the polite form of verbs without using GASFFs when talking to adult patients.

Examples from 1) to 4) below illustrate some of the common features of the use of these female-associated forms, as well as the specific interactional contexts in which they are used. These examples are for analysis of selected scenes which will be presented later, in Section 6.2.2.2.

- 1) A female member of the medical staff talks to a colleague in a professional context
- a. From ER Season 5, Episode 12, 'Choosing Joy'

In the scene, the Chief of Emergency Medicine, Dr Kerry Weaver, asks a surgical fellow, Dr Elizabeth Corday, whether Corday has received a message from Weaver. Corday is with her colleagues, a surgical resident Dr Peter Benton and a medical student Lucy Knight.

Table 6-1

Speaker	English	Dubbed	Subtitled
Weaver	Elizabeth, did you get my message?  Is now a good time?	Erizabesu, dengon kiite kureta <b>kashira</b> ima ii <b>kashira?</b>	Erizabesu chotto  Elizabeth, I want to talk
		Elizabeth, I'm wondering whether you got my message. Is now a good time?	to you.

b. From ER Season 6, Episode 6, 'The Peace of Wild Things'

Dr Cleo Finch (a paediatric fellow) discusses the treatment of her child diabetic patient with Dr John Carter (a resident). They have just talked with the father of the patient regarding the treatment of his son's condition. Since the family will not be able to obtain insurance cover for the next three months, the father says that his son could improve his eating habits and take medication for diabetes that has already been prescribed for his grandmother. However, Dr Finch is against the idea.

**Table 6-2** 

Speaker	English	Dubbed	Subtitled
Finch	With his grandmother's glyburide, he could drop his sugar level, but eat more and gain	Oobaachan no kusuri o nonde kettoochi ga sagatta kara, motto tabete futoru wa yo.	Sore made ni tabete futoru <b>wa yo</b>
	more weight.		He will gain by then.
		If he takes his grandmother's medication and obtains a lower sugar level, he will gain more.	

- 2) Female medical staff member talks to a colleague in a casual context
- a. From ER Season 4, Episode 12, 'Sharp Relief'

Surgical general attending physician, Dr Elizabeth Corday, and her colleague, surgical fellow Dr Peter Benton, talk about their long day, while waiting for an elevator after work. Corday suggests a drink with Benton.

Physician assistant, Jeanie Boulet, and infectious disease specialist, Dr Greg Fisher, try to spot a comet in the night sky on an early winter morning, but they are unsuccessful. They then go to a café for a hot chocolate. Jeanie tries to explain that she is more interested in the stories behind the stars than in astronomy.

**Table 6-3** 

Speaker	English	Dubbed	Subtitled
Corday	It's been a long day. I could use a drink.  How about you?	Tsukareta <b>wa ne.</b> Nomita <b>i wa.</b> Tsukiau?	Nanika nomitai <b>wa</b> tsukiau?
		We're tired, aren't we? Need a drink. Come along?	I want something to drink. Come along?

# b. From ER Season 3, Episode 12'Post Mortem'

Table 6-4

Speaker	English	Dubbed	Subtitled
Jeanie	I'm afraid I'm hardly enough for astronomy.	Watashi wa sonnani tenmongaku ni hamatte- nai <b>no.</b>	Tenmongaku mo tsurai <b>wa</b>
		I'm not so crazy about astronomy.	Astronomy is hard.

# 3) Female medical staff members talk to a patient

# a. From ER Season 4, Episode 2, 'Something New'

Nurse manager, Carol Hathaway, speaks to a teenage female patient who fainted when washing a car. Hathaway asks her a question, as she suspects that the patient has anorexia, but she has not revealed this to the medical staff.

Attending physician, Dr Susan Lewis, has found out that the 13-year old daughter of a drunk driver was the real driver in an accident, as she found the mark of the seatbelt on the girl's body.

**Table 6-5** 

Speaker	English	Dubbed	Subtitled
Hathaway	Is there anything that you haven't mentioned to us?	Nani ka watashitachi ni kakushiteiru koto nai kashira?	Nani ka kakushiteiru koto nai?
		We are wondering if there is anything you're hiding from us.	Is there anything you're hiding from us?

# b. From ER Season 8, Episode 13, 'Damage is Done'

**Table 6-6** 

Speaker	English	Dubbed	Subtitled
Lewis	Ouch! You have been responsible.	Itasooanata wa beruto o shiteita <b>no ne.</b>	anata wa beruto o shiteita <b>no ne</b>
		You look hurt. You were wearing the seatbelt weren't you?	You were wearing the seatbelt, weren't you?

# 4) Patients talk to medical staff.

# a. From ER Season 7, Episode 22, 'Rampage'

A young woman with a stomach problem has vomited blood in the ER waiting room. The examination shows that she has swallowed a condom packed with cocaine. It emerges that she was involved in drug trafficking on the way back from Belize. She is crying and explaining to Dr John Carter that she had everything stolen during her trip, but then met a very kind man who asked her to help him with drug trafficking. She says that she helped him because she wanted to go home.

**Table 6-7** 

Speaker	English	Dubbed	Subtitled
Patient	I just wanted to go home.	Hayaku kuni ni kaeritakatta no.  I wanted to go home soon.	Hayaku kuni ni kaeritakatta dake <b>na no</b> I just wanted to go home
			soon.

# b. From ER Season 2, Episode 19, 'Fire in the Belly'

Dr Susan Lewis sees a female patient who is suspected of having a heart attack. Lewis tries to establish the patient's medical state, and then starts the examination. The patient is unhappy and angry about the long waiting time at the ER.

**Table 6-8** 

Speaker	English	Dubbed	Subtitled
Patient	Don't patronise me, you doctors are all the same.	Baka ni shinai de <b>yo.</b>	Shinyoo deki nai <b>wa</b>
		Don't mock me.	I cannot trust you.

## 6.2.2.2 Analysis

This section presents the detailed analysis of selected scenes. In order to help readers to understand the story and to form a mental picture of each character portrayed in the excerpt, background information regarding the characters whose utterances are focused on in the analysis, as well as information about the story and the context, are provided.

#### Case 1: Suzan Lewis and Chloe Lewis

#### 1. Who is (Susan) Lewis?

Dr Susan Lewis is one of the main characters of the series. As explained in Chapter 4, Lewis appears as a second-year resident in County General Hospital in Season 1, and leaves in Season 3. She returns to County General as an attending physician in Season 8. She is a capable and dedicated doctor. However, early in the series she has problems asserting herself in confronting situations with other doctors. She does not get along well with Dr Kerry Weaver, the Chief of Emergency Medicine.

In Seasons 1 and 2, Lewis's personal life is unstable, with her problems stemming largely from her elder sister, Chloe, who has a history of drug, relationship and money problems. Chloe gives birth to a baby, Suzie, but resumes taking alcohol and drugs. She eventually abandons Suzie and leaves Chicago. Despite the long shift hours at ER, Lewis tries hard to raise Suzie, and she develops a maternal attachment to her. However, at the end of the Season 2, Chloe returns to Chicago with a new job and fiancé, Joe, a police officer. Lewis does not win custody, losing baby Suzie. The family leaves Chicago, and at the end of Season 2, Lewis herself leaves County General and Chicago.

Lewis returns to County General ER in Season 8, after several years of experience in other hospitals. In Season 1 and 2, she was a young resident. In Season 8, she starts work as an attending physician, a higher position. Because of her position and experience, Lewis displays more confidence than in early seasons.

Although Lewis still has problems with Chloe, her personal problems are not the focus after Season 8, and she does not show the same stress level as in Seasons 1 and 2. Hence, in later seasons, her character is portrayed as more relaxed. As the second phase of this study, which will be reported in Chapter 8, focuses on Lewis in Season 1, the below two analyses also focus on the character image of (Susan) Lewis, as projected in early seasons.

#### 2. Who is Chloe?

Chloe Lewis is a character portrayed by Kathleen Wilhoite. She is the elder sister of Susan Lewis. She first appears in Season 1. In contrast to her intelligent and diligent younger sister, Chloe has persistent personal problems including drugs, alcohol and relationships with men. Although she is aged over 30, she is unable to support herself financially. After disturbing the

life of her sister several times, Chloe comes to see her sister again. She is in the late stage of pregnancy and is homeless. Susan lets Chloe stay in her apartment, after Chloe promises that she will do everything Susan asks.

# 3. (Susan) Lewis and Chloe (Lewis)

Both Susan and Chloe have the same surname, 'Lewis'; however, Susan is referred to by her surname, and Chloe is referred by her first name.

#### Excerpt 1

(From ER Season 2, Episode 21, 'Take These Broken Wings')

## a. Story and context

This scene is an internal monologue by Lewis in the last chapter of this episode; the setting is a counselling session with a therapist, when Lewis is devastated after 'little Suzie' leaves Chicago with Chloe and Joe. The episode includes five of Lewis's counselling sessions, comprising her talking to her therapist as a monologue, without the therapist appearing on screen. The example below is the fourth monologue, in which Lewis explains to the therapist how difficult it is for her to move on after Suzie's departure.

The scene begins with Lewis talking in the consultation room, and this continues until line 7. From line 8, Lewis continues talking by herself; however, the background scene moves to her daily life (on the bed, in the shower, on the train). This implies that Lewis has returned to her pre-Suzie life. During the last background scene of this monologue — the last scene of the episode — Lewis is crying, and leaves a stuffed doll she was going to send to Suzie for her birthday on the pew of a church while a Christening is being held. At the beginning of the episode, Lewis tells her counsellor that she wants to send this doll to Suzie on her birthday. Therefore, leaving the doll on the pew implies Lewis's farewell to Suzie. The same church appears at the beginning of the episode. In chapter one of this episode, Lewis picks up a jacket dropped by an old woman in front of the church. She follows her to return it, and Lewis finds herself in the chapel, getting lost in the beautiful but melancholy choir music. The priest explains to Lewis that they are practising for the Christening the next day. The same music plays as background music from line six until the end of the episode. The music is played intermittently during the consultation scene.

Table 6-9

	Speaker	English	Dubbed	Subtitled
1	Lewis	It's cold in here tonight.	Konya wa hieru <b>wa.</b>	Konya wa hieru
			It became cold tonight.	It became cold tonight.
2		Maybe Chloe is getting it together.	Kuroe wa chanto yatteru kashira.	Ane wa daijoobu <b>yo ne</b>
			I'm wondering whether Chloe is working out just fine.	My elder sister is fine, isn't she?
3		Or maybe Joe can keep it together.(.)	Joo ga irukara shinpai nai wa ne.(.)	Joo ga iru kara
			There is no need to worry because Joe is with her, right?	(She should be ok) because Joe is with her
4		Sometimes I dream that they call and say "Hey Suze, why don't you take her again for a while?"	Yume de futari ga koo iu no. "Suuzan, mata shibaraku azukatte kureru?"	Yume de futari ga iu <b>no</b> "shibaraku azukatte"
			In my dream they say, "Susan, can you take her again for a while?"	In my dream, they say "Can you take her for a while?"
5		And in my dream I say,	Atashi wa koo kotaetru.	Watashi wa kotaeru
		"Yes, Chloe, I'll take her forever" (.)	"Ii <b>wa yo.</b> Isshoo azukatte ageru <b>wa.</b> " tte (.)	"isshoo azukatte ageru"
			I reply "OK. I'm willing to take her forever" (.)	I reply "I'm willing to take her forever"

6	Then I wake up and I know it's not true, because my arms hurt from feeling so empty.(.)	Demo, me ga sameru to, ude ni wa suujie ga inakute tada munashii tameiki.	Demo me ga sameru to munashii tameiki bakari
		But I wake up and I feel empty because Suzie is not in my arm.(.)	But when I wake up there is only a sigh of emptiness.
7	I always knew you loved your children.(.)	Kodomo tte, honto ni kawaii.(.)	kodomo tte kawaii
		Children are really cute.	Children are cute.
8	I just never realised  How much you fell <b>in</b> love with them. (.)	Sodateta mono ni totte wa, ikigai sono mono da <b>wa.</b> (.)	Ikiigai sonomono <b>yo</b>
		They are something you live for, those who bring them up.	They are something you live for.
9	Little Suzie was like a storybook. (.)	Suujii wa otogibanashi no hon mitai data.(.)	Suujie wa tebanasenai otogibanashi datta
		Suzie was like a fairy tale.	Suzie was a fairy tale I couldn't lose.
10	One you never wanted to put down	Yomidashitara saigo, tebanashitakunai.	Continued from line 9
		One you never put down once you started to read.	
11	Every smile was some new page to be pored over (.)	Egao no hitotsu hitotsu gaatarashii peeji o tsuke kuwaete.(.)	Egao ga atarashii peeji o tsuke kuwaete
		Every smile created a new page.(.)	Smile created a new page.

12		Studied, touched (.)	Kokoro o tsukande hanasanai no.  Wins the hearts and minds.	N/A
13		Remembered(.)	Wasurerarenai wa. (.) I can't forget.	Wasurerarenai I can't forget
14	((Susan walking in the charch and crying))			
15		I loved my storybook.(.)	Sore wa miryoku afureru otogibanashi (.)  It was a very charming fairy tale. (.)	Yume no otogibanashi  It was a fairy tale in dream
16		And for the first time in a long time (.) I didn't feel alone.	Sore o te ni shiteiru to,  atashi wa umarete hajimete kodoku de wa nakunatta.  When I took it in my hand, I felt like I was not alone for the first time in my life.	watashi o kodoku kara sukutte kureta sujie (It was) Suzie who saved me from my loneliness

In this monologue, gender-associated sentence final forms (GASFFs) have been used as effective strategies to display Lewis's fragile emotional state, and contribute to her feminine image.

This scene can be divided into two sections according to background images. The first section is from lines 1 to 8, in which Lewis appears talking to the therapist, although the therapist does not appear on screen. The second section starts from line 9, and is accompanied by background

images of Lewis's daily life following the scene at the church. The first section uses more GASFFs than the second section.

In line 1, the monologue starts from 'It's cold tonight'. In the Japanese version, in the subtitled version ('Konya wa hieru' [It's cold tonight]) and the dubbed version, GASFF wa is used. As explained earlier, wa is used when a speaker gives information or a message to a listener that they do not already have, or are not aware of. In addition, wa with rising intonation is associated with female speech, and functions as a softening of a statement, exhibiting the speaker's diffidence. It contributes to a gentle, reserved feminine image. Furthermore, sentence final forms (SFF) often express emotions and sentiment. Therefore, by using wa, the line in which Lewis says, 'It's cold tonight', is imbued with feeling. Compared to the Japanese version, no particular communicative strategies are used in the original English version.

In line 2, Lewis shows concern about her sister, as Chloe has a history of drug and alcohol abuse. Lewis is not easily convinced that Chloe would be a capable parent. In the original version, 'Maybe' is used. The female-associated form, *kashira* — meaning 'wondering' — is included at the end of the sentence in the dubbed version. *Kashira* is used when the speaker is uncertain of the information being told to them. As explained in Chapter 4, Kinsui (2003) states that, by using a particular word (yakuwarigo), the Japanese audience can identify a particular type of character. Kashira is identified as '*yakuwarigo*' ('role-language') (Kinsui 2014, p. 68). As previously mentioned, *kashira* has been disappearing from real Japanese female language use. By using *kashira*, a strongly stereotypical image of a feminine character is portrayed, rather like a virtual image, as it is not likely to be used in the real world; which is consistent with the 'dream-like' quality of this particular scene. In this scene, the use of *kashira* can be seen to signal a more strongly marked portrayal of the female image of Lewis than the use of other GASFF forms would. The translator's intention to portray a feminine character image of Lewis is thus displayed.

In the subtitled version, GASFF *yone* is used in line 2. *Yone* is used when a speaker wishes to mitigate the force of the assertion of the content of speech, also known to the listener. By using *yone*, the message that Lewis tries to believe that Chloe is coping well and wants to share this with the listener (the therapist) is conveyed. As explained in Chapter 4, this research accepts the view that, when *yone* is used after a noun or *na*-adjective, it is considered a female-associated form. In this case, as *yone* follows *daijoobu* (which is a *na*-adjective), it is considered a form associated with female speech, which contributes to a feminine image of the character. Although no such strategies have been used in the original version, the translator's choices of

*kashira* and *yone* reflect a stronger intention (whether conscious or not) to portray the feminine character image than in other lines.

In line 3 of the dubbed version, wa ne is used. Wa is a GASFF used for volitional sentences; and with the combination of ne, it seeks agreement to her statement from the listener. Accordingly, in this scene, Lewis tries to remind herself that there is no need to worry about Chloe, as Joe is with her, and asks the listener (the therapist) to agree. Although ne is usually translated as a tag question, as in 'you know?' in English, no such expression was included in the original English version. By including wane, a feminine image of Lewis and her fragile emotional state are effectively portrayed. The line was shortened, as 'Joo ga iku kara', in the subtitled version, which would probably be due to the restriction on number of characters.

In line 5, we see Lewis smiling cheerfully as she talks about her dream. By using a direct quotation, she explains that, in her dream, Chloe and Joe asks Lewis to look after baby Suzie, and she replies that she will look after her forever. Her reply in the dubbed version is 'ii wa yo' ('Ok'), 'isshoo azukatte ageru wa'? In this line, Lewis talks in a happy manner, in contrast to the following line. In line 5, wa yo (combination of SPF wa + yo) and wa impart a positive and happy atmosphere to the scene. They also contribute to a feminine image of Lewis being presented, together with the first-person pronoun, atashi, a female-associated pronoun. In the subtitled version, no GASFF has been used, producing gender-neutral speech. The original English version also contains gender-neutral speech, without any particular feminising strategies. Hence, the subtitled version can be considered to be a literal translation of the original.

In contrast to line 5, line 6 portrays Lewis's profound sadness after waking from a pleasant dream and facing reality, 'life without Suzie'. The choir music begins playing as background music, from the scene of line 6, contributing to the shift to a melancholic atmosphere that continues until the end of this scene (and episode).

In the second section, as previously mentioned, fewer GASFFs have been observed compared to the first section of the monologue. In line 8 of the dubbed version, the GASFF wa is used as a softening strategy, together with plain form of da, which, without wa, creates a strong statement. (English version: I just never realised how much you feel in love with them. Dubbed version:  $sodateta\ mono\ ni\ totte\ wa\ ikigai\ sonomono\ da\ wa$ . [They are something you live for, those who bring them up.]. Subtitled version:  $ikigai\ sonomono\ yo$ . [They are something you live for.]). Since 'sonomono' can be used at the end of the sentence, another option for this

translation would be 'ikigai sonomno', which does not include either copola or SFF. However, here, as there is an emphasis on '(How much you) fell in...', used in the original version, it may be more effective to translate it as 'sonomo da wa' (emphasis with softening) with a rising intonation. In the subtitled version, yo is used after sonomo. Yo can be used as a female-associated form with exclamation (Kawashima 1999, p. 251); and therefore, the use of this form has the seme level of impact as has da wa in the dubbed version.

In line 13, although no GASFF is observed in the subtitled version, wa is used in the dubbed version to soften the statement with emotion ('wasurenai wa'). Takahashi et al. (2005) note that wa can be used in monologues. Lines 12 and 13 of the original version consist of little fragments, not sentences, which create a poetic ending for the monologue ('Studied', 'touched'); and the use of wa contributes to the creation of a poetic ending in the Japanese translation of the original monologue. In line 15, the female-associated first person pronoun, atashi, is used in the dubbed version. However, in subtitled version, the gender-neutral form, watashi, is chosen.

#### Excerpt 2

(From ER Season 1, Episode 23, 'Love Among the Ruins')

#### a. Story and context

The scene takes place at Lewis's apartment, where her unemployed and pregnant sister Chloe stays most of her time. Lewis has just come home from work, and Chloe is smoking and watching TV by herself. Chloe quickly extinguishes the cigarette she was smoking when she notices that Lewis is coming into the room. However, the smell of cigarettes still remains in the room, and Lewis notices that Chloe has been smoking. Lewis is angry about Chloe's selfish and irresponsible behaviour: she has not quit smoking, and she did not see the doctor for her pregnancy check-up that day. Lewis tells Chloe to move out of the apartment when the child is born.

**Table 6-10** 

	Speaker	English	Dubbed	Subtitled
1	Chloe	Hi, how was your day?(.)	Aara, okaeri.(.)	Okaeri
			Hi.	Hi.
2	Lewis	You read the article on smoking and low birth rate babies?	Tabako o suu to aka-chan ga ookiku naranai <b>no yo.</b>	Tabako wa ikenai <b>no yo</b>
			The baby will not weigh enough if you smoke.	Smoking is harm (for your pregnancy/ baby).
3	Chloe	I've kind of stopped, OK?(.)	Wakatteru. Yameru <b>yo.</b> (.)	Yameru <b>yo</b>
			I know. I'll quit.	I'll quit.
4	Lewis	How was the check	Kenshin, doo datta?	Kenshin wa?
		up?	How was the check up?	(How was) the check up?
5	Chloe	Oh. The doctor was so irresponsible and I waited two hours. (.)	Aa, ano isha atama kuru. Yo nijikan mo matase yagatte.(.)	Nijikan mo matasete
				I had to wait for two hours.
			The doc made me angry.l had to wait for two hours.	nours.
6	Lewis	You didn't stay?	Ukenakatta no?	Kaetta no?
			You didn't stay for the check up?	You left?
7	Chloe	Two hours, Susie.	Nijikan <b>da yo</b> .	Nijikan <b>da yo</b>
			Baka ni shite.	
			Two hours. No respect.	Two hours

8	Lewis	I can't do this anymore.	Atama ni kuru no wa kocchi yo.	Moo ii.
			It's me who is angry.	That's enough.
9	Chloe	Sue.	Suuzan.	N/A
			Susan.	
10	Chloe	Suze.	Nani <b>yo</b> ?	N/A
			What?	
11	Lewis	You need to get your own place.	Hitori de kurashi nasai.	Heya o sagashite
		·	Live by yourself.	Find a room for yourself
12	Chloe	What?	Mata?	N/A
			Again?	
13	Lewis	You can't stay here Chloe, not after the	Kodomo ga umaretara,	Umaretara deteitte
		baby is born.	tsurete deteitte choodai.	
			NA/hara hala cia harra I corat	When (the baby) is born, move out.
			When baby is born, I want you to take her with you and move out.	
14	Chloe	But, Suzie, I'm naming her after you.	<b>Anta</b> to onaji namae tsuken <b>da yo</b> .	Namae o morau no ni
			I'll give her the same name as you.	Even though (she) will be given your name?
15	Lewis	And for that I have to support you?	Dakara <b>atashi</b> ga yashinawanakya naranai no	Dakara yashinau no?

			For that I have to support you?	For that I'll support you?
16	Chloe	Yeah, a few months, maybe.	Soo yo, ni-san kagetsu kurai wa	Ni- san kagetsu wa
			That's right. (You have to support me for) about two or three months	(You have to support me for) two or three months
17	Lewis	No.	Iya <b>yo</b> .	Iya <b>yo</b>
			No.	No.
18	Chloe	You're throwing me out?	Atashi o hooridasu no?	Oidasu no?
			You're throwing me out?	Throwing me out?
19	Lewis	Oh, God!	Haa, moo!	N/A
			Oh!	
20	Chloe	My own sister!	Chi o waketa kyoodai o?	Jitsu no ane o?
		Wow.	Oni <b>yo</b> !	
				(You're throwing out)
			(You're throwing out) your blood sister?	your real sister?
			(you're) iron-hearted!	
21	Lewis	Stop it! Chloe stop!	Nani itte mo kikoenai <b>wa.</b>	Yamenasai
		I'm not going to let	Hito o warumono ni shite	moo sonote ni wa
		you guilt me into taking care of you again.	takaroo nante, moo sonna koto sasenai.	noranai
			I can't hear whatever you say. I'm not going to let	Stop it. I won't fall for that again.

			guilt me and sponge from me again.	
22	Chloe	C'mon, Suzie.  You're making good money.	Ii jan yo.  Anta kaseeden da kara.  Doesn't matter. You're earning.	Anta wa kaseederun da You're earning.
23	Lewis	Perfect.	Fuzakenaide!  Don't be silly!	N/A
24	Chloe	You're not even here half the time.	Uchi ni mo hotondo inaishi.  Also, you seldom stay home.	You are almost always away from home.
25	Lewis	Damn it, I have spent my whole life bailing you out and I 've had it! You understand. No more! This is it!	Atashi wa neesan no atoshimatsu o shite, mendoo o mirutame ni umaretekitan janai wa! Moo zettai ni iya yo!  I was not born to clean up your mess and take care of you. Absolutely no more!	Neesan no shirinugui wa moo takusan oshimai yo!  I had enough of cleaning up your mess. It's over.
26	Chloe	(.) Where am I supposed to go?	(.)Jaa, atashi wa doko ikya ii <b>no yo?</b> Where am I supposed to go?	Atashi wa doko e?  Where am I (going)?
27	Lewis	You're thirty-four years old, Chloe. Figure something out.	Moo, sanjuu yon no obasan desho. Jibun de kangae nasai.	Sanjuu yon nimo natte nasakenai

	You're a middle-aged	Pathetic (that you can't
	women of thirty-four.	figure out by yourself)
	Think by yourself.	even you 're thirty-four
		years old.

In this scene, a distinct difference between two characters in the use of GASFFs is observed. These choices of language by the translator in both the dubbed and subtitled versions make a contrast between the two different character images.

Similar to Excerpt 1, (Susan) Lewis has been projected as a character with a feminine image. However, in contrast to the previous monologue, in this scene, Lewis shows assertiveness in her dialogue with Chloe. In line two in the Japanese version, Lewis tells Chloe that smoking is harmful for the unborn baby. In this line, *yo* is used after *no*. *No* is an abbreviated form of *no desu* (formal form) or *no da* (plain/casual form). *Desu* is a polite form of the same copula as *da*. Makino and Tsutsui (1989, p. 325) note that *no da* and *no desu* are sentence endings indicating that the speaker is explaining or asking for an explanation about some information shared with the listener, or is talking about something emotively, of common interest to the speaker and the listener. McGloin (2003) states that *no* used in a declarative sentence has the characteristic of female speech. Accordingly, the combination of *no* and *yo* is considered to be a female-associated form.

In this scene, Lewis shows disappointement to find out that Chloe has been still smoking although she is pregnant. Lewis, as a medical doctor, is trying to explain the harm that smoking can cause to the foetus during pregnancy. In this line, *no yo* has been contributing to the feminine image of Lewis as she tries to explain the danger of smoking to her sister. In the original English version, Lewis asks Chloe whether she has read the article about low-birth-weight babies.

In line 8, Lewis shows anger toward Chloe for missing her doctor's appointment. Chloe makes an excuse for not seeing the doctor by telling Lewis that she had to sit in the waiting room for two hours, and she is angry about being treated disrespectfully by the doctor. For Lewis, however, not staying for the appointment at the hospital is unacceptable. In the Japanese versions, Lewis says that 'it's me who gets angry', which means that it is Lewis who has a right to get angry while Chloe does not have the right to be angry. In this line, *yo* is used after a

pronoun *kocchi* (here/this side), which is a feminine-associated form. In this case, two other grammatical options are possible. One is the combination of the copula, *da* and *yo* (*da yo*) or *da*. Both of these are gender-neutral forms. Since *da yo* is used in line 7 by Chloe, it is likely that the translator has chosen *yo* with the intention of contrasting the character images of Lewis and Chloe.

The English version does not display contrast in the character image between Lewis and Chloe. For instance, in line 8 ('I can't do this anymore'), Lewis comes across as angry and assertive in the original version ('I can't do this anymore'), whereas female-associated SFFs *yo* is used in the Japanese version ('Atamani kuruno wa kocchi yo' [It's me who is angry]), which mitigates the assertiveness of Lewis.

In line 21, Lewis tries to stop Chloe from blaming her for forcing Chloe to move out of the apartment. Lewis is very angry and tries to ignore what Chloe says. The English version is very direct, 'Stop it! Chloe stop!'. Line 25 starts from 'Damn it', when the anger Lewis has accumulated for many years explodes. This is a very direct and clear way to express anger, and therefore considered as performing FTA 'without redressive action, baldly' (Brown and Levinson, 1987). However, in the Japanese version, although Lewis is doing FTA, the female-associated SFF *wa* is used for both the dubbing and subtitling versions, which have a softening effect and contribute to mitigating the assertiveness of the speaker, as a positive politeness strategy.

In contrast to the feminine image provided for Lewis, some of the SFFs contribute to projecting a rough and casual image for Chloe. In line three in both the dubbed and subtitled versions, the gender-neutral form yo is used after the plain form of the verb. In line five, yo is again used after the plain, gender-neutral form of the verb. In the same line, yagatte is used. Yagatte is the te-form of yagaru, which is generally used to show anger and contempt for the actions or behaviour of the listener or a third person. Kinsui (2014) has categorised this as male-associated 'role-language'. It is considered as a rough male expression, and is unlikely to be used by female speakers. In this case, yagatte is used to show anger toward the doctor, which contributes to portraying a rough and less-feminine image of Chloe.

In the English original version, Chloe tells Lewis that the doctor was irresponsible, but there are no particular pragmatic markers that contribute to the creation of a rough image for the character, who is easy-going and never shows seriousness in the scene. However, her casual clothing and her slow speech in the English original version contribute to the character image.

In line 7, Chloe uses *da yo*, which is a combination of the copula *da* and *yo*, which shows assersion. As previously explained, *da yo* is considered to be a gender-neutral form. In lines 10, 16 and 20, the female-associated form *yo* is used for Chloe in the dubbed version. However, in line 22 in the dubbed version, *ii jan yo*, which is the casual gender-neutral form, is used together with the second-person pronoun, *anta*. In the same line, *anta* is used in the subtitled version as well. *Anta* is a casual form of the female-associated second-person pronoun. Kinsui (2014) categorises this as role-language, stating that *anta* has an image associated with a shameless woman. The English original line here is 'Come on Suzie'. It would be possible to use casual expressions such as *jan* and *anta* to show solidarity between people in a close relationship, such as sisters. Once again, it is interesting that, in this scene only, Chloe uses casual and rough expressions such as *yagatte*, and Lewis often uses female-associated forms. This may be the translator's intention, to make a contrast between the two characters by choosing different language forms.

### Case 2: Miranda Fronczak (Randi)

#### Who is Fronczak?

Miranda Fronczak, a desk clerk, is known as 'Randi', and appears from Seasons 2 to 4, played by Kristin Minter. Her character is a good looking and assertive woman who often chews gum and tends to wear attire that is inappropriate for work. In episode 6 of Season 2, it was revealed that she had been in jail for criminal charges including assault.

#### Excerpt 1

(From ER Season 4, Episode 21, 'Suffer the Little Children')

#### a. Story and context

This is a scene at the reception. Dr Del Amico, who is a resident, is treating a famous televangelist, Tina-Marie Chambliss. She is accompanied by her husband, Dr Emmet Chambliss, who is a Doctor of Divinity. Fronczak's mother is a fan of their programme. Fronczak heard from her mother that Tina-Marie and Dr Chambliss will broadcast from Tina-Marie's hospital room. Fronczak, Del Amico, and Weaver appear in this scene.

**Table 6-11** 

	Spearker	English	Dubbed	Subtitled
1	Fronczak	Are you taking care of Dr Chambliss and Tina- Marie?	Tina-marii o chiryoo shiteu no wa <b>anta</b> ?	Tina-marii wa <b>anta</b> ?
				Are you treating
			Is that you treating Tina- Marie?	Tina-Marie?
2	Del Amico	Yes.	Soo <b>yo.</b>	N/A
			That's right.	
3	Fronczak	My mom watched by the hour and	Uchi no mama ga, itsumo kanojo no terebi miterun	N/A
			da kedo.	
		and she called		
			My mom always watches	
			her TV programme and	
4	Fronczak	and said they	Byooshitsu kara, nama	Byooshitsu kara nama
		announced on the cable station that they are broadcasting live	chuukee suru rashii <b>yo.</b>	chuukee suru rashii <b>yo</b>
			It seems that they will	It seems that they will
			broadcast live from her	broadcast live from her
			hospital room.	hospital room.
5	Fronczak	since she is dying.	Kanojo shinisoo nan datte?	Shinisoo datte?
			Is she going to die?	(Is she) going to die?
6	Del Amico	No. That's not	Uso! sonna koto nai <b>wa yo.</b>	Uso <b>yo</b>
		happening.		sonna no
			No. it's not true.	
				No. it's not true.

7	Fronczak	She is not dying?	Shinanai no?	Shinanai?
			(She is) not dying?	(She is) not dying?
8	Del Amico	No. And they're not doing the	Ee sore ni, chuukee mo shinai wa.	Chuukee mo kyoka sarenai
		broadcasting from here.  Dr Greene said no way.	Guriin sensnsee ga dame da to itteta.	Live broadcasting won't be permitted.
			No live broadcasting either. Dr Greene said no.	
9	Fronczak	Because she and my aunt sit next to the TV with their credit cards.	Mama tachi ga kurejitto kaado motte hoosoo matten <b>da yo.</b>	Oozee ga kifu surun da yo
			My moms and others are waiting for the broadcast with their credit cards on their hands.	Many people will make donation.
10	Weaver	Are you guys talking about those televangelists?	Ano terebi dendooshi tachi no hanashi?	Dendooshi no hanashi?
			Are you talking about those televangelists?	Are you talking about those televangelists?
11	Fronczak	Yeah, Dr Emmet and Tina-Marie.	Emetto hakase to tina- marii.	Tina-marii tachi
			Dr Emett and Tina-Marie	Tina Marie and others.
12	Weaver	They have some kind of clout.	Ano rennchuuu tsuyoi kone o motteru mitai <b>yo.</b>	Tsuyoi kone ga aru yoo ne
				kyoka sareta <b>wa</b>
			It seems they have a strong connection.	They seem to have a strong connection and

				the broadcast has been
				permitted.
13	Weaver	I just got a call from	Keeee kanribu kara,hosoo o	N/A
		administration saying	kyokashiro to ittekita <b>wa.</b>	
		let them do the		
		broadcast.		
			The administration told us	
			to permit the broadcasting.	

In this scene, although female-associated forms are chosen for the Japanese translations of two other female characters, Del Amico and Weaver, only gender-neutral forms are used for the speech of Fronczak. This analysis focuses on her language.

In line 1, Fronczak address Del Amico as *anta*. As explained in Chapter 3, although there is only one singular second-person pronoun, 'you', in English, there are a number of options in Japanese. As explained in the case of Chloe, the second-person pronoun, *anta*, is a casual form of second-person pronoun, *anata*, and is likely to be used by females in a casual context; and it is used to a person of equal or lower status. Within the hospital hierarchy, the position of doctor has a higher status than other staff. Since Del Amico is a young resident, it may be that Fronczak talks to her in casual speech style to show solidarity. However, *anta* is a rough form of *anata*, which is less likely to be used by a desk clerk or receptionist to a doctor. As mentioned earlier, Kinsui (2014) states that *anta* may associated with an image of a shameless woman. This use of *anta* contributes in projecting the rough and assertive image of Fronczak, who does not confirm to conventions that are part of the hierarchy of the hospital.

In line 4 in the dubbed and subtitled versions, yo is used after rashii ('it seems'). The only female-associated use of yo is after na adjectives or nouns. Since rashii is an auxiliary verb, this case is considered to be a gender-neutral form. In line nine in both the dubbed and subtitled versions, yo is used together with the plain form of the copula da. In the dubbed version, matten da yo is a shortened form of matte iru no da. In the subtitled version, surun da yo is the shortened version of suru no da. No da, in this case, has the function of the speaker giving an explanation. Here, Fronczak tries to explain why the broadcasting of the TV programme is very important for the audience, including her own mother, and in the English version 'because' is used. Therefore, the choice of this form is considered to be plausible in translation. As explained

earlier, the combination of da and yo is a gender-neutral form and is used as an assertion. The female-associated form is da wa with rising intonation, which mitigates the assertiveness of using wa.

Although it is not the focus of this analysis, female-associated forms are chosen for two other characters, Del Amico and Weaver, in contrast to the speech of Fronczak. In line 2 in the dubbed version, the female-associated SFF *yo* is used for Del Amico. In line 6, in the dubbed version, the female-associated SFF *wa yo* is chosen, and in the subtitle version of the same line, the noun *uso* is used with *yo*. This usage is again female-associated. Both female-associated forms contribute to the feminine image of Del Amico. For Weaver's speech in line 12, in the dubbed version the female-associated SFF *yo* is used, and in the subtitled version, the female-associated SFF *wa* (with rising intonation) is chosen. In addition, in the next line, the female-associated form *wa* is used in the dubbed version. I would argue that those choices made by the translator contribute to creating contrastive character images, between the two female doctors having feminine images and Fronczak with an abrupt image.

#### **Excerpt**

(From ER Season 6, Episode 2, 'Last Rites')

#### a. Story and context

There is a major accident near the hospital, and resident Dr Dave Malucci tries to rescue people injured at the site. He finds an ambulance unattended and parked near the hospital. Malucci asks Fronczak who is driving the vehicle.

**Table 6-12** 

	Speaker	English	Dubbed	Subtitled
1	Malucci	Hey, who's rig is that?	Are, dare no kyuukyuusha?	N/A
			Who's ambulance?	
2	Malucci	Yo, Betsy, who's rig is that?	Oi, obasan, are wa dare no kuruma da.	Baasan, are wa dare no kyuukyuusha da.
			Lady,	Old lady,

			Who's car is that?	Who's ambulance is that?
3	Fronczak	What are you screaming about?	Nani <b>wameeten da yo.</b>	Donaru <b>na yo</b>
			What are you hollering at?	Turn you caps lock off.
4	Malucchi	Paramedics are driving that one. Where are they?	Ano kuruma no kyuukyuu- taiin wa doko itta?	Are no kyuukyuu-taiin wa?
			Where are the paramedics of that ambulance?	Where are the paramedics of that car?
5	Fronczak	I don't know, try the cafeteria, why?	Shiranai ne. Shokudoo janai no? I don't know but maybe	shokudoo janai?  May be cafeteria?
			the cafeteria.	
6	Malucci	Cafeteria.	Shokudoo.	Shokudoo
			Cafeteria.	Cafeteria

In this short example, in line three, Fronczak talks with Dr Dave alucci, a resident of the ER. In the English version, Malucci talks to Fronczak in an impolite way, 'Yo, Betsy', which is typical for the character. It is translated as *obasan* in Japanese. Addressing a receptionist as *obasan* in a professional context is not considered to be acceptable in Japanese. Addressing 'Yo, Betsy' in English is not acceptable either, if it is not the interlocutor's name. In line 3, in the dubbed version, 'nani wameeten da yo' is used, which is a shortened form of 'wameete iru no da yo'. As explained earlier, no da is a colloquial form of no desu. No desu is often used when the speaker is providing an explanation to the listener. However, in this case, the function is exclamatory. As explained earlier, da yo is a combination of the copula da and the SFF yo, which is used for strong assertion. In the subtitled version, donaruna yo is a combination of the negative imperative form of the verb donaru and the SFF yo. Both combinations are very assertive and rough, and less likely to be used by female speakers in the real world, particularly

in a professional context. Hence, Japanese speakers are able to associate the language and the image of the character as being rough and assertive. Hence, although specific forms and SFF used here are not categorised as 'role-language', this may be considered to be a *yakawarigo* (role-language) effect. The language use of both characters in the English version and in Japanese versions in this scene is very casual. Especially in the Japanese versions, the language chosen is extreme to the degree that it is clearly unrealistic, and it therefore contributes to the comic relief of this episode.

## Case 3: Angela Hicks

# Who is (Angela) Hicks?

As explained in Chapter 4, Angela Hicks is a general surgeon, and she is in the position of senior surgical attending in County General. Hicks appears in Seasons 1 to 3 in *ER*. She is a talented surgeon. Since most of the main characters of *ER* in the early part of the series are residents, she is higher in rank than other medical staff, and she has a responsibility to train residents and other medical staff. Her interactions often include giving orders or instructions to residents. All her appearances in the series are in a professional and institutional context, and her interactions are limited to her colleagues.

# Excerpt 1

(From ER Season 1, Episode 11, 'The Gift'; the episode used for the second phase of this study)

#### a. Story and context

Surgical resident, Dr Benton, and his supervisor, surgeon Dr Angela Hicks, have confirmed the brain death of patient Teddy Powell, who has been injured in an accident. Hicks instructs Benton to find the patient's family to obtain consent for organ donation, even though Powell's driver's licence indicates his agreement for organ donations. However, Benton, without the consent of the family, starts to search for patients who need organs and even arranges an organ transplant. When approached, Powell's wife is reluctant to sign the consent. In this scene, Hicks is astonished that Benton has arranged an organ transplant without first obtaining consent from Powell's family. Hicks and Benton appear in this scene; however, the following analysis focuses on the utterances of Hicks.

Although this is a serious and 'high-stakes' situation, and an illustration of the 'strong aspect' of Angela Hicks, who is higher in status than Benton, it is interesting to see that female-associate SFFs are chosen for Hicks' dialogue. In line 2, the female-associated SFF wa is used for the dubbed version. In this scene, Hicks still does not know that Benton has arranged the heart transplant without the consent of the patient's family. As mentioned earlier, the function of wa is to mitigate or soften assertiveness. Hence, it does not contribute in portraying the character image of Hicks, who has a higher position than Benton and is talking in a complaining tone.

In subtitled version of line 8, SFF yo is chosen. This is considered to be a female-associated SFF, since this yo is used after the noun, hitsuyoo. This line can also be compatible without yo in this context (kazoku no shoodaku ga hitsuyoo. [His family's consent is required]). In line 9 of the subtitled version, female-associated SFF no is chosen. This line is also compatible without no. In the dubbed version, the female-associated form with the combination of nouns, na no yo, is used. In addition, in line 10, the female form wa is chosen for the dubbed version. Here, Hicks is surprised to learn that Benton has called the transplant team without the consent of the family, although it was necessary to obtain family consent first. Hicks explains that (as Benton ought to know) they cannot proceed with the transplant without family consent. Hicks is showing assertion and power toward Benton, who did not follow the instructions that she gave him earlier. In the English version, this is clear from her forceful tone and the way in which she admonishes Benton while pointing out the consequences of his action, and speaking continuously without giving Benton the opportunity to cut in.

**Table 6-13** 

	Speaker	English	Dubbed	Subtitled
1	Hicks	Why are you holding	Itsu made mataseru	Ishoku chiimu o itsu
		Powell?	tsumori?	made mataseru
				tsumori?
			How long do you intend to	
			keep us waiting?	How long do you intend
				to get keep the

				transplant team waiting?
2	Hicks	The cardiac and liver transplant team are waiting for you upstairs.	Shinzoo to kanzoo no ishoku chiimu ga iraira shiteru <b>wa.</b>	N/A
			Cardiac and liver transplant team are irritated.	
3	Benton	Well, I ran into a little problem with the patient's wife.	Jitsu wa, sono, kanja no okusan to toraburu ga arimashite.	Jitsu wa kanja no okusan ga
			Actually, I had a problem with the patient's wife.	Actually, the patient's wife
4	Hicks	What?	Nani <b>yo.</b>	
			What?	N/A
5	Benton	His wife won't sign the consent.	Shoodakusho ni sain shite moraenain desu.	Shoodaku shimasen
			I can't get her consent.	She hasn't given me consent
6	Hicks	You called the team before you had his wife's consent?	Shoodaku o etenai no ni, chiimu o yonda no?	Nano ni chiimu o yonda no?
			You called the team even though you didn't get the consent?	You called the team nonetheless?
7	Benton	His driver's licence gave us permission.	Menkyo ni honnin no sain ga arimashita.	Menkyo ni doo i ga

			There was a signature on his driver's licence.	There was a consent on his driver's licence
8	Hicks	I told you to contact the family. It's his wife's decision, not yours.	Kazoku ni shiraseru to itta de sho.	Kazoku no shoodaku ga hitsuyoo <b>yo</b>
			I told you to contact the family.	His family's consent is required.
9	Hicks	If she doesn't want it, we don't do it.	Kimeru no wa anata janaku te kazoku <b>na no yo.</b>	Sore nashi ni wa dekinai no
			Okusan ga iyada to ie ba dekinai <b>no.</b>	We can't do this without it.
			It is not your decision, but the family's. We cannot do it if his wife does not like to do it.	
10	Hicks	You've got eight transplant surgeons flying into this hospital patients and families waiting at the end.	Anata no hitokoto de, hachinin no shinzoo gekai ga tondekite, mukoo ja kazoku ga inoru kimochi de matteru <b>wa.</b>	Hachinin no gekai ga tondekite mukoo ja kanja ga matteru
			You've got eight transplant surgeons flying into this hospital. Patients and families are waiting and praying for this.	Eight transplant surgeons are flying here and the patient is waiting there.
11	Hicks	If we cannot harvest, what are you gonna tell these people?	Moshi karaburi ni owattara, sono hito tachi ni nan te iu tsumori?	Karaburi ni owattara doo suru tsumori?
			If we can't go ahead, what do intend to say to those people?	What do you intend to if we can't go ahead?

Given the assertive nature of Hicks' display, it is somewhat surprising to find that the Japanese version (both dubbed and subtitled) of her dialogue contains various GASFFs, including wa and a combination of wa and yo. As mentioned earlier, these forms have function of softening, and seem out of place in a high-stakes situation, particularly where the speaker is openly criticising the actions of a junior colloeague. Some literature suggests the possibility of using female-associated forms or speech style as a strategy to make a statement a show of assertiveness (e.g. Mizumoto 2010). However, in the case of Hicks, not only in the conflict scene but also in other context, female forms are chosen. Hence, the use of female-associated SFFs do not appear to have been chose to reflect communication strategies in particular contexts.

There are two different interpretations for the use of GASFFs in this particular case. One is that the translator chose these markers as the 'default' for most of the female doctor characters. The other interpretation is lip movement. As mentioned in Chapter 2, in dubbed versions, the utterance is required to match the lip movement of the character (actor). Hence, in the case of dubbing, there is a possibility that these particles are chosen to use to adjust the lengths of utterances to correspond more closely with the lip movements of the actor.

However, in the next example below, Hicks uses the combination of *wa* and *yo* in a scene in an operating theatre where she is wearing a surgical mask. Accordingly, the audience is not able to see her lip movements.

#### Excerpt 2

(From ER Season 3, Episode 12, 'Post Mortem')

#### a. Story and context

This is a dialogue between Hicks and Carter at an operating theatre. Hicks is a female senior surgeon and Carter is a resident. As a surgical resident of County General Hospital, Carter is under the supervision of Peter Benton, a surgeon (in the previous season of the series his character was a surgical resident, but here he is a surgeon). Carter has a problem in his relationship with Benton, ever since Carter's friend and colleague Dennis Gant was killed when he fell off a train. Although, after an investigation, police confirmed that the death was an accident, there is some suspicion that Gant committed suicide. As Gant was under the supervision of Benton, Carter believes that too much pressure from Benton contributed to Gant's death. In addition, Benton's emotional state has been affecting his work since his exgirlfriend Carla announced that she was pregnant with his baby. Benton makes no effort to

establish a good relationship with Carter and does not give Carter adequate support as a supervisor. Hicks knows that Carter is a talented surgical resident. She is concerned that Benton may have been wasting Carter's skills, and suggests to Carter that he should transfer to her team. Both Hicks and Carter are present in this scene. However, the following analysis focuses the utterances of Hicks.

**Table 6-14** 

	Speaker	English	Dubbed	Subtitled
1	Carter	I've never done this before.	Kore wa hajimete desu yo.	Hajimete desu
			This is the first time for me to do this.	It's my first time.
2	Hicks	Really? This is exactly the kind of thing you should be doing.	Hontoo ni? Kore gurai wa moo yatte toozen <b>ne.</b>	Kono kurai moo yattete tozen <b>yo</b>
			Is that true? You should be doing this level of (the procedure)	You are expected to do this level of procedure.
3	Hicks	So, should I be worried about Peter?	Sore ni shite mo, piitaa wa shinpai <b>ne.</b>	Piitaa ga shinpai <b>na no</b> <b>ne</b>
			We are worrying about Peter, aren't we?	You are worrying about Peter, aren't you?
4	Carter	What do you mean?	Doo shite desu?	Naze?
			Why is that?	Why?
5	Hicks	Don't play dumb. It doesn't suit you.	Tobokenai de. Shitteru kuse ni.	Tobokenakute ii <b>wa</b>
			Don't pretend like you don't know.	You don't have to pretend like you don't know.

6	Hicks	Is his emotional state impairing his surgical ability?	Seeshin jootai ga warukute, shigoto ni eekyoo shiteru kana?	Seeshin jootai ga shigoto ni eikyoo shiteru?
			Is his bad emotional state influencing his work?	Has his emotional state been influencing his work?
7	Carter	No, not that I've seen.	lie, soo wa omoimasen.	Soo wa omoimasen
8	Hicks	I appreciate your loyalty.	No. I don't think so.  Oshiego toshite, piitaa o tateru kimochi wa wakaru kedo	I don't think so.  Chuuseeshin wa wakaru kedo
			I understand your loyalty toward Peter as his student, but	I understand your loyalty but
9	Hicks	But I want you to know if Peter can't use you, your talent, my team can.	Piitaa ga anata o tsukaikirenai nara, watashi ga tsukau <b>wa yo.</b>	Piitaa ga tsuikaikirenai nara watashi ga tsukau
			If Peter can't use your talent, I will.	If Peter can't use all your talent, I will.
10	Carter	Really? Are you serious?	Hontoo ni? Joodan janai?	Honki desu ka
			Really? Not joking?	Are you serious?
11	Hicks	I'm almost always serious.	Watashi wa joodan wa iwanai <b>wa yo.</b>	Watashi wa itsumo honki
			I never joke.	I'm always serious.

The previous example was a scene of a 'high-stakes' situation, in which the tension between Hicks and Carter was portrayed. However, no such tension or conflict is displayed in this scene. The scene is at an operating theatre, and Hicks's utterance 'I'm almost always serious' explains the character of Hicks as a serious person and the seriousness of the context.

In this scene, Hicks, an experienced surgeon, is taking an assertive stance toward the absent Peter Benton by suggesting that she would support his trainee coming to her team. Her approach can be seen as assertive partly because it appears that she is making this suggestion unilaterally: there is no hint that she has previously sought Benton's views on the matter. In the Japanese versions, however, GASFFs are apparent in Hicks's utterances, which tend to work against the portrayal of a strong assertive stance. In line two in the dubbed version, the gender-neutral SFF *ne* is chosen, which is replaced with the female-associated SFF *yo* in the subtitled version. The inconsistent choice for this line may be due to the lip adjustment for the dubbed version. In line 3 in the subtitled version, the combination of *na*, *no* and *ne*, which again is categorised as a female-associated form, is chosen. Here, there is a difference in translation between the dubbed and subtitled versions. In the dubbed version, Hicks says that both Hicks and Carter are worrying about Benton. However, in the subtitled version, Hicks refers only to Carter's concern toward Benton.

In addition, in line 5, the female-associated SFF wa is chosen. As mentioned earlier, while wa with rising intonation is a female-associated SFF, with a falling intonation this is a male form. Since this is the subtitled version and no prosodic feature has been observed, it may be interpreted either way. However, considering the fact that no male-associated form has been chosen and some female-associated forms are used for the character Hicks in the Japanese versions of this scene, it appears most likely that this is a female-associated SFF. The original English version does not contain any language features (verbal, prosodic, or non-verbal) that would imply particular feminine or softening strategies.

In lines 9 and 11 in the dubbed version, the female form *wa yo* is used. As mentioned earlier, this is the form generally used to project a feminine soft image for a person/character. In this case, therefore, it is once again inconsistent with the strong image of the character.

As discussed earlier, the function of female forms is softening and contributing to the feminine image of the speaker. However, in both the scene from the episode 'The gift' and the scene above, this softening function seems inconsistent with the character image of Hicks. If wa is used only in this scene, it can be interpreted that Hicks is trying to show solidarity to establish rapport with Carter as a positive politeness strategy, on the basis of Brown and Levinson (1978, 1987), because she would like to invite him to join her team. However, the reason for this choice by the translator is not certain, since wa has been observed in other, different contexts.

## Case 4: Alyssa

## Who is Alyssa?

Alyssa appears as a patient only in *ER* 6, Episode 10, 'Family matters'. Alyssa (surname unknown) is a teenage female. Her parents could not accept her homosexuality, and sent her to an institution named 'Second Turn Treatment Centre'. It is not specifically stated in the drama, but the Centre may be an institution for conversion therapy. Conversion therapy is based on the idea that homosexuality is a disorder, and aims to 'cure' it. The American Psychological Association has shifted their approach from conversion to allowing homosexual people to feel comfortable with their sexual orientation. Homosexuality was excluded from the Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1973. However, conversion therapy is still practiced by some groups of Christian organisations in the US (Clair, 2013).

# Excerpt 1

(From ER Season 6, Episode 10, 'Family Matters')

# a. Story and context

This is a scene involving Dr Deb Chen, nurse Haleh Adams, and Alyssa. The patient, Alyssa, was begging on the street, and was taken into the ER by a police officer because of frost bite and other minor injuries. She refuses to give her name to the police officer. Adams removes her dirty clothes and tries to find something clean for her. When questioned by Chen, she offers no information and still refuses to give her name.

In this scene, GASFFs are used by all three characters, Chen, Adams, and Alyssa. However, this analysis mainly focuses on the character Alyssa.

In line 7, Dr Chen tries to approach Alyssa gently, hoping she will open up, by saying, 'So, Jane Doe, huh?' Alyssa appears to follow Chen's joking mode by saying, 'My parents weren't very clever'. From Brown and Levinson (1978, 1987), joking is a basic positive politeness strategy, which means that Alyssa is showing solidarity to Chen. However, she still shows distance to Chen by refusing to reveal her identity.

In line 10, female forms were chosen for both the dubbed and subtitled versions of Alyssa's utterances. Here, in reply to Dr Chen's that her parents miss her, Alyssa says, 'I wouldn't know'. There are two possible interpretations of this statement. One is that she is trying to be uncooperative with Chen, avoiding telling anything about her family. The other is that, since her parents did not accept her identity as homosexual, she is not certain that they truly love or miss her. In the dubbed version, GASFF *kashira* is used. As explained earlier, *kashira* is used when the speaker is not convinced of the information given to them. Therefore, it is semantically appropriate to be used as a translation of the original version, 'I wouldn't know'. However, it also markedly a female-associated form.

As explained earlier, Kinsui (2014) categorises *kashira* as role-language, and by using *kashira*, a strong image of a feminine type of character will be portrayed. In the subtitled version, the female form *yo* is chosen. In the dubbed version, *zenzen*, which means 'Not at all', is chosen. Hence, the translation is semantically different from the original version, stating that Alyssa is certain that her parents do not miss her. In this line, the translator's intention to show the feminine image of the character is apparent, since female forms were chosen for both the dubbed and subtitled versions. Nevertheless, it is questionable whether they contribute to portraying the character image projected in the original version.

**Table 6-15** 

	Speaker	English	Dubbed	Subtitled
1	Alyssa	You can't force me to do this.	Muririyari nugasete doo suru no?	Nani suru <b>no yo</b> .
			What are you going to do by forcing me to take off my clothes?	What are you doing?

2	Adams	We are not forcing you. We're helping	Doo mo shinai <b>wa yo.</b> Tasuketai dake.	Anata o tasukeru no
		you.	We're not doing anything. We want just to help you	We 're helping you.
3	Chen	That's a deal. You get to lie about your name and age.	Uso no namae ya toshi o iu no wa, jiyuu da kedo.	Dare daka shiranai kedo
			You are free to not say your name and age	I don't know who you are but
4	Haleh	But, you do not lie about these sticky clothes.	Kon na kitanai mono o kitecha, byooki ni naru kara.	Fuketsu de byooki ni naru yo
			You may get sick if you're wearing such dirty clothes	You may get sick because of bad hygiene.
5	Adams	Maybe I can find something in lost and found.	Ishitsu butu hokanshitsu de, nani ka sagashite kite ageru.	Nani ka sagashite kuru wa
			I'll find something from lost and found for you.	I'll go and find something for you.
6	Chen	Thanks Haleh.	Yoroshiku.	Yoroshiku
			Thanks.	Thanks
7	Chen	So, (.)Jane Doe, huh?	Namae wa nai no?(.)	Nanashi na no?
			You don't have a name?	Without a name?
8	Alyssa	My parents weren't very clever.	Oya ga tsukere kurenakatta no.	Oya ga te o nuite

			My parents didn't give me a name.	My parents didn't bother.
9	Chen	Maybe not, but I bet they miss you.	Atana ga inakute, sabishigatteiru <b>wa.</b>	Sabishigatteru <b>wa</b>
			(I bet) they miss you.	They must miss you.
10	Alysssa	I wouldn't know.	Doo <b>kashira.</b>	Zenzen <b>yo</b>
			I 'm not sure	Not at all.
11	Chen	So, (.) Jane ,(.) how did you get these other marks on your arm?	De,(.) nanashi san, (.)ude no sono kizu wa nande tsuketa no?	Nanashi san sono kizu wa nani ?
			By the way (Jane), how did you get the scar on your arm?	Jane, what happened with your arm?
12	Alyssa	I don't recall.	Oboetenai <b>wa.</b>	Wasureta
			I don't remember.	I forgot
13	Chen	You're just a fountain of information, aren't you?	Nandemo wasurete shimatte, atama wa karappo?	Nani mo kani mo wasureta?
			You forgot everything and your brain is empty?	You forgot everything?
14	Alyssa	Yeah.	Soo <b>yo.</b>	
			That's right.	

In line 11, Chen finds a scar in Alyssa's arm and asks her about it. In line 12, Alyssa replies, 'I don't recall.' There is no specific female expression found in the original version, and the response itself is straightforward. In the dubbed version, the female form wa is chosen. Since neither the original English version of the script nor the visual appearance of the character is particularly feminine, there is a possibility that it was chosen simply to adjust for the lip movement. In the last line, female form yo is again chosen. In English version, it is interesting to see some contrast between the utterances of Chen and Alyssa. When Chen comments, 'You're just a fountain of information, aren't you?' Alyssa gives a simple reply, 'yeah', which shows no particular female-associated marker. Once again, the Japanse translation contains a female-associated form (in this case SFF yo), which has a feminine effect that is absent from the English original.

# Excerpt 2

### a. Story and context

In this scene, Alyssa notices that Chen has accessed her personal information by checking her clothes, as Chen called Alyssa by her name (previously she was called Jane Doe). Chen has completely lost Alyssa's trust, and the latter tries to run away from the hospital. Chen tries to persuade Alyssa that she will be able to help her.

#### b. Analysis

In this scene, Alyssa shows anguish toward Chen. Alyssa believes that Chen has betrayed her just like her parents, who could not accept the fact that their daughter was homosexual and sent her to the conversion centre.

In line 2, by saying, 'You stole my clothes and stole my coat, you're trying to trick me. Just like them', Alyssa is showing anger toward Chen, and compares her to her parents who tricked her and sent her to the conversion centre. In the dubbed Japanese version of line 2, even though Alyssa speaks angrily, female-associated SFF wa is chosen. However, no particular feminine expression or softening strategies are used in the English original. Wa, as a female-associated form (with rising intonation), can be used with a statement. However, the function of female-associated form wa is basically to mitigate assertion. Therefore, in this case, there is an option of not using wa (joodan janai), which sounds even stronger without the female touch of wa.

**Table 6-16** 

	Speaker	English	Dubbed	Subtitled
1	Alyssa	I need to get out of here.	Atashi moo kaeru kara.	Taiin suru kara
			I will go home soon.	I will be discharged
2	Chen	No, no, Alyssa, [wait!	Dame yo, Arissa, [chotto machinasai!	Matte
			No, Alyssa, wait!	Wait
3	Alyssa	You] stole my clothes and stole my coat, you're trying to trick me. [Just like them.	Joodan ja nai <b>wa</b> ! Hito no fuku o muriyari nugasete, nusunde oite, minna [uragirimono!	Fuku o nusundarishite minna to onaji uragirimono
			No joking! You forced me to take off my clothes and stole them. Everyone cheats on me.	You did thing such as stealing my clothes. You're a betrayer just like everyone.
4	Chen	We didn't steal] anything OK? We'll give them all back to you.	Nusundan] janai <b>wa yo</b> . Atode kiree ni shite, zenbu kaeshite ageru.	We' II wash them and
			We didn't steal them. We will wash them and give all back to you.	will return (them to you).
5	Chen	You don't go anywhere until I sew up that laceration and you tell me what's going on.	Demo, ude no kizu o hoogoo surumade wa, chotto matte choodai. Kikitai koto mo takusan arushi.	Hoogoosuru made matte kikitai koto mo arushi
			But wait until I suture	Wait until I suture (the wound) and I also

			the wound on your arm	want to ask you
			and I also want to ask you	something.
			many things.	J. J. O
			, -	
6	Chen	Please let me help.	Chikara ni naru kara.	Chikara ni naru
	Circii	r rease rec me ne.p.	Cimara in mara kara.	
			I will help you.	I'll help you.
			T Will Help you.	Tit Help you.
7	Alyssa	You can't, ok?	Narenai <b>wa yo.</b>	Narenai
			No, you can't.	(No) you can't.
8	Chen	Yes, I can.	Naremasu.	Naremasu
8	Chen	165, 1 Call.	Nuleillusu.	Nuterriusu
			Voc Lean	Voc. Lean
			Yes, I can.	Yes, I can.
9	Alyssa	No, you can't.	Narenai no.	Narenai
			You can't.	You can't.
10		C'. I		21/2
10	Chen	Sit down.	likara suwatte.	N/A
			Just sit down.	
11	Alyssa	Fine.	Nan de?	N/A
			Why?	
12	Chen	Sit down.	Swatte.	Tomokaku suwatte
				hanashi o kikinasai
			Sit down.	
				Just sit down and listen
				to me.
				(continue to the next
				turn of Chen)
12	Alvesa	N/A	Nanius	N/A
13	Alyssa	N/A	Nani <b>yo.</b>	N/A
	1	I.	<u> </u>	i .

			What do you want?	
14	Chen	Just listen for a minute, will you?	Watashi no hanashi o kiite choodai	(Continued from the last line.)
			Listen to me, please.	
15	Chen	Ok. You're safe here.	Koko nara anzen da kara.	Koko wa anzen
			You're safe here.	You're safe here.
16	Chen	Who tricked you, your parents?	Nee, dare ga uragiri mono? Anata no ryooshin?	Ryooshin ni nani ka sareta no?
			Who tricked you, your parents?	Did your parents do something to you?
17	Alyssa	Yes (.)they got me to this treatment centre. That's why I ran away.	Soo <b>yo</b> . Aa watash <b>i</b> o chiroo sentaa ni ireyoo to shita node nigedashite yatta no.	Chiryoo sentaa ni iretanode nigedashita no
			Yes, because they tried to send me to the treatment centre and I ran away.	I ran away because they sent me to the treatment centre.
18	Chen	Treatment centre, like for drug or alcohol?	Nan no chiryoo sentaa? Mayaku toka, arukoorru?	Mayaku toka arukooru no?
			What kind of treatment centre? For drug or alcohol?	Is that for drug or alcohol?
19	Alyssa	No, for gender identity	Chigau. Jendaa aidentitii <b>yo.</b>	Seedooitsu shoogai <b>yo</b>
				For gender identity.

			No, for gender identity.	
20	Chen	What?	Nani?	N/A
			What?	
21	Alyssa	My parents sent me	Ryooshin wa watashi ga	Watashi wa byooki
		away because they think I am sick and confused.	byooki dato omotteiru node, kuchi o suppaku shite nando mo itta noni	janai
				I'm not sick.
			They think I am sick	
			although I've been telling	
			this many times.	
22	Alyssa	I keep telling them,  "Mum, Dad, get over it. All I am is gay".	Watashi wa byooki janai. Dooseeaisha da tte.	Watashi wa byooki janai wa tada no dooseeaisha <b>na no</b>
		, , , , , , , , , , , , , , , , , , ,	I am not sick, I am gay.	I am not sick. I am just gay.

In addition, in line 7 in the dubbed version, the female form wa yo was chosen. Here, Chen is trying to convince Alyssa that she can help her, but Alyssa denies this by saying, 'You can't, Ok?'. In the dubbed version, narenai is equivalent to '(You) can't'. The translator may have chosen wa yo to confirm the emphasis in the English 'Ok'. However, wa yo is not the only option in Japanese in this case. By choosing wa yo, a feminine image is projected that is not portrayed in the original. In addition, in line 19, in both the dubbed and subtitled versions, the female form yo is chosen again for Alyssa. In the last line, she says that she keeps telling her parents that she is homosexual, which is a very important statement in this scene. For this statement, the combination of na and no, which is categorised as a female-associated form, is chosen for the subtitled version. It shows the strong intention of the translator to portray a feminine image of the character, which is again questionable in this case.

### 6.2.3. Male-associated language and character image

#### 6.2.3.1 Male-associated forms

Although female forms are used in various contexts, by many characters in the series, there are some limitations in the use of male-associated forms. Although female forms tend to be used with plain form (casual speech), it is possible to use them with the polite form.

Therefore, the use of female-associated forms is not restricted to casual speech. However, most of the male-associated forms can be used only with the plain form of the verb, as informal speech style. Their use is restricted to speakers of higher or equal status within the hospital hierarchy. The research in the area of gender studies suggest the strong association between masculinity and power. (e.g. Kiesling, 1998; Tannen 1990), so it follows that male-associated forms are often used to show power to over the hearer.

In addition, male-associated forms are often use to show solidarity within the male group, in Japanese society. Solidarity is often discussed as homosociality in the area of gender and masculinity (e.g. Cameron, 1997; Hammarén and Johansson 2014; Sedgwick 1985). Hammarén & Johansson (2014) defined 'homosociality' as 'social bonds between the persons in the same sex' (p.1). The study of Nakamura (2010) shows that male-associated forms are often used by Japanese male speakers to build homosociality. In Japanese, there is a phrase, 'ore to omae no naka', which has a literal translation, 'relationship between you and me'. As explained earlier, there are number of options for choosing second person pronouns: male-associated personal pronouns, ore and omae, can be used to show strong bonds and solidarity between two male friends.

The male-associated forms used in Japanese versions of *ER* have the following characteristics, that they:

- 1. Portray particular character images;
- 2. Show solidarity;
- 3. More frequently used in particular contexts (e.g. emergency);
- 4. Display power.

Since the issue of power and hierarchy is the main focus of the analysis in the next chapter, the issue of power will be discussed in Chapter 7.

### 6.2.3.2 Detailed analysis of specific scenes

Following the same format as in Section 6.2.2.2, this section presents the detailed analysis of selected scenes.

#### **Case 1: Peter Benton**

#### Who is (Peter) Benton?

As stated in Chapter Four, Peter Benton is a surgeon, and appears as a surgical resident in Season 1. He is promoted to surgical fellow in Season 5, and becomes attending surgeon from Season 6 until his departure from *ER* in Season 8. He is a very talented surgeon with remarkable skills. Benton is portrayed as a very confident and self-centred person who often has conflicts with other staff, particularly in the early part of the series. He often has quarrels with John Carter when Carter is under his supervision. Nevertheless, in Season 6, Benton saves Carter from a drug problem by sending him to a rehabilitation centre.

Benton has several romances during his time in County General. In Season 2, he has an affair with Jeannie Boulet. Jeannie works privately as a therapist looking after Benton's mother, and later she becomes a Physician Assistant at County General. In Season 4, Benton goes out with his fellow surgeon, Dr Elizabeth Corday. From Season 6, Benton goes out with his colleague, the paediatrician Dr Cleo Finch, and marries her after leaving County General in Season 8. He has a son, Reece, with his former girlfriend, Carla. Reece has a hearing disability. Benton loves his son, but he struggles to make time for Reece because of his heavy workload. Benton is involved with custody battles during the series. In Season 8, he resigns because he cannot negotiate his workload with his superior, Dr Robert Romano, who does not show any understanding of Benton's family situation.

### Excerpt 1

(From ER Season 3, Episode 11, 'Night Shift')

### a. Story and context

This is a scene at the cafeteria of County General. Surgical intern, Denis Gant, and John Carter are taking a break. Gant is a friend of Carter, and they are roommates. They are both under the supervision of Peter Benton, and they talk each other about their problems. However, since Carter has begun a relationship with a woman, they do not spend as much time together as in

the past. In addition, Carter is tired of hearing complaints from Gant regarding problems with his girlfriend.

In this scene, Gant was supposed to monitor the level of calcium of a patient with hypercalcemia. He requested the lab tests, and as he was told that it would take about an hour to get the results, he takes a break. Benton is looking for Gant, and is very angry to find him at the cafeteria taking a break. He raises his voice and talks in an assertive manner in front of other staff in the cafeteria.

This dialogue is particularly important in Season 3. After the conflict with Benton in this scene, Gant made a complaint to the chief of surgery, Dr Anspaugh, about being humiliated by Benton. However, he could not receive support from either Carter or Anspaugh, and on that day, Gant was killed by run over by train. Carter believes that Benton was too strict with Gant, which pressured him.

**Table 6-17** 

	Speaker	English	Dubbed	Subtitled
1	Benton	Gant, what are you doing here when a kid up there is sick and dying of hypercalcemia?	Konna tokoro de nani shiterun da? Kodomo ga kookan shimukessho de shinikatteru no ni.	Nani shiteru?  kanja ga  shinikakatteru no ni  What are you doing  even though the patient is dying?
			when a kid is dying of hypercalcemia?	is dynig:
2	Benton	Kener's patient, you are supposed to monitor his calcium.	Dokutaa kenaa no kanja da zo.	Naze monitaa shinai
			Monitaa sure to iwareta	Why you don't monitor?
			daroo.	
			It's Dr Kener's patient.	
			You were told to monitor him, right?	

he lab. e de hoori
te de noori
Your y is not only o request.
aruto
vill take
o no
a
namia.
o go now.

				Excuses kill the patients.
			Don't say that! That kind of excuse kills the patients.	
9	Benton	Now look. If you can't do the job and you don't want the job,	Manzokuna shigoto o shitakunai yatsu wa, koko	Shigoto o shitakunai yatsu wa hitsuyoo nai
		you don't need to be here.	ni wa hitsuyoo nai.	You are not required (here) if you don't want to do the job.
			If you don't want to do the job with satisfactory achievement,	to do the job.
			we don't need you here.	
10	Benton	(.)Make another stupid, lazy mistake like that, and you won't be.	(.)Kondo namaketa, misu o okashitara, soku kubi da.	Kondo namaketara kubi da
			If neglect your job and make a mistake again, you'll be sacked.	If you laze next time, you'll be sacked.

### b. Analysis

There are three characters in this scene, Benton, Gant, and Carter. However, there is no contribution to the dialogue by Carter in this excerpt, and he just listens to Gant and Benton. This analysis focuses on Benton's utterance. This example shows an assertive and arrogant aspect of Benton's character, who as supervisor is higher in the hospital hierarchy than Gant. Benton talks in an aggressive tone, which is supported by male-associated language in the Japanese versions.

Here, male-associated SFFs as well as imperative forms are used for Benton in the Japanese versions. In addition, the plain form of the copula, da, is used through the dialogue. In contrast, the polite form is used for Gant to show respect to Benton, as he has a lower position than Benton in the hospital hierarchy.

In lines 1 and 2, Benton is very unhappy to find Gant at the cafeteria and having a break, as he was expected to monitor the calcium level of the patient. In the dubbed version, the male-

associated SFF zo is used. Zo is used when the speaker conveys the information to the hearer with attention (Takahashi et al., 2005). Here, the used of zo shows strong assertion from Benton to Gant. In addition, the male form daroo is used. Daroo is the equivalent of tag questions in English, and it is likely to be used by male speakers. This sentence would be grammatically appropriate without this SFF. By including zo and daroo, the strong image of Benton comes out.

Gant says he has requested the lab tests. However, in line 4, Benton is not happy, as Gant has not checked them. In the dubbed version, the plain form of the copula *da* is used. In addition, in the dubbed version, the negative imperative form, *hooridasuna*, expresses power and the anger shown by Benton toward Gant.

In line 5, Gant tries to explain that he is taking a break as he was told that it would take an hour to get the result of the test. However, Benton is not convinced, and he is angry that Gant did not pick up the result. In line six in the dubbed version, for the translation of 'look', the imperative form *miro* is used. Although the English imperative form, 'look', is equivalent to Japanese *miro*, it is gender-associated in Japanese and is likely to be used by male speakers. In this way, with the combination of the male-associated form *zo*, it contributes to the assertive image of a Benton who is showing anger. Line 8 is a very strong message from Benton to Gant, who has made excuses for not checking the lab result. In the Japanese dubbed version, the imperative form *iuna* is chosen. This contributes to the projection of a serious reprimand in this scene.

### Excerpt 2

(From ER 4, Episode 22, 'A Hole in the Heart')

## a. Story and Context

Benton and the receptionist, Miranda (Randi) Fronczak, are at the reception of the ER. After talking to an audiologist on the phone regarding his son Reece's hearing check, Benton asks Fronczak to take a message if the audiologist calls him later. There was a traffic accident, and the emergency patient is about to be conveyed to the ER. Benton, who belongs to the surgical department, is unwilling to help in the ER today. However, Fronczak could not manage to find the other surgeon, Dr Coday, and there was no option but for Benton to treat the injured patients.

### b. Analysis

This is a short dialogue between Benton and Randi. This is not a conflict situation as in the previous scene, but a common exchange between a doctor and a desk clerk. There are some GASFFs used that portray the character image of Benton.

In the subtitled version of line 2 and the dubbed version of line 4, the form *kure* is chosen. *Kure* is imperative form of verb *kureru*. *Kureru* is used as an auxiliary verb with the *te*-form of the verb, and means that someone does the other person (himself/herself or in-group member) a favour by doing something. It can be used as a request (e.g. *Kaite kureru*? [will you write it down?]), with a rising intonation. However, if *kureru* is replaced with *kure* without a rising intonation, it is still a request but close to an imperative, and it is more likely to be used by male speakers than female speakers. In line 4, in comparison to the English version with 'please', the dubbed version takes a more imperative tone. It sounds like Benton is making an order to Fronczak rather than making a request. This line can be completed without *kure* ('*kaitoite*'). There are two possible reasons for this choice. One is lip synchronisation. As explained in Chapter 2, adjustment of the translated text to lip movement is a crucial aspect for the dubbed version. In this case, since the English line is long ('Just write it down for me, please.') it may not match with the dubbed version if only '*kaitoite*' were used.

The other possible reason for the use of *kure* is the character image of Benton. There is a possibility that the translator aims to portray a consistently assertive image for Benton. In line 8 in the dubbed version, the male-associated SFF *zo* with the plain form of the copula *da* is chosen. This is a strong assertion. This line, in combination with the male-associated first-person pronoun *ore*, contributes to the masculine and assertive image of Benton. However, the original version does not have a particular pragmatic marker to support the character image. In the last line, *kuso* is equivalent to the English original version, 'damn it', as used by male speakers.

Although this is a relatively short exchange (lasting only 30 seconds in total), the male-associated forms used for Benton's dialogue in the Japanese versions support the assertive and arrogant character image of Benton.

**Table 6-18** 

	Speaker	English	Dubbed	Subtitled
1	Fronczak	Dr Benton	Benton sensei.	Sensei

			I	
			Dr Benton.	Doctor
2	Benton	Listen Randi, an audiologist is gonna call.	Oojiorojisuto kara denwa ga aru kara.	Denwa o <b>kiitoite kure</b>
			There will be a phone call from an audiologist.	Get the message from the phone call.
3	Fronczak	An audi what?	Oojinani?	Dare kara?
			Audiolo what?	From whom?
4	Benton	Someone who does hearing tests.	Chookaku no kensa o	Oojiorojisuto da
			suru hito <b>da.</b>	
			Someone who does hearing tests.	It is audiologist.
5	Benton	Just write it down for me, <b>please.</b>	Kaitoite kure.	N/A
			Write it down, the message, for me.	
6	Fronczak	Ok. But, we've got an MVA coming in the back door.	Demo kootsuujiko no kyuukan ga kurun da yo.	Kootsuujiko no kyuukan ga kuru yo
			But the emergency patients of a traffic accident are coming.	Emergency patients of traffic accidents are coming.
7	Fronczak	A Mazda versus a milk truck.	Jooyoosha to torakku no shoototsu.	N/A
			A car collided with a truck.	
8	Benton	I'm just signing charts. I'm not covering the ER.	<b>Ore</b> wa iiaaru no tantoo janain <b>da zo.</b>	<b>Ore</b> wa tantoo janai

			I'm not in charge of (the ER).	I'm not in charge of it.
9	Fronczak	I know. But I can't locate Dr Corday.	Shitterukedo, koodee sensei ga mitsukara nain da. I know. But, I cannot find Dr Corday.	Koodee sensei ga inain da I cannot find Dr Corday.
10	Fronczak	I called upstairs they say something about she's checking out Costa Rica.	Kosutarika ni denwa suru toka de, hashiri mawatteta soo de  It seems she was busy calling Costa Rica.	Kosutarika ga doonotte something about Costa Rica
11	Benton	What?	Nani? What?	N/A
12	Fronczak	That's what I said. About the MVA?	Atasha shiranai yo. Kyuukan kichatta. I don't know. Emergency arrived.	Shiranai kita yo  I don't know.  (They) came.
13	Benton	Oh, <b>damn</b> it.	aa <b>kuso</b> ! Oh, damn it.	Kuso  Damn it.

**Case 2: Mark Greene and Douglas Ross** 

# 1. Who is (Mark) Greene?

Dr Mark Greene is one of the main characters of *ER* from Seasons 1 to 8. He appears as the Chief Resident in Season 1. He is promoted to attending in Season 2. Greene is a dedicated doctor. He is portrayed as a warm-hearted person who is loved by everyone. Although he is higher in position than many of the staff in the hospital hierarchy, he is egalitarian and tries to

help anyone in need. He is a mediator between Dr Kerry Weaver and other staff, and sometimes he is a good mentor for junior staff. Dr Susan Lewis and Dr Douglas Ross are his close friends in the ER. Dr Douglas Ross is his best friend, and their friendship is as close as siblings. Since Ross does not mind breaking the protocols of the hospital to help his patients, he often causes problems. In such cases, Greene always protects Ross and mediates with Weaver.

Greene was married to Jennifer when they were students, and they have a daughter, Rachel. Jennifer becomes a lawyer in Season1, and starts to work in Milwaukee. Because of Greene's workload and distance, their marriage does not work well and the marriage ends. In Season 7, Greene marries his colleague, Dr Elizabeth Corday, a surgeon from the UK, and they have a daughter, Ella.

In Season 6 Greene is diagnosed with a brain tumour and has an operation to remove it. However, after his marriage to Corday in Season 7, the cancer recurs. At the terminal stage of his illness, he refuses to have life-prolonging treatment, against Corday's wishes. He resigns from the ER and spends his last period of his life in Hawaii with Corday and his daughters, Rachel and Ella. He is sadly missed by everyone at the ER.

### 2. Who is Douglas (Doug) Ross?

Douglas (Doug) Ross is a one of the main characters of *ER* from Seasons 1 to 5. Ross is portrayed as a Paediatrics Fellow from Season 1 to 4, and he is promoted to an attending paediatrician during Season 4.

He is a passionate and dedicated paediatrician who prioritises the patients' welfare. He does not care about violating ER policy to save patients. In addition, he is not good at handling authority, including the Chief of ER, Dr Kerry Weaver, and he often has conflicts with Weaver. Mark Greene always tries to help Ross by mediating with Weaver. In Season 5, Ross helps a patients' mother to euthanise her son who is terminally ill with pain. After his actions are revealed, Ross has to face suspension and possible criminal charges. He resigns from County General and leaves Chicago.

Ross is portrayed as a handsome womaniser in the series. Because of Ross's affairs with other women, his true love Carol Hathaway has a difficult time. At one time, she decided to forget Ross and married an orthopaedic surgeon, John Taglieri (Tag). Eventually, Ross and Hathaway re-unite. However, Ross leaves Chicago for Seattle, after which Hathaway finds that she is pregnant with twins.

### **Excerpt**

(From ER 4, Episode 21, 'Suffer The Little Children')

## a. Story and context

This is a scene of emergency, and a conflict situation between Greene and Ross. Ross's patient, the baby Josh McNeal, is addicted to methadone due to his mother's prolonged addiction. Ross is disappointed to learn that the baby will be eventually returned to his mother. He is determined to conduct a super-intensive detoxification programme at the ER without parental consent, which is against ER policy.

The detoxification takes 12 to 18 hours. Although Ross does not want Carol Hathaway, who is a Chief Nurse and his partner, to be involved in the case, she is determined to help him. When Ross tries to steal esmolol from the shelf for the baby, he tells Greene that the medication is to be used for treating a teenager with arrhythmia. However, Greene finds Ross and Hathaway treating the baby in an examination room of the ER, and the truth comes out. Greene and Weaver are very upset about Ross's irresponsible behaviour. Greene is disappointed to find that he was lied to by Ross, who is his very good friend.

# a. Analysis

This is a very intense emergency situation at the ER, in which Greene accidentally finds that Ross and Hathaway are proceeding with a super-intensive detoxification programme in an examination room of the ER. In the Japanese version, male-associated forms including GASFFs are observed in the utterances of both Greene and Ross. However, different choices made for Greene and Ross contribute to portraying the difference in character images.

**Table 6-19** 

	Speaker	English	Dubbed	Subtitled
1	Greene	What the hell is this?	Nani shiterun da?	Nan da?
			What are you doing?	What is this?
2	Ross	I'll explain this to you.  This boy is my patient.	Hanashi o kiite kure. Ore no kanja da.	Ore no kanja da

				This is my patient.
			Listen to me. This is my patient.	
3	Greene	Ketamine drip?	Ketamin da.	Nan de ketamin o?
		What're you doing	Nan ni tsukatteru?	
		here?	It's kemamine. What are you using it for?	Why are you using ketamine?
4	Ross	We are doing an ultrarapid detox.	Hoo kyuusoku gedoku da.	Choo kyuusoku gedoku o
			It's an ultrarapid detox.	We are doing an ultra rapid detox.
5	Ross	Everything is under control.	Junchoo dakara, shinpai wa iranai.	N/A
			You don't have to worry as it's under control.	
6	Greene	Like hell it is. Is this baby even a registered patient?	Joodan janai!  Nyuuin no tetsuzuki o totta no ka?	Nyuuin tetsuzuki o shita ka?
			No kidding. Have you registered this patient?	Have you resistered this patient?
7	Ross	Mark. He	Maaku, dakara hanashi o	N/A
			Mark, listen	
8	Greene	Is he on the board?	Kinyuu shitano ka?	Kinyuu wa?
			Did you fill out on the board?	Did you fill out the board?

9	Ross	If you just let me	Kore ni wa jijoo ga arun	Hahaoya ga mayaku
		explain this under the circumstance.	da yo.	chuudoku de
			I can explain this.	His mother has a drug
				addiction and
10	Ross	The mother [of this boy	Kono ko no hahaoya ga,	
			[mayaku chuudoku de.	N/A
			The mother of this baby	
			has a drug addiction and	
11	Greene	You don't] have a	Dooi] o enai de yatteru <b>na.</b>	Dooi o eta ka
		consent, do you?		
			You're doing this without a	Did you get a consent?
			consent, aren't you?	
12	Greene	You've got an	Fukai masui o kodomo ni	Masui o kakete sookan?
		intubated kid under deep sedation?	Kakete, sookan suru nante,	
			mucha na koto [o.	Intubation under
				sedation?
			You 've got an intubated	
			kid under deep sedation?	
			You are doing a crazy thing.	
13	Hathaway	Mark!	Maaku!]	N/A
			Mark!	
14	Hathaway	Doug, got it under	Shinpai nai wa yo.	Junchoo na no yo
		control.	Junchoo ni itterun da kara.	
				It's under control.
			You don't have to worry.	
			It's under control.	

15	Greene	We gonna move [this kid.	Sugu ni kanja o [utsusu.	Utsusoo
			We gonna move the patient right now.	Let us move (the patient).
16	Ross	Hear me] out on this	Dakara] hanashi o kike to	Hanashi o kike yo
			itteru <b>daroo.</b>	
				Listen to me.
			That's why I told you to listen to me.	
17	Greene	No, I don't need to.	Kiku hitsuyooo wa nai.	Hitsuyoo nai
			I don't need to listen.	I don't need to.
18	Hathaway	BP 190/100	190 no 100.	N/A
			190/100	
19	Ross	Nipro, 0.3 mcgs per kilo [per minute	Nippuraito o ichikiro atari [0.3miri.	Nippu raido o
			Nipro, 0.3mcg per kilo	
20	Greene	Gina] back him.	Bakku shite.]	N/A
			Back him.	
21	Greene	Let's get to the PICU.	Shooni ICU ni utsusu.	Shoo ni ICU ni
			We 're moving him to the PICU.	Move him to PICU.
22	Ross	We do it right here.	Koko de dekiru yo.	koko de ii
			We can do it here.	It's fine here.
			The same as to here.	

23	Greene	Where is the chart?	Karute wa?	Karute wa?
			Where is the chart?	Where is the chart?
24	Ross	I don't have a chart.	Karute wa nai.	Nai yo
			I don't have a chart.	I don't have.
25	Greene	Is that the way you practice medicine?	Kimi wa kon na chiryoo ga tokui ka.	Hidoi monda
		practice medicine:	tokui ku.	
			Are you good at this kind of	This is terrible.
		,	practice?	
26	Greene	Let's go.	Isoide hakonde.	Isoide
			Hurry up and move him.	Hurry up.
27	Ross	Right here I wrote down everything on	Hitsuyoona koto wa sokoni	Koko ni kaite aru
		the paper.	zenbu kaite aru.	
				I wrote them down
			I have written down	here.
			everything important there	
28	Greene	Oh. That's great.	Kekkoo da na.	Kekkoo da na
			Taishita dokutaa da.	
				That's great.
			That's great. What a good	
			doctor you are <u>.</u>	
29	Ross	Mark, c'mon.	Maaku, awateru <b>na.</b>	N/A
			Mark, don't rush.	
30	Greene	Inga, call the PICU and	Inga, shoo ni ICU ni, juutai	Shooni ICU ni kinkyuu
		tell them there's a	no kanja o tsureteiku to itte.	renraku

		critical patient is		
		coming up.	Inga, tell the PICU that we are taking a critical patient.	Emergency contact to PICU.
31	Inga	I'm gonna need the name.	Namae ga hitsuyooo desu	Namae wa?
			We need the name.	What's the name?
32	Greene	What's the [name?	[Namae wa?	N/A
			What's the name?	
33	Ross	We don't] have to do this.	Mate yo!] Oogesa ni sawagu <b>na.</b>	Oogesa da na
			Wait! We don't have to make it as a big deal.	It's not a big deal.
34	Greene	What 's the baby's name?	Kodomo no namae wa?	Namae wa?
			What is the kid's name?	What is the name?
35	Ross	Josh McNeal.	Yoshiwa makuniiru	Yoshiwa makuniiru
			Josh McNeal.	Josh McNeal.
36	Greene	Baby McNeal. About	Yoshia makuniiru.	seego rokkagetsu
		six months old.	Seego yaku rokkagetsu.	ketamin o tenteki chuu
		Ketamine drip	Ketamin o tenteki chuu	
				About six months old.
			Josh McNeal. About six months old. Under Ketamine drip.	Ketamine drip.
37	Greene	Intubated.	Sookan shiteru.	N/A

			Intubated.	
38	Weaver	What's going on?	Doo shita no?	Nani?
			What is going on?	What?
39	Greene	I found Doug in Exam 4 detoxing this baby.	Dagu ga kossori, kono ko no gedoku chiryoo o shiteta.	Dagu ga gedoku chiryoo o
			Doug was doing detox of this kid behind the curtain.	Doug was doing detox.
40	Weaver	What?	Nani o?	N/A
			What?	
41	Greene	I found him by accident.	Sore o guuzen mitsuketan da.	Guuzen mitsuketa
			I found it by accident.	Found it by accident.
42	Weaver	Carol, did you know about this?	Kyaroru, anata wa shitteta no?	Shitteta no?
			Carol, did you know about this?	Did you know it?
43	Hathaway	I was helping him.	Tetsudatteta no.	Tetsudatta
			I was helping him.	I helped him.
44	Weaver	Helping him?	Tetsudatteta?	Tetsudatta?
			Were you helping him?	
45	Hathaway	The baby was stable [Kerry.	Shoojoo wa [annteeshiteta.	N/A

			The baby was stable.	
46	Weaver	This is a] violation of every ER policy.	Anata no] yattakoto wa, iiaaru no hooshin ni ihan suru kooi yo.	Kore wa ihan kooi yo  This is againt the policy
			What you have done is against the policy of the ER.	of the ER.
47	Hathaway	N/A	Oogesa ne.	N/A
			It's not a big deal.	
48	Inga	Bed's ready in PICU.	Junbi ga dekimashita.	Junbi shita
			It's ready.	It's ready.
49	Weaver	Tell them I 'm bringing him up.	Watashi ga tsurete iku wa.	Watashi ga tsurete ikimasu
			I will bring him up.	I will bring him up.
50	Weaver	Son of a bitch.	Resupireetaa o yooi shite.  Prepare a respirator.	N/A
			Prepare a respirator.	
51	Ross	I'm going, too.	Ore mo issho ni iku.	N/A
			I will come with you.	
52	Weaver	Yeah. Damn right!	Atarimae de sho.	N/A
			Of course you have to.	
53	Weaver	You're gonna explain this to the hospital Administration and	Byooin no kanri iinkai to rijikai de, mooshi hiraki o	Kanriiinkai to rijikai de mooshihiraki o shinasai
			145	

		the Executive	shitemorau kara, kakugo	Explain to the
		Committee!	shite inasai!	administration and
				executive committee.
			I want you to explain to the	
			hospital administration and	
			executive committee.	
			B	
			Be prepared for it!	
54	Weaver	Let's go!	Sa, iku wa yo!	Isoide
			Let's go!	Hurry up.
				That y ap
55	Greene	You lied to me Doug.	<b>Kimi</b> wa <b>boku</b> ni uso o	<b>Kimi</b> wa <b>boku</b> ni uso o
		Vou looked mo right in	tsuita. Kono sekinin wa	tsuita
		You looked me right in the face and lied to	omoi <b>zo.</b>	
		me.		You lied to me.
			You lied to me. This is your	
			big fault.	

In line 11, Greene is very upset to learn that Ross and Hathaway have proceeded in secret and without consent. In the dubbed version, the male-associated form na is used. One of the functions of na is allowing the speaker to make confirmation with the listener; in this case equivalent to the question tag of the original version, 'do you?' The ending of the subtitled version uses the plain form of the verb (eta is a plain form of the verb, past tense eru), with the combination of SFF ka (question marker). Although the SFFs ka is not categorised as a GASFF, the combination of plain form of the verb and ka is more likely to be used by male speakers than female speakers.

In line 20, Greene tells nurse Gina to back the baby. Although the English version is imperative, 'Gina, back him', *te*-form is used in the dubbed version, which is a gender-neutral form and is not as strong as the imperative form. In this line, although the English version is not marked to show any particular male-associated language, verb-imperative forms are categorised as male-associated forms in Japanese, and are often used by other characters in a similar situation in other episodes to project power and masculinity. However, choosing the gender neutral *te*-form for Greene's dialogue supports the image of Greene as not very masculine or assertive but a soft and gentle person.

In line 30, Mark tells Inga to call the Paediatric Intensive Care Unit (PICU). This is an urgent emergency situation. Although the imperative is used for the English version, the *te*-form is chosen for the dubbed version. In the subtitled version, nominalisation is chosen to make an order, not the imperative form.

In the last scene of this episode, in line 55, Greene accuses Ross of lying to him. As explained earlier, Ross told Greene that he was using emerol to treat a teenager and did not tell Greene about the detoxification. As a colleague and close friend of Ross, Greene felt betrayed.

As discussed earlier, personal pronouns are likely to be omitted in Japanese discourse. However, in this case, the two pronouns *kimi* (you) and *boku* (I/me) are clearly marked to emphasise the seriousness of the incident, which implies that the problem is not only at a professional level but may also affect the close friendship between Greene and Ross. The dubbed version concludes with the male-associated SFF *zo*, which is used when male speakers convey the information to the hearer with attention, and which is likely to portray strong assertion. However, with the combination of *kimi* and *boku*, this line supports the soft image of Greene. If those pronouns were replaced with *omae* (you) and *ore* (I/me), the line would portray a masculine and rough character image.

In Ross's dialogue, some male SFF forms are observed as well. In line 2, *kure* is chosen in the dubbed version. As explained earlier, *kure* is a casual form of *kureru*. *Kureru* can be used as an auxiliary verb with the *te*- form of the verb. The function of *kureru* and *kure* is a request (e.g. *Kaite kureru*? [Can you write it for me?]). However, the use of *kure* is as strong as an imperative, and it is more likely to be used by male speakers than female speakers. The use of *kure* may have been chosen to support to the masculine image of Ross.

In line 16, Ross wishes to explain the procedure to Greene. In the dubbed version, *daroo* is chosen, which is more assertive than the original English, 'I'll explain this to you.' *Daroo* is a form of assertion and likely to be used by male speakers. Ross tries to persuade Greene that he should listen to Ross.

In line 29, the negative imperative form of *awateru* (rush), *awateru na*, is used in the dubbed version. As mentioned earlier, the imperative form is one of the characteristics of male-associated language. In addition, in line 51, the first person pronoun *ore* is chosen. As explained earlier, *boku* is chosen for Greene even though this is a conflict situation. *Ore* is a male-associated form, although first- and second-person pronouns tend to be omitted in Japanese discourse. Some male-associated forms are chosen in the Japanese version for both Greene and

Ross, including male-associated SFFs. It is interesting to observe that no imperative forms were chosen for Greene, and only a few male-associated SFFs were chosen for Ross.

In terms of the first person pronouns, *ore* is chosen for Ross, while *boku* is chosen for Greene. While *ore* is generally used for the interactions between spearkers of equal or from higher to lower status, *boku* can be used in an utterance from a speaker from the lower position to one in a higher position. Furthermore, people tend to choose the first-person pronouns depending on the context (e.g. *Ore* for casual context, and *boku* or gender-neutral form, *watashi*, for more formal context). Therefore, *boku* is used for Ross in other contexts in the series. However, in this scene, *ore* is consistently chosen for Ross and *boku* is chosen for Greene, which contributes to the different images of the two characters: Ross is portrayed with a more masculine image than Greene.

### Excerpt 2

(From ER Season 5, Episode 15, 'The Storm - Part Two')

# a. Story and context

This is the last appearance of Douglas Ross in Chicago, although the character appears twice later in the scene in Seattle. Ross helped Ricky's mother to relieve the pain of her son who is in terminally ill. He shows her how to give a lethal dose of medication, which he stole from a home Patient Controlled Analgesia (PCA) machine. After the case is exposed, Ross takes full responsibility and resigns from County General Hospital.

He finds a job in Seattle and decides to move there. He asks Hathaway to come with him; however, she does not accept. Instead, she pleads with Ross to stay in Chicago to be with her. However, Ross determines to leave Chicago.

This scene is shortly before Ross leaves Chicago. Ross and Greene are drinking beer in the cold winter in Chicago. This would be a particularly memorable scene for the *ER* audience, since it is the last scene where both Ross and Green appear. Mark Greene will die of brain cancer later in the series.

#### **Table 6-20**

	Speaker	English	Dubbed	Subtitled
1	Greene	Now this is living.	Kore zo jinsee da <b>na.</b>	N/A
			This is living.	
2	Greene	Brown–bagging it on the lake in February.	Mafuyu ni, kohan de biiru o nomu nante.	Mafuyu ni kohan de biiru ka
			Drinking beer on the lake in winter.	Beer on the lake in winter.
3	Ross	If this isn't the coldest place on earth, I don't know what is.	Koko wa chikyuujoo de, ichiban samuin ja nai ka.	Koko wa sekai de ichiban samui zo
			This place may be the coldest place on earth.	This is the coldest place on earth.
4	Greene	It's your idea to come out here.	Jibun de tsuretekite oite.	Tsuretekite oite
			You yourself took me here.	You took me here.
5	Ross	Just trying to remind myself why I'm so happy to get out of	Shikago no ichiban tsurai koto o, saigo ni taiken shite okitakattan da.	Shikago no ii omoide ni naru
		here.	I wanted to experience the hardest thing in Chicago at the end.	This will become a good memory of Chicago.
6	Greene	You're not gonna become a Trailblazers fan, are you?	Buruzu kara, toreru bureezaa ni norikaeru no ka?	Basuke mo norikaeru no ka?
			Are you gonna switch from Chicago Bulls to Trailblazers?	Are you gonna switch basketball teams (from Bulls)?
7	Ross	Maybe(.) Or the Sonics.	Tabun <b>na</b> (.) Sore tomo sonikkusu ka.	Tabun sonikkusu ni

			Maybe. Or, the Sonics.	Maybe to the Sonics.
8	Greene	Oh. That's just wrong.	lyaa, yurusenai yo.	Yurusenai
			That's wrong.	That's wrong.
9	Greene	Seehawks?	Shiihookusu wa?	Shiihookusu wa?
			How about Seehawks?	How about Seehawks?
10	Ross	I don't know. Maybe.	Futtobooru ka.	Futtobooru?
			Football.	Football?
11	Greene	Doesn't it rain like 300 days a year out there?	Mukoo wa ichinen no uchi, sanbyaku nichi ame da tte.	Mukoo wa ame ga ooi yo
			I hear there are 300 rainy days during the year there.	Lots of rain there.
12	Ross	Save me a lot of money watering my lawn.	Shibafu ni mizu o makanakute sumu yo.	Shibafu no tame ni ii
			I don't have to water my lawn.	Good for lawn.
13	Greene	You don't have a lawn.	Shibafu nante aru no ka?	Nai kuse ni
			You don't have lawn, do you?	I know you don't have one.
14	((Green and Ross smile and drink beer))			
15	Ross	Play some hoops?	Basuke suru ka?	Basuke o
			Want to play basketball?	Basketball?

16	Greene	Sure.	li yo.	li yo
			Ok.	Ok.
17	Ross	Come on.	Ikoo.	N/A
			Let's go.	
18	Ross	You know what I'll miss.	Hitotsu zannen nano wa.	Zanen da yo
			There is one thing I miss.	I am sorry.
19	Greene	What?	Nan da?	N/A
			What is it?	
20	Ross	Whipping your ass on the court.	Basuke de kasegenaku naru koto da.	kasegenaku naru
		the court.	mara koto da.	
			I won't be able to earn by	
			winning basketball.	
21	Greene	Oh, right.	Ha? Yoku iu yo.	Yoku iu yo
			I can't believe you're saying that.	Can't believe you're saying that.
22	Ross	I don't think I ever lost	Omae ni maketa koto wa	Renshoo da ne
		a game.	nai <b>zo.</b>	
				I always won.
			I'm never beaten by you.	
23	Greene	In your dreams.	Katta koto wa <b>daroo.</b>	Chigau ne
			No. You never win.	That's not true.

24	Ross	Play for a buck a point?	Ja, ichi pointo ichi doru da.	Ichi point ichi doru de
			Ok. One dollar for one point.	One dollar for one point.
25	Green	Hell, no.	Iya da ne.	Iya da
			Not a chance.	Not a chance.
26	Ross	Scared?	Fun! Kowai no ka?	Kowai ka
			Hmph. Are you scared?	Are you scared?
27	Greene	No. You cheat.	Omae wa zuru suru kara.	Zuru suru kara.
			Because you cheat.	Because you cheat.
28	Ross	I do not.	Shinai yo.	Shinai ne.
			I do not.	I do not.
29	Greene	You do cheat.	Itumo da yo.	Suru yo.
			Always.	You do.
30	Ross	I do not.	Shinai ne.	Shinai.
			I do not.	I do not.
31	Greene	You're a cheater.	Zuru bakkari da.	Zuru bakkari.
			You always cheat.	You always cheat.
32	((Ross laughs))			

There are a few male-associated SFFs and male-associated personal pronouns used in this scene, which contribute to show the final scene of camaraderie and solidarity between Ross and Greene. The plain form (casual speech style) is chosen in the Japanese version, which is consistent with the fact that it is a casual conversation between two male friends.

In Ross's utterance, a few female-associated forms were chosen in the Japanese version. In line 3, the male-associated SFF zo is chosen in the subtitled version. Since zo has a function of strong assertion, the English version ('If this is the coldest place on earth, I don't know what is') as well as Japanese dubbed version ('Koko wa chikyuu de ichiban samuin janai ka' ['This place would probably be the coldest place on earth.']) pragmatically shows the intention to convey these strong messages.

In line 8, the male-associated SFF *na* is chosen for the dubbed version. *Na* has a function of confirmation to the listener. This does not have the same semantic meaning as either the original version or the subtitled version. Hence, there is a possibility that this form was included simply for lip synchronisation. However, the use of the form supports the attitude of Ross, showing his friendship and rapport toward Greene.

In line 18, Ross begins to talk about their shared memories. They often played basketball together at break time in the ER. Ross insists that he always won, and Greene denies it jokingly. In line 22, *zo* is chosen for the dubbed version. The combination of the male-associated first-person pronoun *omae* with *zo* contributes to the masculine aspect of Ross, while supporting the solidarity between Ross and Greene.

Most of the SFFs chosen for Greene are gender-neutral forms, including *yo* and *ka*. However, in line 1, male-associated SFF *na* is chosen. In addition, in line 8, *daroo* is chosen. As mentioned earlier, *daroo* is more likely to be used by male speakers than female speakers. In line 27, the second person pronoun *omae* is chosen. Over the whole series, *kimi* is frequently chosen for Greene's dialogue, and few *omae* are observed. Greene appeared as the Chief Resident in Season 1, and is promoted to Senior Attending in Season 2. Although he occupies a higher position in the hierarchy of the hospital than many of other characters of *ER*, *omae* is less likely to be chosen for Greene's dialogue. Greene always addresses Ross by his first name, or *kimi*. Even during the conflict situation when Greene shows anger toward Ross in Excerpt 1, *kimi* is chosen to support the soft image of the character.

Once again, it is very interesting to observe the choice of *omae* in this particular exchange. It shows the real friendship and bond that has developed between Greene and Ross over the years.

They are not just good friends, but they are 'comrades'. From Brown and Levinson (1987, p. 107), the use of 'in-group identity markers' such as *omae* are considered to be a positive politeness strategy. The friends have worked together through all their battles at the ER. They have overcome work-related challenges and difficulties as well as personal disagreements and problems. As explained earlier, the relationship of *ore* and *omae* signifies the sign of true friendship between two males, traditionally, in Japan. Therefore, in the very final scene of two 'mates' together, it is natural for Greene to address Ross with *omae* to show solidarity, and thus appears to be considered an appropriate choice by the translator.

### **Case 3: Dave Malucci**

### Who is (Dave) Malucci?

Dave Malucci appears from Season 6 as a second-year resident, and he leaves in Season 8. He is portrayed as a friendly but reckless and irresponsible doctor who often breaks the protocol of the hospital and has conflict with other staff. His ability as a doctor is often questioned by other staff. He accepts the diagnoses of nurses, and signs prescriptions without personally examining the patients. In Season 6, he allows a medical student, Abby Lockhart, to discharge his patient without his personally examining her. Later, the patient's condition worsens and she nearly dies. However, sometimes he shows compassion toward his patients. Malucci does not get along with Weaver, and he is fired at Season 8. The character of Malucci is used for comic relief in many scenes.

### Excerpt 1

(From ER Season 7, Episode 13, 'Thy Will Be Done')

### a. Story and context

In this episode, Greene has been experiencing some problem in handling patients, since his treatment for a brain tumour is affecting his attitude, and Weaver considers that he is not fit enough to work at the ER. He adopts aggressive approaches to treating patients. Greene asks Malucci about his patient in the examination room, and as his superior, Greene tries to give some advice to Malucci. In this scene, Greene is an attending physician and Malucci is a resident lower in position than Greene in the hospital hiearhcy.

**Table 6-21** 

	Speaker	English	Dubbed	Subtitled
1	Greene	Malucci, what do you have in Exam four?	Shinsatsu no yon goo wa nani?	Shinsatsu yongoo wa?
			What do you have in Exam four?	How about Exam four?
2	Malucci	Ah, lady with bronchitis. Sending her out with amoxicillin.	Aa, kikanshien no <b>obasan.</b> Amokishishirin o dashite taiin <b>da.</b>	Kikanshien <b>da</b> amokishishirin o
				She has bronchitis.
			Ah, a middled aged woman with bronchitis. She will be discharged with amoxicillin	I will give her amoxicillin.
3	Greene	Bronchitis?	Kikanshien?	kikanshien?
			Bronchitis?	Bronchitis?
4	Malucci	Productive cough myalgias, arthralgias.	Tan ni seki, kinnikutsuu, kansetsutsuu <b>da.</b>	Tan ni seki kansetsutsuu
				Sputum, cough,
			Wet cough, myalgias and arthralgias.	arthralgias.
5	Greene	Sounds like the flu.	Tada no kaze da.	Kaze da
			It's just a cold.	It's a cold.
6	Malucci	She's pretty high- maintenance. She wants antibiotics.	Kurushisoo de, koosee busshitsu o <b>kure tte yo.</b>	Koosee busshitsu o kurette
			She is suffering and asks me for antibiotics.	She asked me for antibiogics.

7	Greene	Antibiotics are not indicated.	Kooseebusshitsu wa hitsuyoo nai.	Hitsuyoo nai
			There is no need for	She doesn't need it.
			antibiotics.	
8	Malucci	I told her that.	Ittan dakedo <b>sa,</b>	Urusakute
		But she still wants	hoshigarun <b>da yo.</b>	
		some.		She is demanding.
			I told her that but, she still wants some.	
9	Greene	You need to educate her about antibiotic resistance.	Ja, taiseekin no dete kuru koto o oshiete yarinasai.	Taiseekin o oshienasai
				Teach her about
			You have to teach her about antibiotic resistance.	antibiotic resistance.
10	Malucci	Do I have to?	Honto ni?	Honto?
			Really?	Really?
11	Greene	That'll break the cycle.	Kuse o tachikire.	Warui shuukan da
			Break the habit.	That's a bad habit.
12	Malucci	It's easier to write a	Shohoosen o kakuhoo ga	Mendoo <b>da yo</b>
		prescription.	kantan <b>da.</b>	
				It's troublesome.
			It's easier to write a prescription.	
13	Greene	If you feed the bears,	Esa o yattara, mata morai ni kuru yo.	Mata morai ni kuru
		they'll come back for	ili kulu yo.	
		more.		She will come back to
			If you feed her, she will come back for more.	ask for it again.

#### b. Analysis

This example shows some of the male-associated forms that support the casual and easy-going character image of Malucci.

As a resident, Malucci is lower than Greene in the hospital hierarchy. However, it is notable that the copula da is chosen for most of Malucci's dialogue. da is the plain form of the copula, and used as a casual speech style, which is less likely to be used by a speaker of lower status than the listener, in Japanese society. The use of this form supports Malucci's characterisation as a casual and laid-back person who ignores the hospital hierarchy. In line two, the word obasan is chosen in the dubbed version for the translation of 'lady'. Obasan is not a respectful form to address a middle-aged woman, and is not equivalent to 'lady' in this context. The other option for this translation would be 'kanja-san' (patient with the honorific -san). However, the use of this word works effectively in comic relief to support the informal and relaxed image of Malucci. The translator may have deliberately made this choice to portray the character of Malucci, although there is also a possibility that choice was made for lip synchronisation.

In line 6, in the dubbed version, *kure tte yo* is chosen. As mentioned earlier, *kure* is a casual form of *kureru*, which can be used as a request by male speakers, while *tte* is a casual form in indirect speech. Here, Malucci is reporting to Greene what the patient said. With the combination of *tte* and the SFF *yo*, this utterance sounds casual. This combination of forms tends to be used by male speakers in equal status, or from a speaker of higher status than the listener. Therefore, it would be rarely used in a relationship between Greene, who is in a higher status position, and Malucci, who is lower in status than Greene, if this were in the Japanese hospital hierarchy. In line 8, the male-associated SFF *sa* is chosen for the dubbed version. *Sa* is used as an explanation when the information has been acknowledged by and convinces the speaker. In this context, Malucci is explaining to Greene that Malucci has already told the patient that there is no need of antibiotics for her. Nakamura (2013) states that *sa* supports the stereotypical image of non-Japanese men who are friendly and laid-back. This would be possibly applied to Malucci, who does not take the institutional hierarchy into account very seriously.

## Excerpt 2

(From ER Season 7, Episode 11, 'Rock, Paper, Scissors')

# a. Story and context

A Catholic bishop, Bishop Stewart, fell and is conveyed by an ambulance to the ER. Dr Luka Kovac is in charge of him. Kovac is Catholic, but since he lost his family in the war in Croatia, his faith has lapsed. Therefore, he tries to avoid discussing religion and preserves distance from the Bishop. Malucci, on the other hand, who is also a Catholic and is very open about his religious views, enjoys talking with the Bishop. In this scene, Bishop Stewart, Malucci and Kovac appear. However, there is no utterance by Kovac.

**Table 6-14** 

	Speaker	English	Dubbed	Subtitled
1	Malucci	And the whole celibacy thing was always the sticking point for me, though.	Kinyoku tte kairitsu ga,  ore ni wa dooshitemo  nattoku dekinakute.  I was not convinced with	Kinyoku wa nattoku de kinai <b>na</b> I will not be convinced with the idea of abstinence.
2	Bishop	Yeah, me too. But I got over it.	the idea of abstinence.  Watashi mo da.  Demo norikoeta yo.	Watashi wa norikoeta
			Me, too. But I could overcome it.	I could overcome it.
3	Malucci	Yeah, well	Hee sugee <b>na</b> .  Oh, you are great.	N/A
4	(Kovac comes into the room.)			
5	Malucci	Hey, Dr Kovac, did know that St. Peter was married?	Yoo! See petero ga kekkon shiteta koto, shitteru?	Kekkon shiteta seejin shitteru?
			Hey, did you know that St Peter was married?	Do you know the saint who was married?

6	((Silence))			
7	Malucci	Anyway, should get going.	Sate, sorosoro ikanai to.	<b>Ore</b> wa korede
			Anyway, I should get going.	I should get going.
8	Malucci	It was nice talking to you, Bishop Stewart.	Hanashi ga kikete omoshirokatta <b>su</b> yo.	Hanasete yokatta
			It was nice talking to you.	It was nice talking to you.
9	Bishop	Same here.	Doo mo.	N/A
			Thanks.	

#### **b.** Analysis

This is a short example, but includes some male-associated forms chosen for Malucci's dialogue that portray his friendly character image. Malucci is not concerned about authority or status, but shows solidarity with the Bishop and talks to him in a friendly way. As a Catholic, he claims a common ground with the Bishop, which Brown and Levinson (1978, 1987) describe as a 'positive politeness strategy'. In contrast, Kovac (who is also present during this scene) avoids talking about religion. In line 5, Malucci asks whether Kovac knew that St. Peter was married, and Kovach ignores him. Here, Malucci uses a casual male-associated casual greeting, *yoo*, to Kovac, which is equivalent to 'hey' in the English version.

In this scene, it is possible to see the relationship beween Malucci and the Bishop in two different ways. One is with respect to the hierarchy of the Catholic Church, where the Bishop is higher in the status than Malucci as a young Catholic. The other is with respect to the hospital setting, where Malucci is the doctor and the Bishop is the patient.

In line 1, in the dubbed version, the male-associated first-person pronoun *ore* is chosen, which contributes to the casual image of Malucci. In the subtitled version, the male-associated SFF *na* is chosen. This *na* is used to emphasise his opinion that he is not convinced about abstinence. In line 3, *sugee* and another male-associated SFF, *na*, are chosen. This *na* has an exclamatory function, while *sugee* is a casual form of *sugo*i (great). It is likely to be used by male speakers

and shows solidarity between them. Here, Malucci is speaking in an admiring tone because the bishop has maintained his abstinence. In line 7 in the subtitled version, the choice of first-person pronoun *or*e contributes to the casual character of Malucci.

These Japanese male-associated forms are usually used by a speaker of equal or higher status than the listener. They are less likely to be used from the doctor to the patient. In this context, the bishop is significantly older than Malucci. Furthermore, the bishop is an authority figure for Malucci with his Catholic background. Therefore, in a real situation, even considering that Maluccin is a doctor and the Bishop is the patient, a young Catholic doctor such as Malucci would not choose male-associated language to talk to the bishop; and it can be argued that these linguistic elements are used as dramatisation (the use of certain devices to heighten the interest of excitement in a scene for dramatic purpose) of the character.

In line 8 su is chosen. Su is a shorten form of the polite form of copula desu. The use of polite form desu as a polite speech style is likely to show both deference and distance between the interlocutors. According to Nakamura (2013), su can be categorised as 'shin- otoko kotoba' (new male language), and explains the association of the use of su (shorten form of desu) and the distance between interlocutors. According to Nakamura (2013) by using su, the speaker may avoid the distance between the speaker and hearer. In this context, it is a plausible choice for the character Malucci, whose approach to the Bishop is to maintain a degree of respect and deference (hence the use of polite form) while at the same time minimising distanc, which is consistent with the shortened su form of desu. In the English version, Malucci shows deference in his final utterance ('It was nice to talk to you, Bishop Stewart.') through the use of his patient's title and surname.

### 6.3 Summary and discussion

### 6.3.1 Female-associated language and character image

As explained at the beginning of this chapter, female-associated forms have been chosen for many female characters in various contexts in Japanese translations of this series. Since these forms are used by many female characters in various contexts, they could be said to be almost the 'default' form in the series. However, some of the language choices illustrate remarkable differences in terms of character image.

There are cases where female forms of GASFF have been used effectively to project a feminine image for characters: for instance, in the case of Susan Lewis, the use of various female-

associated forms are effectively used to portray a soft and feminine character image. In the case of Lewis, the female-associated SFFs, including *kashira*, which contributes to the feminine image of the character as 'role-language', is used.

In contrast, the speech of Chloe and Fronczak includes more gender-neutral forms and fewer female forms, contributing to a rougher image. In both cases, role-language effects are apparent. The language chosen for Chloe, such as *yagatte*, and *wameeten* chosen for Fronczak, contribute to a rough image for each speaker. Since these language forms are less likely to be used by female speakers in modern Japanese society, Japanese speakers would associate the language with particular character images. Although 'wameeten' is not categorised as 'role-language' in Kinsui (2014), it is considered as a 'role-language effect'.

As discussed previously, gender markers can be used effectively to portray character image and to make the dialogue sound natural in Japanese. However, since these markers do not exist in English, it is questionable whether the Japanese versions support the intention of the original English version, and there is a possibility of domestication (Venuti, 1995). This issue will be further investigated during the second phase of this study.

In some cases, female forms do not support the original character image. In the case of Hicks, various female forms are used in the Japanese versions. These do not support the powerful image of Hicks, who ranks higher than residents in the hospital hierarchy. Selecting a language in professional context for Japanese women in power is a complex issue. It has been suggested that Japanese women in power tend to face dilemmas in choosing a language, because there is still a social expectation that they use polite and soft language, which tends to be less powerful in a professional context (e.g. Takano, 2005; Smith, 1992). However, it is unrealistic in Japanese society that a surgeon in a high-ranking position would so frequently use female forms. As noted in Chapter 4, Japanese women and men in both the real world and in drama have started to make choices in language to portray their self image. This can be translated as 'impression management', on the basis of Goffman (1959). Therefore, when they use femaleassociated forms, they use them as a communication strategy. There is no comparative academic study of the gender-associated language used in Japanese and American dramas within a medical context. However, in the present author's experience, in Japanese medical dramas with a similar context to ER, such as kyuukyuu byootoo 24 ji (ER at 24 hours), female doctors in high-ranking positions are less likely to use female-associated forms for professional interactions.

As mentioned in Chapter 4, the studies of Mizumoto (2005, 2006) reveal that the script writers of Japanese TV dramas tend to ignore contemporary trends toward neutralisation of the Japanese language, by continuing to gender-associated forms. For this reason, it might be expected that more female forms are used in *ER* than in real-life Japanese discourse. Since there are no equivalent female forms in English, there might be cases where the character image portrayed in the original version is not supported in the Japanese versions.

In the case of Alyssa, various female-associated SFFs were chosen for the Japanese version. However, this language does not support the image of Alyssa, who is facing a problem with her parents' traditional heterosexual notion of gender. In particular, the female form kashira is used, and as mentioned earlier it portrays a feminine image of the character as 'role-language'. In addition, it strongly supports a heterosexual female image of the character. The Japanese female-associated forms are based on the notion of binary gender categorisation (Nakamura, 2013). Therefore, the use of female-associated forms by Alyssa is questionable, because it may suggest that she accepts the notion of binary gender categorisation. This is an interesting case for investigating the gap in terms of gender identity between the speakers in ER and gender notions in Japanese society. The study by Maree (2007) show that, although the gender is not binary and people choose language depending on their context and identity, homosexual people living in Japanese society, which is based on Japanese binary heterosexual structure, are forced to choose language based on the binary gender notion. They adjust their language without losing their homosexual identity, by using negotiative strategies. Hence, if Alyssa were a real Japanese speaker, it is likely that she would try to 'negotiate' her speech by choosing from genderassociated forms and gender-neutral forms, rather than frequently choosing to use femaleassociated forms.

### 6.3.2 Male-associated language and character image

As mentioned earlier, although female-associated forms are observed in various general contexts by many characters of this drama, male-associated language is observed in particular contexts, and is used to project particular character images. In addition, the forms contribute to showing solidarity between the characters. Since male-associated forms are used with the plain form of verbs, they are used by speakers of equal or higher status than listeners in the hospital hierarchy. In most cases, they are used as a communicative strategy, and contribute to the character image.

In the case of Peter Benton, male-associated language has established Benton as a confident, assertive and arrogant character. In the scene where he accuses resident Gant, who is under his supervision, of negligence in not monitoring a patient, strong forceful language, including the male-associated form *zo* and imperative forms, have been chosen to project the character of Benton, supporting his masculine and arrogant character. In the next episode of the series, Gant was killed in a train accident. As the accident was a suspected suicide, it may have been the director's intention to illustrate the pressure from Benton to Gant in this scene. This language choice supports a powerful and arrogant masculine image for Benton.

The first example of Mark Greene and Douglas Ross is in the context of conflict and emergency. In the scene, Greene shows anger toward Ross, who broke the hospital protocol and proceeded with a super-intensive detoxification for a baby patient. Although the male-associated SFF *na* is chosen twice for Greene, it is interesting to observe that the male-associated SFF *zo* is not used. This gender latter marker shows strong power and masculinity, and is categorised as role-language (Kinsui, 2014), which is often observed in similar contexts by other characters in the series. It is considered that avoiding these strong markers contributes to the soft image of Greene. As mentioned earlier, the issue of power and hierarchy will be discussed further in the next chapter. Although Greene is in a higher position than other doctors within the hospital hierarchy, not many imperative forms are observed for Greene thorough the series.

In the second example of Greene and Ross, GASFFs and male-associated personal pronouns were chosen for the dialogue of both Ross and Greene. The use of these forms in this scene illustrates solidarity and a positive politeness strategy. In particular, the use of *omae* by Greene show the real friendship between the two men during their last encounter. In the case of Ross, some male-associated SFFs were observed in both the examples, which illustrate determination, but sometimes show a tender aspect of the character. The first-person pronoun *ore* is chosen consistently for Ross throughout the series. On the contrary, *boku* is chosen for Greene throughout the series. Kinsui (2014) categorises both forms as role-language. According to Kinsui (2014), the use of *ore* portrays a strong powerful male character. On the other hand, the use of *boku* illustrates a soft and less-masculine character image. Hence, it is interesting to see the translators make this contrast of choice between Greene and Ross.

In the case of character Malucci, the language chosen for the Japanese version is unrealistically informal and therefore contributes to comic relief in the drama. As mentioned above, male-associated forms are normally used by speakers of equal or higher status. However, in Japanese versions of Malucci's speech, these rules are ignored when he uses male forms to Greene, who

is higher in the hospital hierarchy, which is unrealistic and unacceptable in Japanese society and therefore comical. In the second example, when Malucci talks to the Bishop as a Catholic, he shares common ground with him (positive politeness strategy). Although his language is very informal, it can be translated as showing solidarity or respect toward the Bishop. The translation of the English, 'It was nice to see you, Bishop Stewart', uses *su* as 'new Japanese male language' (Nakamura, 2013), which shows solidarity and shortens the distance between Malucci and the Bishop.

### 6.3.3 Character equivalence

As explained in Chapter 4, gender stereotypes in media contribute to gender bias in society (Kamise, 2006). The literature shows that, in general, characters in English–language primetime TV dramas are portrayed according to traditional binary gender stereotypes (see Table 4.1).

As explained earlier, one of the aims of this study is to investigate how the characters in the original English-language version are portrayed differently in the dubbed and subtitled translations. In general, AVT is expected to support the type of character that the audience perceives. However, due to restrictions in the translation process of AVT, it can be challenging to achieve 'character equivalence' (Petrucci, 2012). The first phase of this study shows a different result in obtaining 'character equivalence' between male characters and female characters.

In terms of male characters, the male-associated forms are chosen as communicative strategies, and therefore, they are likely to be effectively utilised in portraying character image or to show solidarity between the characters. This supports the view of Matsumoto (2002, 2007) and SturtzSreetharan (2006a, 2006b), to see Japanese gender forms as communicative strategies, which was explained in Chapter 4. As discussed in that chapter, these communicative strategies by male characters can be seen as 'impression management', since they use communicative strategies to show particular impressions or to show solidarity. Furthermore, role-language (Kinsui, 2003, 2007, 2014) and the 'role-language effect' have been observed in the dialogue of male characters, which contributes effectively in projecting an image of these characters.

In the case of female characters, female-associated SFFs are used almost as 'default', and they are used by many female characters in various contexts. There are also some cases where they are used to contribute to achieve 'character equivalence' of feminine character image, such as Lewis. Role-language and the role-language effect have been observed for the language of female characters as well. However, in some cases, the language choice does not support some

aspects of the character image. The reason for this problem can be interpreted with the reference to the notion of a 'gender filter'. As explained in Chapter 4, some Japanese scholars consider that the text can be influenced by stereotypical images of gender if it is reproduced via certain views. This may be different from the language currently used by people living in Japanese society, so that the progressive gender-neutralisation of Japanese language has been ignored. These views are described as 'filters' or 'gender filters' (Mizumoto, 2005, 2006), and are based on the script writer's or translator's perception of gender. There is a possibility that the choice made for the language of female characters by the translator of *ER* is affected by such a 'gender filter', based on a perception of the stereotypical Japanese binary gender image, so that more of the female SFFs tend to be used than in the current language used by Japanese female speakers.

Some female characters in dramas have different images than the Japanese stereotypical female image. Hence, the language does not support non-traditional female characters such as Hicks and Alyssa. Nevertheless, there are characters such as Chloe and Fronczak who have rough and assertive images that are not Japanese stereotypical binary gender images either. In these cases, few female-associated SFFs are chosen, and 'character equivalence' is considered to be achieved for these characters.

Furthermore, by applying the notion of 'language resource' (Nakamura, 2007), which was explained in Chapter 4, it may be possible to say that, although GASFFs are disappearing in Japanese society, the translator of *ER* may have made choices within the 'language resource', and those forms have been recycled in *ER*. If the language resource is based on traditional binary gender categorisation, the translator may have difficulties making choices. As a result, in some cases, the language does not support the character image, and therefore 'character equivalent' is not achieved.

To mitigate any subjectivity in discussing the above issues using only text analysis in the first phase of this study, 'character equivalence' will be further investigated in the second phase of the study.

# **6.4 Chapter summary**

This chapter has discussed the findings of the text analysis from the first phase of this study. The particular focus of this chapter was the issue of gender-associated language and character image. The chapter began with the reason for discussing female-associated language and male associated-language separately. The chapter then discussed the findings and analyses of female-

associated language and male-associated language. A summary and discussion of gender-associated language and character image then followed. Chapter 7 will further discuss the findings of text-analysis relating to the issues of hierarchy and power.

# CHAPTER 7: FINDINGS FROM THE FIRST PHASE OF THE STUDY: PART 2

#### 7.1 Introduction

Continuing from Chapter 6, this chapter supports the findings of the first phase of the study through textual analysis. It largely focuses on the issues of power and distance, displayed by pragmatic choices, including the use of address forms and second person pronouns. Section 7.2.1 provides reasoning for the organisation of the analysis in this chapter. Section 7.2.2 analyses the power display within the hospital hierarchy, followed by a consideration of the cases of outsider to insider. Both sections include the case of non-conflict and conflict situations. Section 7. 3 summarises and discusses the issues of address forms, including second person pronouns, in terms of power and hierarchy; followed by the chapter summary in Section 7.4. As noted in Chapter 3, Goffman's (1981) 'participation framework', in particular the notion of 'footing', is employed as an analytical tool in this chapter.

## 7.2 Findings and analysis

#### 7.2.1 Within the hierarchy and from outsider to insider

The findings of the first phase of the study show that choices of address forms and second person pronouns are determined by factors including distance and power between the speakers and the context of the utterance. Hence, the analysis of this chapter is divided into two sections based on this categorisation. The following, Section 7.2.2, discusses the findings for within the hospital hierarchy; and Section 7.2.3 addresses the results for within the setting of outsider of the hospital (e.g. patients or patients' family) and insider of the hospital (hospital staff). Both are very common settings in *ER*. The distinction between the context of the hierarchy of the hospital and the context of the outsider and insider was made because the power relationship within the hospital is likely to be determined by the hierarchy. Conversely, interactions between the outsider and insider are less clear-cut in the power relationship. Each section discusses the basis of two different settings: 'conflict' and 'non-conflict' situations. In 'non-conflict' settings, sociocultural norms with regard to pragmatics are observed. In conflict settings, face threatening utterances tend to be observed and therefore face-saving strategies are expected to be used by the characters.

## 7.2.2. Within the hospital hierarchy

#### 7.2.2.1 Non-conflict situations

#### 1. Doctor-to-doctor

#### 1) Doctor or sensei

Within the hospital hierarchy of *ER*, the term 'doctor' and' doctor + surname' are commonly used in the English version. In the Japanese dubbed and subtitled versions, doctor is frequently translated to *sensei*. As explained in Chapter 3, the term *sensei* is used to address teachers and doctors to show deference, which is considered to be a negative politeness strategy, on the basis of Brown and Levinson (1978, 1987). In the English version, doctor and doctor + surname are used regardless of the hierarchy within the institutional setting of *ER*. However, *sensei* is only used from lower to higher in the hierarchy in Japanese versions. The example below illustrates the hierarchy between Dr Carter and Dr Greene in the Japanese versions.

# Excerpt 1

(From ER Season 8, Episode 18, 'Orion in the Sky')

## a. Story and context

Although Greene is suffering from a terminal brain tumour, he has continued to work at the ER. His colleagues express concern over his condition and try to help as much as possible so that his workload does not exceed his capacity. However, Greene tries to do everything himself. In this scene, Carter tries to treat a drug-addicted patient but Greene does not accept the offer of help and continues to treat patients.

**Table 7-1** 

	Speaker	English	Dubbed	Subtitled
1	Carter	Hey, <b>Dr Greene</b> , I got this.	<b>Sensei,</b> boku ga yarimasu.	Yarimasu
			Doctor, I will do this.	I will do this.
2	Greene	I'm already on it.	Moo osoi yo.	Moo boku no kanja da
			It's too late.	He is already my patient.

In this season, Greene is an attending physician and Carter is the Chief Resident. In season 1, Carter started to work at County as a medical student, and since then he has been addressing Greene as 'Doctor Greene', or in the Japanese version, *sensei* or *guriin* (Greene) *sensei*. The use of *yarimasu*, which is a polite form of the verb *yaru*, shows Carter's deference towards Green, and is considered to be a negative politeness strategy (Brown & Levinson, 1978, 1987). The choice of the honorific address form, *sensei*, with the polite form of the verb (*yarimasu*) illustrates the hierarchy and power between Carter and Greene. Although the use of *sensei* is used only by a doctor in a lower position to a doctor in a higher position in the Japanese versions, the use of doctor is reciprocal in the English versions, as the following example demonstrates.

## Excerpt 2

(ER Season 5, Episode 2, 'Last Rites')

## a. Story and context

Attending physician Mark Greene returns to the ER from St Louis after the funeral of his mother. He greets staff at the ER and Carter extends his condolences.

**Table 7-2** 

	Speaker	English	Dubbed	Subtitled
1	Greene	Dr Carter.	Dokutaa kaataa.	N/A
			Dr Carter.	
2	Carter	Hi, <b>Dr Greene</b> .(.) I'm sorry about your mom.	Sensei.(.) Kikimashita yo. Kio otosanaide.	Kikimashita yo okuyami o
			Doctor, I 've heard about your mother. I'm sorry.	I've heard about it. My condolences.
3	Greene	Thanks. What have	Arigatoo.	Doomo
		you got?	Kanja wa?	kanja wa?
			Thank you.	Thanks.
			What have to got?	What have you got?

In season 5, Greene is an attending physian and Carter is a resident. Greene normally addresses residents by their first names or surnames, although in some contexts, doctor + surname is used reciprocally in the English version. In contrast, in the Japanese dubbed version, Greene addresses Carter as dokutaa kaataa (Dr Carter) and Carter addresses Greene as sensei. This shows that there is a distinction between the use of dokutaa and sensei in the Japanese versions. Although the English address form, doctor, is used reciprocally in the English version, regardless of the hierarchy between doctors, the use of *sensei* in the Japanese versions reflects the hierarchy or power between the speakers. It is used only by the speaker in the lower position to address someone in a higher position. However, in real situations, sensei can be used reciprocally by doctors in Japanese hospitals, as depicted in some Japanese medical dramas such as Kinkuu byootoo nijyuuyo ji [ER at 24 hour]. The intention of the translator in transferring 'doctor' in the Japanese versions of ER appears to be to illustrate the institutional hierarchy, by distinguishing between *sensei* (which is only used in lower to higher situations) and dokutaa (which is used in higher to lower and equal situations). In addition, in the English version, doctors in equal or higher to lower positions are likely to address the other doctor by their first name or surname when the patient or patient's family is not present.

## Excerpt 3

(From ER Season 7, Episode 11, 'Rock Paper Scissors')

## a. Story and context

Both Kovac and Greene are attending physicians. Greene is taking leave for his cancer treatment. Greene came to the ER to see his wife Elizabeth Corday, and Kovac finds him.

**Table 7-3** 

	Speaker	English	Dubbed	Subtitled
1	Kovac	Mark.	Maaku.	Maaku
			Mark.	Mark
2	Greene	Hey, <b>Luka.</b>	Shibaraku.	Ruka
			It's been a long time.	Luka
3	Kovac	Need some help?	Boku ni tsukamatte.	N/A
			Hold on me.	

4	Greene	No, no I 'm fine. Thank	Iya, daijoobu. Arigatoo.	Daijoobu
		you.		
			No. I'm fine. Thank you	I'm fine.
5	Kovac	So, what are you doing	Ano, kyoo wa nan <b>desu ka</b> ?	Kyoo wa?
		here?		
			So, what did you bring you	What are you doing
			here today?	here today?
6	Greene	Radiation therapy.	Hooshasen ryoohoo <b>da</b> yo.	Hooshasen ryoohoo o
				uke ni
			I have a radiation therapy.	
				I came here to have
				radiation therapy.

In this scene, Greene and Kovac address each other by first name in the English version. In the Japanese versions, when Kovac addresses Greene, his first name (Mark) is used in both the dubbed and subtitled versions. Although no address form is used by Kovac when speaking to Greene in the dubbed version, his first name (Luka) is used in the subtitled version. In this episode, both characters are attending physicians and equal in the hospital hierarchy. Nonetheless, the difference in verb forms as speech style illustrates the power difference between the two doctors, in the Japanese versions. In line 5, the choice of the polite form, desu, illustrates Kovac's deference towards Greene. This is considered to be a negative politeness strategy (Brown & Levinson, 1978, 1987). In contrast, in line 6, the plain/casual form, da, is used by Greene when speaking to Kovac, a form used between speakers of equal status, or from higher to lower. These two different choices demonstrate the power display between Luka and Greene. Although both characters are 'attending physicians' and are in the same position in the hospital hierarchy, Greene is the longest attending physican in the ER, and helps Weaver, the Chief of the ER. The relationship between Greene and Kovac would be similar to senpai and koohai (senior and junior) in Japanese society. As explained in Chapter 3, relationships of senpai and koohai are important in Japanese society, and it is possible that the translator's choice is based on this concept. Furthermore, this hierarchy may also reflect the fact that Kovac is European, and so values manners and seniority. Evidence for this can be found in Episode 11 of season 6 ('The Domino Heart'), in which Kovac offers his coat to Lucy Knight, who is a medical student who is not wearing winter clothes and is feeling cold, outside the hospital. He says, 'I'm a European. We like to be gallant.'

A further finding, illustrated in the following examples, is that, although doctors address each other by their first names or surnames in various contexts, they are likely to use doctor + surname (and in some cases doctor + first name) in front of patients.

## Excerpt 4

(From ER Season 6, Episode 16, 'Under Control')

## a. Story and context

There is a staff shortage at the ER. Greene organises 'power rounds' with young doctors, Malucci and Chen, who are residents, and (Abby) Lockhart, who is a nurse as well as a medical student; and asks Carter if he could join them.

**Table 7-4** 

Speaker	English	Dubbed	Subtitled
Greene	Chen, Abby, Malucci, over here. We 're gonna do power rounds.	Chen, abii, marucchi, shuugoo da. Kinkyuu kaishin o suru. Chen, Abby Malucci, over here. We 're gonna do	Chen abii marucchi kinkyuu kaishin da Chen, Abby Malucci, urgent rounds.
Greene	Carter, gonna join?	Kaataa, tetsudau ka?  Carter, will you help us?	Kaataa wa? How about you, Carter?
	Greene	Greene  Chen, Abby, Malucci, over here. We 're gonna do power rounds.	Greene  Chen, Abby, Malucci, over here. We 're gonna do power rounds.  Chen, abii, marucchi, shuugoo da. Kinkyuu kaishin o suru.  Chen, Abby Malucci, over here. We 're gonna do urgent rounds.  Greene  Carter, gonna join?  Kaataa, tetsudau ka?

## b. Analysis

In this scene, as the Chief of the ER, Greene is in the highest position out of all the doctors, and he addresses the other doctors by surname. Lockhart is a medical student as well as a nurse, and she is addressed by her first name.

## Next scene

At a meeting between Chen, Malucci and Abby, Greene asks about the condition of a patient who is bleeding.

**Table 7-5** 

	Speaker	English	Dubbed	Subtitled
1	Greene	How are you doing?	Doo desu ka?	Doo desu?
			How are you doing?	How are you doing?
2	Patient	It won't stop.	Tomannai n desu.	Tomaranai
			It won't stop.	It won't stop.
3	Greene	<b>Dr Dave</b> will be back in	Soo desu ka.	Marucchi ga chiryoo
		a minute to fix you up.	<b>Dokutaa marucchi</b> ga	shimasu
			sugu ni chiryoo shimasu.	
				Malucci will treat you.
			I see. Dr Malucci will treat	
			you soon.	

In the scene above, Greene address Malucci differently to the way he does in the first example. In the first scene, Greene addresses other doctors and a medical student by their surnames or first names. In the next scene, in front of a patient, Greene addresses Malucci as Dr Dave (as Malucci prefers to be called this, rather than Dr Malucci). In front of the patient, who is an outsider, Greene shows respect to Malucci as a doctor by calling him Dr Dave. In the dubbed Japanese version, dokutaa marucchi is used. The translator appears to have done so based on the hospital hierarchy. Firstly, in speech from higher to lower, sensei or surname + sensei is used. Secondly, in speech between equals or from lower to higher, dokutaa + surname is used. The second option is chosen in this case. In the subtitled version, the surname Malucci is used. This may be due to the application of the Japanese notion of *uchi* to *soto* (distinction between in-group and out-group) to the relationship between doctor/hospital and patient. This notion of 'uchi and soto' is strong and it affects the choice of language in Japnaese society. As noted in Chapter 3, people are expected to choose the language, including the address forms, in terms of hierarchy, in the context of working at a company. As an example, an individual in a lower position would address his/her superior (an individual in higher postion in the company) by surname+the title of responsibility / title of responsibility or surname + suffix san. This is to show deference to superiors and for saving face of the superior. However, since the occupational titles and suffix, san, are used as honorific forms, the company workers as insiders are expected not to use them to address (reference) a superior in front of an outsider, and only the superior's surname would be used when they talk to outsiders of the group. This choice is to show deference to the outsider and saving face for the outsider, which is more important than saving face for a superior who is the same as the in-group member.

In recent times, some Japanese hospitals have shifted their relationship with patients from a traditional authoritarian relationship to one of customer service. Consequently, some hospitals do not allow staff to address their doctors as *sensei* in front of patients. Hospital staff, including doctors, are insiders and patients are outsiders. To pay respect to the outsiders (patients), insiders (hospital staff) address other staff members (insiders) by surname, without the prefix *san* or *sensei*, which are used to show respect to the addressee. Similarly, some hospitals address patients as *kanja* (patient)–*sama* (not *kanja san*). *Sama* is a very formal suffix commonly used in a customer service context. In addition, as an example, the present author heard a doctor addressed as *dokutaa* + surname in a public announcement in a private hospital in Japan, in 2011. Although no research has been conducted on the use of doctor + surname in Japanese hospitals, this hospital may have been applying the concept of 'insider and outsider' in their address system. According to a personal communication with an acquaintance of the present author, who has been practicing medicine at a Japanese hospital, she is not allowed to address her colleagues (doctors) as *sensei* in front of her patients. Instead, she is expected to use only the surname of her colleagues.

In the scene above, Greene and Malucci are insiders and the patient is the outsider. It is possible that the translator decided to use *dokutaa marucchi* and *marucchi* when Greene (who is higher in position) is speaking to Malucci (who in lower in position) in front of the patient (an outsider). For the translation of doctor + surname used by a doctor in a higher position to one in a lower position, the second person pronoun *kimi*, or suffix *kun* with the surname, were used in the Japanese versions, as illustrated below.

## Excerpt 5

(From *ER* Season 1, Episode 3, 'Madam X')

## a. Story and context

Dr Lewis, as a resident, has treated a patient of Dr Kayson, who is the chief of cardiology, with a procedure using drugs. Dr Lewis was forced to make a decision by herself as Kayson was absent. However, although the treatment TPA was successful, Kayson was unhappy that Lewis did not choose to perform angioplasty, a surgical procedure. At an educational conference, Dr David Morgenstern, the Chief of the ER, and other doctors are discussing the decision made by Lewis. Morgenstern asks three young doctors what they would do if they were in Lewis's position. Although there is a conflict between Lewis and Kayson in this scene, this excerpt

particularly focuses on the utterance between Mogenstein and the young doctors, which does not include any conflict. Therefore, this was chosen as an example of a 'non-conflict' setting.

Table 7-6

	Speaker	English	Dubbed	Subtitled
1	Morgenstern	Dr Benton. What	Benton, kimi nara doo	Kimi nara doo shita?
		would you have done?	shita?	
				What would you have
			Benton, what would you	done?
			have done?	
2	Benton	(.)Angioplasty.	(.) Kekkan keesee desu.	Kekkan keesee o
			I would choose angioplasty.	I would choose
				angioplasty
3	Morgenstern	Dr Langworthy?	Ranguwaajii -kun wa?	Kimi wa?
			How about you,	How about you?
			Langworthy?	
4	Langworthy	(.)Angioplasty.	(.)Kekkan keesee desu.	Kekkan keesee
			I would choose angioplasty.	Angioplasty
5	Morgenstern	Dr Greene?	Guriin -kun wa?	Guriin- kun wa?
			How about you, Greene?	How about you Green?
6	Greene	(.)Angioplasty.	(.)Kekkan keesee desu.	Kekkan keesee o
			I would choose angioplasty.	I would choose
				angioplasty.

## b. Analysis

Benton and Langworthy are surgical residents, and Greene is the Chief Resident of the ER. As the Chief of ER, Morgenstern is in a higher position than those doctors. Although in the original English version, all are addressed as doctor + surname, in the Japanese versions they are addressed with surname + suffix *kun*. The second person pronoun, *kimi*, is also used. Benton is addressed only by his surname. In Japanese society, *kun* and *kimi* are more likely to be used by male speakers than by female speakers. These forms are used by female speakers in restricted contexts. These forms are mainly used when the female speakers address male interlocutors in equal position or from a higher position to lower position (e.g. a female teacher addressing a male student; a female student addressing a male student who is in the same year level or in a lower level than her). These forms are likely to be used in cross-gender contexts, but are rarely to be used within female-only contexts. The choice of *kimi* and *kun* for the translation of doctor

illustrates the hierarchy between Morgenstern and the other doctors, in the Japanese versions. Furthermore, there are cases where the address form shifts from doctor + surname to first names, between doctors over time. The following is an example of such a shift.

# Excerpt 6

(From ER Season 4, Episode 16, 'My Brother's Keeper')

# a. Story and context

Dr (Elizabeth) Corday is an attending surgeon trained in the UK, who has been working at the County General for six months. She approaches Greene.

**Table 7-7** 

	Speaker	English	Dubbed	Subtitled
1	Corday	<b>Dr Greene</b> , do you have a minute?	<b>Guriin - sensei</b> chotto iidesu ka?	Guriin - sensei?
			Dr Greene, do you have a minute?	Dr Greene?
2	Greene	You've been here for six months. Call me <b>Mark.</b>	Moo, hantoshi ni naru n da.  Maaku de ii yo.  It's been six months. You	Maaku tte yonde yo Call me Mark.
			may just call me Mark.	
3	Corday	All right. Ah Mark, I know it sounds rather morbid but, as you said I've been here for six months	Hai, ja maaku de ikimasu. Aete mooshi agemasu to, amerika ni kite hantoshi ni naru noni,  All right then, I will call you Mark. I wanted o tell you that, even though I 've been in America for half a year,	Amerika ni kite hantoshi ni naru no ni Although I've been in America for half a year,
4	Corday	and I haven't had as much trauma experience as I had hoped.	kitaishita hodo, gaishoo chiryoo no chansu ga arimasen deshita.  I haven't had much opportunity to treat trauma cases as I had hoped.	Gaishoo chiryoo no keeken ga fusoku shiteimasu  I haven't had enough experience in trauma cases.

This is an example of a shift in address from doctor + surname to first name. In this scene, Greene is an attending physician and Corday is a surgeon from the UK who is on an exchange programme. In line 2, since Corday has been working at the County for six months, Greene asks Corday to call him by his first name, Mark. Since Corday is an experienced doctor, it would be natural for them to address each other by their first names. As the study of Murray (2002) shows, mutual use of first names is a very common address form in American English. However, Corday continues to address Greene as Dr Greene until she is invited to call him by his first name. This contributes to the character image of Corday as someone from the UK, where first names would possibly be less commonly used in professional contexts than in the US.

In the Japanese versions, in line 3, Cordey says that she will call him Mark, but an actual shift from doctor + surname to first name only is not illustrated. Instead, Corday continues showing deference to and distance from Greene by employing a formal speech style, including the use of humble honorifics (*mooshiagemasu to...*). In addition, in line 4 she continues to employ formal speech style by using polite forms (*arimasen deshita*, *shiteimasu*). This is considered to be a form of negative politeness strategy (Brown & Levinson, 1978, 1987).

There are other cases in which doctors shift address from doctor + surname to first name/surname only, in *ER*. However, Carter continues to address Benton and Greene as doctor + surname in later seasons of the series. This may reflect the character of Carter, who is from the upper class and has good manners.

## 2) Translation of second person pronoun 'you'

As explained in Chapter 3, Japanese second person pronouns are likely to be omitted, unless marked. Although there is only one singular second person pronoun in English (you), there are numerous options in Japanese. In the Japanese versions of non-conflict situations in this drama, *kimi* is commonly used by male characters and *anata* is likely to be used by female characters. The male-associated form, *omae*, and female-associated form, *anta*, are used by some characters to portray certain images.

#### A. The use of kimi

The second person pronoun, *kimi*, is likely to be used by male doctors in equal positions, or when someone speaking is from the higher position to someone in a lower position.

## Excerpt 1

(From ER Season 4, Episode 15, 'Exodus')

## a. Story and context

Carter called a surgeon to ask to check the toe of his patient. Dale Edson, Carter's former colleague and surgical resident, appeared. Edson was working with Carter when he was in the surgical residency. However, since Carter shifted to emergency medicine, Carter is an intern (first year resident) and is based in the ER.

**Table 7-8** 

	Speaker	English	Dubbed	Subtitled
1	Edson	Mr Kupchak, I'm Dr	Kapuchakku san,	Gekai no edoson desu
		Edson. I'm a surgeon.	gekai no edoson desu	
				I am Edson, a surgeon.
			Mr Kupchak, I 'm Edson, a	
			surgeon.	
2	Edson	I'm taking care of this	Ja, yubi o misete morai	Yubi o mimasu
		toe for you.	masu yo.	
				I am taking care of your
			I would like you to show	toe.
			me your toe.	
3	Edson	Oh, Carter. This looks	Nan da kore nara <b>kimi</b> ni	<b>Kimi</b> ni mo dekiru no ni
	((talking to	like something <b>you</b>	mo yareru daroo.	
	Carter))	could have handled.		You could have handled
			This looks like something	this.
			you could have handled.	

## b. Analysis

In this scene, Edson looks at the patient's toe and tells Carter that he would have been able to treat the patient by himself. In the English version, Edison addresses Carter by his surname. In the Japanese versions, although no address form is used, the second person pronoun 'you' is translated as *kimi*. This is commonly used in male speech when a man talks to a person of equal status, as well as from higher to lower. In this example, Carter is still an intern and Edson is a

second-year resident, demonstrating a gap in the hospital hierarchy. However, as Carter and Edson started surgical residency at the same time, they address each other as equals.

## Excerpt 2

(From ER Season 3, Episode 16, 'Faith')

## a. Story and context

Dr Donald Anspaugh, Chief of Staff, is very impressed that Carter found a mistake in Anspaugh's diagnosis. The patient is going to have an embolectomy, and Carter asks Anspaugh whether he can assist him.

**Table 7-9** 

	Speaker	English	Dubbed	Subtitled
1	Carter	<b>Dr. Anspaugh</b> , can I	<b>Sensei</b> tetsudawasete	Asisuto o
		assist?	kudasai.	
				May I assist?
			Doctor, please let me help.	
2	Anspaugh	Assist?	Tetsudau?	Kimi ga yare
		You're gonna do it.	Kimi ga yaru n da.	
				You will do it.
			Help?	
			You're gonna do it.	
3	Carter	Perform an	Sokusen tekijo o.	Sokusen tekijo o?
		emblectomy?		
			Perform an emblectomy?	Perform an
				emblectomy?
4	Anspaugh	Damn right.	Soo da.	Soo da
			Right.	Right.

# b. Analysis

Anspaugh is the Chief of Staff and Carter is a resident, meaning that Anspaugh is in a much higher position than Carter. In line 2, in both the dubbed and subtitled versions, Anspaugh's 'you' is translated as *kimi*. In line 1 in the dubbed version, as *sensei* is used for the translation of Dr Anspaugh, the power and hierarchy between Anspaugh and Carter is more clearly illustrated in the Japanese version than in the English version.

#### B. The use of omae

The male-associated *omae* is used to show solidarity and power within the hierarchy. The use of this pronoun often displays a masculine and rough image for the speaker. *Omae* is used between male speakers of equal positions, or from higher to lower in informal contexts. It is only used in limited contexts, since the use of this pronoun may result in an offensive manner. It might be used by some female speakers or by some male speakers to female speakers in very limited contexts. The second person pronoun, *kimi*, can also be used by a doctor in a higher position when speaking to someone in a lower position, and it is more likely to be used in the context of *ER*. However, the use of *omae* reflects an arrogant or assertive image for the characters, Benton and Romano. In *ER*, the use of *omae* in non-conflict situations is observed in the utterances of the doctors mentioned above.

# Excerpt 1

(From ER Season 7, Episode 14, 'A Walk in the Woods')

## a. Story and context

Benton has been promoted to the position of Director of Diversity at County General. He has been offered a new office. He filled out the form to order furniture for the room, but Dr Robert Romano, who is the Chief of surgery, has not signed the form. As a result, the interior of Benton's office is very simple. Romano comes to check out Benton's office.

**Table 7-10** 

	Speaker	English	Dubbed	Subtitled
1	Romano	Well, I love what	Ikanimo <b>omae</b> rashii heya	<b>Omae</b> rashii moyoogae
		you've done with the	no moyoogae da na.	da
		place Peter. Very	Kinooteki de.	
		Teutonic.		The interior of this
			This is exactly your taste of	room is exactly your
			the interior of the room,	taste.
			which is functional.	
2	Romano	No trappings of	Atarashii shokumu no	Shokumu no suikoo ni
		success interfere with	shikoo ni kazari nado issai	kazari wa muimi ka
		your performing your	hitsuyoo nai ka.	
		new duties.		You don't need
			You don't need decoration	decoration for pursuing
			for pursuing the new	your duties?
			duties?	
3	Benton	Well, I requested	Kagu o shinsee shimashita	Kagu no shinseesho o
		some furniture, but I	ga, shinseesho ga <b>sense</b> i no	<b>sensei</b> no desuku ni

		hear the form's on	desuku ni hooridashite aru	
		your desk waiting for	to ka.	I made a request for the
		your signature.		furniture. The form is on
			I requested some furniture	your desk
			but I hear the form is still	
			on your desk.	
4	Romano	Well, you should see	Watashi no sain o matteiru	Sain wa junban da
		my in-box, it must be	shorui ga yamazumi ni	
		18 inches deep.	natteru n da.	There is a que for the
				signature.
			There are piles of forms	
			waiting for my signature.	

In this scene, in line 1, the second person pronoun, 'you', is translated into *omae* in the Japanese version. In contrast, in line 3, Benton and Romano's use of 'you' is translated to *sensei no* (*no* being a particle used to indicate possession). These translation choices contribute to the power and hierarchy depicted between Romano and Benton. Romano is talking from a higher position, and shows sarcasm by using *omae*. In contrast, Benton uses a negative politeness strategy (Brown & Levinson, 1978, 1987) by showing deference to Romano and using *sensei*. However, in other scenes, Benton uses *omae* to doctors of equal status or lower in the hierarchy.

## Excerpt 2

(From ER Season 2, Episode 22, 'Dr Carter')

## a. Story and context

In this episode, Carter has just completed his training as a medical student at the County General under the supervision of Benton, a surgical resident, and will soon commence his residency at County General. Carter is from a wealthy family, and the family are attending Carter's graduation ceremony and holding a cocktail party afterwards. Carter invites Benton, his supervisor, to attend the graduation.

**Table 7-11** 

	Speaker	English	Dubbed	Subtitled
1	Benton	Well, I appreciate your invitation	Goshootai arigatoo.	Shootai arigatoo
			Thank you for your	Thanks for your
			invitation.	invitation.
2	Benton	But I'm not going to	Demo, waruikedo,	Shikashi sotsugyoo shiki
		your graduation	<b>ore</b> wa <b>omae</b> no	nimo enkai ni mo denai
		either. I'm not going	sotsugyuooshiki ni mo,	ZO
		to the cocktail party	paatii ni mo, deru ki wa nai	
		Daddy throws at the	zo.	But I won't attend
		Drake.		either your graduation
			Sorry but I don't have any	or the party.
			intention to attend either	
			your graduation	
_			or the party.	
3	Benton	Look Carter.(.) You	Na iika, (.) omae wa ore no	Futari wa tada no totee
		were <b>my</b> assigned	gakusee de ari, <b>ore</b> wa	kankee ni atta dake da
		med student. I was	oshieru tachiba datta. Sore	Variable description
		your assigned	dake no hanashi da.	You and me were just
		resident. You don't	Last Cartan Vannana	senior and junior. That's
		owe me anything. Ok?	Look Carter. You were my student and I was in a	it.
			position to teach you.	
			That's all.	
4	Carter	All right.	Hai.	N/A
4	Carter	All right.	Tiui.	IN/A
			All right.	
5	Benton	N/A	Ijoo da.	N/A
			That's it.	

In lines 2 and 3 of the dubbed version, the male-associated personal pronouns *ore* and *omae*, and male-associated SFF *zo*, are used. These are often used by Benton throughout the series, and contribute to Benton's confident and arrogant image. In addition, the use of *omae* reflects the hierarchy between Benton and Carter, which does not appear in the English version. The use of *ore* and *omae* is often used pragmatic marker to show solidarity between male speakers in equal position, as noted in the relationship between Greene and Ross, in Chapter 6. However, in this case, they display power from Benton toward Carter within the hierarchy.

#### C. The use of anata

The second person pronoun, *anata*, can be used by both male and female speakers. However, it is more likely to be used by female speakers than male speakers (Masuoka and Takubo 1992). The same as other second person pronouns, it is used between speakers at the same status or from higher to lower. The use of *anata* can often be observed being used by female speakers in non-conflict situations in *ER*.

## Excerpt 1

(From ER Season 6, Episode 2, 'Last Rites')

## a. Story and context

Corday has been promoted to Associate Chief of Surgery. The decision was made by Romano, and Corday is not very happy about the process of promotion. Carter hears about her promotion and congratulates Corday.

**Table 7-12** 

	Speaker	English	Dubbed	Subtitled
1	Carter	Hey. Congratulations!	Doomo omedetoo!	N/A
			Congratulations.	
2	Corday	Nice to know <b>you</b> 're in the loop.	Anata made shitterun no?	Shitteruno?
			Do you also know it?	Do you know it?
3	Carter	So, it's true.	Ja, hontoo nan da.	Ja hontoo?
			So, it should be true.	So, is it true?

## b. Analysis

In this episode, Corday is promoted to Associate Chief of Surgery, and Carter is a resident. Not only is Corday higher within the hierarchy of the institution, but Corday is also older and more experienced than Carter. In line 2, 'you' is translated as *anata* when Corday speaks to Carter in the dubbed version. The choice of *anata* for English 'you' is female-associated, and also displays the hierarchy between Corday and Carter.

## Excerpt 2

(From ER Season 4, Episode 5, 'Good Touch Bad Touch')

## a. Story and context

Maggie Doyle is a first-year resident, and is talking to Carter about the treatment of a patient. A medical student who is training accompanies Carter. The student was sick and vomited the day before. Doyle does not know that he was sick, but he looks pale and Doyle asks him if he is sick.

**Table 7-13** 

	Speaker	English	Dubbed	Subtitled
1	Doyle	You're not gonna be sick, are you?	Chotto <b>anta</b> guai waui no?	Anata byooki?
			Do <b>you</b> feel sick?	Are <b>you</b> sick?

## b. Analysis

As Doyle is a first-year resident, there are no doctors lower in the hierarchy than her, but in this scene, the medical student is lower on the hierarchy. Although *anata* is chosen in the subtitled version, *anta* is used in the dubbed version. Both are acceptable in this case, but *anta* is a casual form of *anata*. Kinsui (2014) categorises *anta* as 'role language', and states that the use of *anta* may contribute a strong, confident and insolent female character image. The character image of Doyle is portrayed as an assertive and confident female resident in the series, and use of *anta* portrays the character image of Doyle as well as showing power to the medical student who is lower than Doyle in the hierarchy.

#### 2. Doctors to nurses

Doctors always address nurses by their first names in *ER* in both the English original and the translated versions.

## 3. Nurses to doctors

The way that nurses address doctors depends on the doctor's position and experience, and the distance between the doctor and the nurse.

#### 1) Carter and (Chuny)Marquez

## **Excerpt**

(From ER Season 9, Episode 2, 'Dead Again')

## a. Story and context

At the reception of the ER, there is an emergency case, and nurse Marquez is asking Carter for help.

**Table 7-14** 

	Speaker	English	Dubbed	Subtitled
1	Marquez	Carter, demolition – site accident downtown and at least a dozen injuries.	Kaataa, biru no kaitai genba de jiko. Keganin ga oozee deta.	Biru no kaitai genba de jiko yo oozee kuru
			Carter, there was an accident at a demolitionsite. Many people are injured.	There was an accident at a demolition-site. Many injuries will come.
2	Carter	ETA?	Itsu kuru?  When are they coming?	Itsu? When?
3	Marquez	Now.	Sugu yo. Soon.	Sugu yo Soon

# b. Analysis

Although Carter is a doctor and Marques is a nurse, Carter does not display any power over Marquez. Carter has been working with Marquez since he was a medical student, and at that time, she was already an experienced ER nurse. In early seasons, when Carter is a young resident, other staff address him as 'Carter' most of the time, which shows little distance between them. The ER staff (both doctors and nurses) tend to address each other with first names/surnames without titles and show solidarity in this series. In the dubbed version, the surname *kaataa* is used when Marquez addresses Carter. The casual speech style displays the solidarity between Carter and Marquez.

## 2) Corday and Shirley

## **Excerpt**

(From ER Season 9, Episode 2, 'Dead Again')

## a. Story and context

After the loss of her husband, Mark Greene, from brain cancer, Corday returns to London with her daughter Ella and works at a hospital there. However, she could not adjust to the environment and makes the decision to return to County. In this episode, she has her first day back in County General. Surgical nurse Shirley (surname unknown) finds Corday in the surgical department and approaches her.

**Table 7-15** 

	Speaker	English	Dubbed	Subtitled
1	Shirley	Dr Corday, how	Koodee- sensei,	Sensei rondon wa?
		was London?	doo deshita rondon wa?	
				Doctor, how was
			Dr Corday, how was	London?
			London?	
2	Corday	(.)Good.	(.)Maa ne.	N/A
			Fine.	
3	Shirley	Timed the trip right.	Orusu no aida, sarutoo	Kocchi wa sarutoo
		Missed the pox scare we had two months	sawagi de taihen <b>deshita.</b>	sawagi de
		ago.	We had a hard time	There was a pox scare
			because of a pox scare	here.
			while you were away.	
4	Corday	So I hear.	Kiita wa.	Kiita wa
			So I hear.	So I hear.

## b. Analysis

Although Shirley has been working with Corday for years, she still addresses Corday as Dr Corday. In the Japanese version, Dr Corday is translated to *koodee sensei*. In return, Shirley shows deference to Corday by using the polite form, *deshita*. In contrast, Corday uses the plain form, female-associated SFF, *wa* (*kiita wa* [I've heard]), which sounds casual. These choices in address and translation illustrate the difference in distance and power between doctors (Corday) and nurses (Shirley) in the surgical department. This example of Corday and Shirley

shows contrast with the previous example of Marquez addressing Carter by his surname without titles displays less power and distance beween doctors and nurses.

# 7.2.2.2 Conflict situation

#### **Case 1: Benton and Carter**

The relationship between Benton and Carter in the early series of *ER* illustrates possible problems and difficulties within the hospital hierarchy. In season 1, Carter is a medical student. In the first episode of series one (Pilot), Carter appears at County General as a fourth-year medical student for his sub-internship rotation, and works under the supervision of surgical resident, Benton. In the next season, he returns to County as a surgical intern, and continues to work under Benton's supervision. Carter and Benton often experience conflict due to their personality differences and approaches towards patients. Benton is a very talented surgeon, but he is often portrayed as cool, arrogant and lacking compassion. Conversely, Carter is a more caring doctor who always works for the sake of the patient. In Excerpt 1, Carter is shocked that his colleague and friend, Denis Gant, is killed in an accident (a suspected suicide), and blames Benton for not giving Gant enough support by being too strict. Carter leaves Benton's team and comes under the supervision of Hicks, eventually leaving the surgical department and transferring to the ER. Despite the conflict and dispute between Carter and Benton, in season 6, it is Benton who saves Carter from his drug addiction (Excerpt 2).

## Excerpt 1

(From ER Season 3, Episode 12, 'Post Mortem')

# a. Story and context

In this scene, in the operating theatre, Hicks, Benton and Carter are conducting a surgical procedure on a patient. As it is shortly after surgical resident Denis Gant was killed in a railway accident, the staff are still in shock. Hicks did not know much about Gant, and asks Benton how Gant was to work with. Benton explains that Gant was not adjusting to the urban trauma centre, where he was undertaking training. Carter believes that Gant committed suicide because he was very unhappy with the abusive way that Benton treated him. This scene is a dialogue between Hicks, Benton and Carter.

**Table 7-16** 

	Speaker	English	Dub bed	Subtitled
1	Hicks	Whole department's	Minna mada jiken no	Shokku ga o o hiiteiru
		off today. Everyone's	shokku ga o o hiiteiru mitai	
		still in shock.	yo.	Still in shock.
			It seems that everyone is	
			still in shock after the	
			accident.	
2	Benton	Bovie.	Bobii.	Bobii o
			Bovie.	Bovie
3	Hicks	Sorry, I didn't get to	Watashi wa dokutaa-	Ganto tte donna
		know Dr Gant better.	ganto o yoku shiranakatta	hitogara datta no?
		How was working with	kedo, donna hitogara datta	
		him, Peter?	no?	What kind of
				personality did Gant
			I didn't know about Dr	have?
			Gant much, but what was	
			he like?	
5	Benton	I don't know, it's too	Mada nan tomo iemasen.	Nan tomo iemasen
		soon to say.		tesaguri joo tai de
			It's too soon to say.	
				He hadn't distinguished
				himself and I cannot say
	D	M4 2 . 02	2.24. //	anything
6	Benton	More 2-0?	2-0 tsuika.	N/A
			Add 2-0.	
7	Benton	He hadn't	Kare wa tesaguri jootai	N/A
		distinguished himself	deshita.	
		yet.		
			He hadn't distinguished	
			himself.	
8	Hicks	That's surprising given	Okashii wa ne.	Saikoo no hyooka o ete
		his transcripts he	Seeseki batsugun de saikoo	kita no ni?
		came with the highest	no hyoooka o ete uchi e	
		recommendations.	kita no ni.	Although he came with
				the highest evaluation?
			That's surprising. Although	
			he came with the excellent	
			academic results and the	
	Donts	Oh wall was side a leas	highest evaluation?	Handler trans
9	Benton	Oh, well, maybe he	Atarashii kankyoo ni	Umaku junnoo dekizu ni
		was having	junnoo dekinakatta n	Ho couldn't adiust
		adjustment problems.	deshoo.	He couldn't adjust himself to the new
			Maybo bo couldn't adjust	environment and
			Maybe he couldn't adjust himself to the new	environiment allu
			environment.	
			CHVII OHHIEHL.	

10	Hicks	So, you noticed him struggling?	Ja, nayandeta no ne.	Nayandeta no ne
		Strugginig:	So, he was agonising, wasn't he?	He was agonising, wasn't he?
11	Benton	I don't think Gant was prepared to handle an urban trauma centre.	Tokai no gaishoo sentaa ni wa muite inakatta yoo desu.	Tokai ni muite inakatta  He was not suited to an urban environment.
			It seems that he was not suited to an urban trauma centre.	
12	Carter	Then, why did you give him a positive progress report?	Ja, dooshite kare ni ii hyooka o ataetan desu ka?	Nara naze kare ni ii hyoo ka o?
			Then, why did you give him a good evaluation?	Then, why give him a good evaluation?
13	Benton	Sorry?	A? nan no koto da?	N/A
			What do you mean?	
14	Carter	You heard me.	Soo de shoo.	N/A
			I know (you would say that)	
15	Carter	Why did you praise him for the improvement of technical skill and	Nikaime no hyooka de wa, gijutsu mo sekkyokusee mo shinposhita to kare o homemashita ne.	Nikaime no hyooda de wa gijutsu mo sekkyokusee mo ooi ni shinposhita to
		initiative in his	Naze desu ka?	In his second
		second review?	On the second evaluation,	evaluation,
			you praised him for the	you described his
			improvement in technical	improvement in both
			skill and initiative, didn't	technical skill and
			you?	initiative
16	Hicks	Perhaps at another time.	Moo ii kara ato ni shinasai.	Ato ni shinasai
			That's enough. Do it later.	Do it later.
17	Benton	No, actually, I gave	Sore wa saikin ni natte,	Sore wa jimetsu o
Ì		that review before recent backsliding,	kare ga jimetsu o hajimeru mae no hanashi da.	hajimeru mae da
		recent backsnullig,	mae no nanasin aa.	That was before he
			That was before he	became self-
			became self-destructive.	destructive.
18	Benton	I wasn't even aware	Kare ni sonna hyooka o	Sonna hyooka wa moo
		that he received the evaluation	ataeta koto nado, moo wasureta.	wasureta
				I forgot I'd given him
			I forgot I'd given him such an evaluation.	such an evaluation.
19	Carter	Oh, he hadn't! It came	Kare mo shirimasen yo!	Kare mo shiranai
		today.	Kyoo uketottan desu.	
			11. 11.1.7.1	He didn't know it,
			He didn't know it either! It arrived today.	either.

	1	1	I	T
20	Carter	You can be sure he never received any	Kekkyoku, aitsu wa <b>anata</b> kara, tada no ichido mo	Sore o uketoranaimama itte shimatta
		encouraging and	hagemasareru koto naku	
		supportive word from	itteshimatta.	He has died without
		you.		receiving it.
			After all, he was never	
			encouraged by you and	
			now he's dead.	
21	Hicks	Candy, take over	Kyandii,	Kyandii
	((says to	suction and you're	kyuuinn o kawatte.	kawatte
	nurse,	excused, Dr Carter.	Dokutaa kaataa wa itte	kaataa wa dete
	Candy))	·	yoroshii.	
				Candy, take over
			Candy, take over suction.	(suction). Carter,
			Dr Carter, you may go.	you leave.
22	Carter	All he ever got from	Kare wa <b>anata</b> ni	Kare wa hihan sare
	((ignores	you was harping and	hihansare, kogoto o iware	tsuzukete shinde
	Hicks and	criticism.	tsuzukete shinde shimattan	shimatta
	keep talking	<b>6.10.0.0</b>	da.(.)	
	to Benton))			He was criticised
	,,		He was criticised and	continuously and
			subjected-to continuous	died.
			harping and has died.	a.ea.
23	Carter	And now he's dead,(.)	Sore o doo omoimasu?	Doo omoimasu?
23	Carter	you're gonna have to	Sore o doo omomiasa.	Doc omonnasa:
		face it.	What do you think about	What do you think?
		race it.	it?	What do you think:
24	((Benton		101	
	silent))			
25	Carter	My apologies, Dr.	Sumimasen shitsuree	Sumimasen
23	Carter	Hicks.	shimasu.	Janninasch
		THUKS.	Sililiusu.	I am sorry.
			I am sorry. Excuse me.	rain sorry.
26	((Carter		ram sorry. Excuse me.	
20	leaves the			
	room.))			

In this scene, on the basis of Goffman (1981), change of 'footings' is observed through what Carter says. In the English version, from lines 1 to 9, as the Chief of Surgery, Hicks speaks as 'principal' in Goffman's (1981) production format. From line 3, she asks Benton how Gant was to work with. Benton is the addressed recipient, and answers Hicks' question. Benton avoids giving a clear answer to Hicks, saying, 'It's too soon to say' (line 5) and 'He hadn't distinguished him yet' (line 7).

Carter is an unaddressed recipient from lines 1 to 11, and listens to Hicks and Benton without a word. However, he is unhappy with Benton, who Carter believes does not tell the truth about Gant to Hicks. Suddenly, Carter starts to speak as 'principal', and starts to ask Benton aggressive questions about Gant. In line 15, Hicks tries to intervene and stop Benton and Carter arguing. They ignore Hicks and continue. From line 20, the footing change is observed, and Carter criticises Benton directly for treating Gant unfairly, blaming him for his death. In line 23 he says: 'And now he's dead, you're gonna have to face it.' This utterance is very direct and is 'doing the act baldly without redress', on the basis Brown and Levinson (1987, p. 69).

Although Benton is higher in status than Carter, Carter shows power over Benton by inducing him to feel guilty about Gant's death. In the Japanese version, the hierarchy and footing shift is more prominent than in the English version. In particular, the hierarchy between Hicks, Benton and Carter is observed in the Japanese versions. The plain form is chosen for Hicks, who is higher in status than the two other characters. The polite form is used by Benton when speaking to Hicks. However, the plain form is in the utterances directed at Carter. Carter, who is lower than both Benton and Hicks, uses the polite form (lines 15 and 19). However, *anata* is chosen in the dubbed version for the translation of the second person pronoun, 'you', when Carter addresses Benton.

As explained in Chapter 3, there are numerous ways of translating English 'you' into Japanese. Yanagisawa (1995) states that, although *anata* is categorised into the polite form of address, the use of it is very limited, and it is less likely to be used by a person in a lower position when speaking to someone senior. In this scene, as a first-year surgical resident, Carter is lower in the hierarchy than Benton. Therefore, *anata* is unlikely to be used by Carter when speaking to Benton in a Japanese hospital hierarchy. Throughout the series, Carter uses the address form *sensei* for Benton most of the time. In Japanese culture, once a person addresses someone as *sensei*, this would be the only address form used within that relationship for the rest of their lives. In the last episode of the final season (season 15), although the English original uses 'Peter' in the dubbed version, *sensei* is used when Carter addresses Benton. Here, Carter is blaming Benton for treating Gant unfairly, saying that Gant did not have any opportunity to receive good feedback from Benton. This choice of *anata*, along with the plain form, illustrate the anger and confusion that Carter feels towards Benton. Furthermore, this choice is consistent with a footing change, in English.

## Excerpt 2

(From ER Season 6, Episode 22, 'May Day')

## a. Story and context

Carter has been relying on prescription drugs to relieve his pain, since the accident in which medical student Knight was killed and Carter was stabbed by a psychiatric patient, and he is becoming addicted to the drugs. He was seen to be abusing some drugs at work by his colleague. His colleagues know that Carter is struggling with this problem, and try to help him. However, Carter will not admit that he has a drug problem. Weaver, Greene, Benton, Chen and Anspaugh face Carter, offer him support, and urge him to attend a rehabilitation clinic for doctors with drug addictions, in Atlanta. He is told that he will be fired if he does not accept the offer. Nevertheless, Carter still does not admit that he is abusing drugs, and does not care about his job. He leaves the room and leaves the hospital, but Benton does not give up on him. He follows Carter and tries to persuade him to fly to Atlanta to go to the clinic. Carter finally gives in and Benton flies with him.

**Table 7-17** 

	Speaker	English	Dubbed	Subtitled
1	Benton	Carter, wait!	Kaataa mate!	Mate!
			Carter, wait!	Wait!
2	Carter	No!	lya desu!	N/A
3	Benton	Carter, what you gonna do?	N/A	N/A
4	Benton	You want to piss it away all you've	Imamade no hachinen kan no doryoku o zenbu dobu ni	Hachinen kan no doyroku o dobu ni
		worked for eight years of [your life?	suteru no ka.	suteru ki ka
			Are you gonna waste all your effort during the last eight years?	Are you gonna waste your effort during eight years?
5	Carter	You're] handing out the ultimatums!	Boku o kubi ni shitai no wa <b>anta</b> nan da yo.	Misuteta kuse ni
			It's you who wants to fire me.	I know you gave up on me.
6	Benton	No more ultimatums. Carter, you get in that	Ore wa kairasenai <b>zo.</b> <b>Kuruma ni nore</b> !	Chigau kuruma ni nore
		van!		That's not true.
			I will never let you go. Get in the car.	Get in the car.
7	Carter	Like hell I am.	Dare ga noru ka.	Dare ga

			I 'll never.	Never.
8	Benton	You're not gonna do this!	Kaataa atama o hiyase!	Yamero
			Carter, cool down	Stop.
9	Carter	They tell you I'm some kind of junkie and you believe them and you come down to ambush me.	Boku ga yakuchuu da nante mimiuchi sarete, sore o shinjiru n desu ka? aitsura no tesaki ni natte.	Sensei made tesaki ni natte boku o uragiru n desu ka You become their
		ambush me.	You became their puppet and you believe them hat I'm a drug addict?	puppet and you betray me?
10	Benton	Carter, you're out of control! You don't see it and you don't care.	Kaataa, <b>omae</b> wa jibun o miushinatteru n da. Tonikaku, ore no iu koto o, kuruma ni nore.	Omae wa jibun o miushinatteru kuruma ni nore You lost your mind.
			Carter, you lost your mind. Listen to me and just get in the car.	Get in the car.
11	Carter	No!	Iya da!	N/A
			No, I won't.	
12	Carter	Don't touch me.	Boku ni <b>sawaruna.</b>	Sawaruna
			Don't touch me.	Don't touch me.
13	Benton	Get in the van.	N/A	N/A
14	Carter	Don't touch me.	Sawarunatte.	Urusai
			I said not to touch me.	That's enough.
15	Benton	Where does it end ah?	Ashita wa doo naru?	Yoku kangaero
			What about tomorrow?	You have to think carefully.
16	Benton	This week is fentanyl, next week end up dead or end like your cousin.	Kyoo wa fentaniiru de sundara, ashita wa jigoku ga matter n da zo.	Matteruno wa jigoku da zo You'll be in hell.
			If you manage today with fentanyl, you will be in a hell tomorrow.	
17	Benton	Some babbling gork in a nursing home.	Itoko no yoo ni shisetsu ni shuuyoo sarete	Itoko no yoo ni haijin ni natte
			You'll be institutionalised like your cousin.	You'll become a wreck like your cousin
18	((Carter punches Benton.))			

19	Benton	Carter, you want to	Atode ikura demo	Ikura naguttemo ii
		fight this, cool man,	nagurasete yaru kara,	kuruma ni nore
		but either way you get	ima wa kuruma ni nore.	
		in the van.		You may punch as much
			You may punch me as	as you like.
			much as you like later so,	Get in the car.
			get in the car now.	
20	((Carter			
	starts			
	crying.))			
21	((Benton	It's all right, man.	Shinpai suruna.	Daijoobu
	Hugs Carter))			
			Don't worry.	It's all right.
22	Benton	It's all right, Carter.	Unto nake.	Shinpai suruna
			Cry as you like.	Don't worry.

In the last scene, Benton displayed an arrogant and assertive character image. However, in this scene, a different aspect of his character is portrayed. He shows determination by wanting to send Carter to the rehabilitation centre. From line 1, Benton consistently uses imperative forms (e.g. 'Get in the van'), which shows his power over Carter and determination to accomplish his mission to send Carter to the rehabilitation clinic.

Benton says to Carter that he should not waste all he worked for in the past eight years ('You want to piss it away...'). Eight years before, Carter started working as a medical student under Benton's supervision. Benton witnessed Carter's hard work, but Carter feels isolated and betrayed by Benton, who (Carter believes) is the same as the others who present him with an ultimatum ('You're handing out the ultimatums!'). Benton shows that he is not giving up on Carter, and is determined to persuade him to go.

In the Japanese version, the footing change is more significant than in the English version. For Benton's utterance, imperative forms (e.g. *kuruma ni nore* [Get in the car]) are used throughout the scene. This demonstrates that Benton has power over Carter, who is lower in the hierarchy. In this scene (line 6), the male-associated first person pronoun, *ore*, and male-associated SFF, *zo*, illustrate the power display from Benton to Carter, as well as Benton's strong determination not to give up on Carter.

In this scene, the language choice for Carter is notably different than in other scenes. In other scenes, polite forms are chosen for Carter when in dialogue with Benton, to show respect and

hierarchy. However, in this scene (only in line 11), the plain form is used in the dubbed version, and sensei is chosen for the subtitled version. In other lines, Carter uses plain form and negative imperative forms (e.g. Sawaruna [Don't touch me]), which is unusual for Carter when speaking to Benton. In particular, the use of second person pronoun, anta, is prominent. Anta is a casual form of *anata* that shows assertiveness of the speaker; and it is more commonly used by female speakers than male speakers. In addition, it is used by speakers within an equal relationship within the hierarchy, or higher to lower in very limited contexts. This is unlikely to be used within Carter and Benson's relationship, and the use of *anta* from someone in a lower position to someone in a higher position would potentially threaten the face of the person in the higher position. Carter is from a rich family and has a classy image, so this language choice may not support the character image of Carter. Hence, it is possible to argue that this choice helps to illustrate Carter's emotional state as having lost his mind due to his drug problem, and that he does not care about hospital hierarchy or expected manners and social norms. The fact that anata is used in a limited context by Carter when speaking to Benton thus demonstrates anger or conflict. As far as the present author knows, this is the only use of anta by Carter when speaking to Benton in the ER episodes analysed. This use of anta would potentially threaten the face of Benton, so has the effect of showing Carter's unstable emotional state.

#### Case 2: Weaver and Romano

Weaver and Romano are often in conflict throughout *ER*. Between 1999 and 2003, as the Chief of Staff, Dr Robert Romano is in a higher position than Dr Kerry Weaver. Romano is portrayed as a gifted surgeon, but arrogant and insensitive. Because of his discriminatory verbal behaviour, he cannot establish good professional relationships with the other staff at the hospital. Romano does not get along with Weaver. Romano has a strong prejudice against homosexuality. In season 5, as the Chief of Surgery, Maggie Doyle — who is a lesbian — accuses Romano of sexual harassment. Consequently, Romano gave her an unsuccessful mark for the surgical rotation, and Weaver forced Romano to review it.

In season 9, Romano loses his arm in a helicopter accident when he gets the patients from the monkeypox outbreak. Kovac saves his life and his injured arm; but Romano experiences limited recovery, making him frustrated and depressed. He behaves recklessly, such as by conducting unauthorised procedures. Consequently, he loses his position as Chief of Staff, and Weaver takes over. Thereafter, Romano works as Chief of the ER. In the second example, Weaver is in a higher position than Romano.

## Excerpt 1

(From ER Season 7, Episode 21, 'Rampage')

## a. Story and context

In this scene, Weaver approaches Romano to condemn his firing of staff psychologist Dr Kim Legaspi. Weaver is dating Legaspi. Although Weaver has admitted to being homosexual in the past, she is not comfortable being open about her relationship with Legaspi at the hospital. Romano, the Chief of Staff, is trying to fire Legaspi over an allegation of sexual harassment of a female patient. Knowing Romano is homophobic, Weaver realises that it is a false allegation and Romano is firing Legaspi because of her sexual orientation. Weaver is determined to fight with Romano over Legaspi. She accuses Romano of unfair dismissal, which he denies. She even follows Romano to the male restroom to continue her talk, and is courageous enough to risk her own career to save Legaspi.

**Table 7-18** 

	Speaker	English	Dubbed	Subtitled
1	Weaver	Robert, I need to talk	<b>Sensei</b> hanashi ga arimasu.	Hanashi ga arimasu
		to you.		
			Doctor, I need to talk to	I need to talk to you.
			you.	
2	Romano	Yeah, sure. Anything	Nan da?	Regasupii igai nara
		but Legaspi.	Regasupii igai no koto ka?	
				Anything but Legaspi
			What is it about?	would be fine.
			Issues other than Legaspi?	
3	Weaver	You're making a	<b>Sensei</b> wa machigatte	Machigatte masu
		mistake.	masu.	
				You're wrong.
			You are wrong.	
4	Romano	Look! My main	Sankagetsu mae ni kizuita	Sankagetsu mae ni
		mistake was not firing	toki ni, kaiko shinakatta no	kaiko sureba yokatta
		her three months ago	ga machigai da.	
		when I first found out.		
			My mistake was not firing	I should have fired her
			her three months ago	three months ago.
			when I noticed.	
5	Weaver	Found out what?	Kizuita?	Naze?
<u> </u>			Noticed?	Why?
6	Romano	That she is	Aitsu wa noonashi da.	Noonashi da
		incompetent.		
			She is incompetent.	She is incompetent

7	Manuar	That's not what you	Haka ni aru da shaa	Chiggi masu
7	Weaver	That's not what you were gonna say.	Hoka ni aru de shoo.	Chigai masu
			There should be other reasons.	That's not true.
8	Romano	Oh c'mon, really?	Ee nani ga aru?	Nani ga?
			Really?	What are you talking
			Is there anything else?	about?
9	Romono	Why? In addition to	Itsu kara hito no kokoro o	Naze wakarun da
		your diagnostic skills, you're mind reader	yomeru yoo ni natta n da, dai sensei?	omae wa reenooshi ka
		now.		How do you know?
			When did you become a mind reader?	Are you a psychic?
10	Weaver	You're trying to get rid of her because she's	Rezubian da kara, kubi ni surun deshoo.	Rezubian da kara yo
		gay.		It's because she is a
			You'll fire her because she	lesbian.
			is a lesbian.	
11	Romano	Of course not. At least that would be	Sonna koto wa hito koto mo ittenai zo.	Oo machigae da henken wa nai
		politically incorrect.	I've never said such a thing.	It's a big
			Ü	misunderstanding
				I don't have a
				discrimination.
12	Romano	I want to get rid of her	Shigoto mo manzoku ni dekin rokudenashi da kara,	Noo nashi wa iran
		because she's a pain in the ass.	kubi ni suru.	I don't need anyone
		0.70 0001		incompetent.
			I will fire her because she is	
			worthless scoundrel.	
13	Weaver	Like Maggie Doyle was?	Magii doiru mitai ni?	Doiru mitai ni?
			Like Maggie Doyle was?	Like Doyle was?
14	Romano	Ok. Kerry. Let's stop right there.	Kerii, sono hen de	Moo yametoke
		right there.	yametoke.	Stop there.
			Kerry. You should stop	
			there.	
15	Weaver	And avoid your history	Jibun no shitekita sabetsu	Sabetsu ni michiteru wa
		of discrimination?	to henken no rekishi ni wa,	
			furetaku naidesu ka.	(Your history) is full of
			You want to avoid your	discrimination.
			history of discrimination	
			and prejudice?	
16	Weaver	If you don't rethink	<b>Anata</b> koso, kangaenaosa	Aratamenai to jibun ga
		this <b>Robert</b> , there 's a good chance you'll be	nai to, kubi desu yo!	shoku o oware masu
		out of your job!	If you don't reconsider this,	If you don't reconsider,
			you yourself'll be fired!	you'll be out of a job.
·	1			

47	Domestics	Dulamentha	Domesti	Vanaia b
17	Romano	Dr Legaspi has demonstrated not	Regasupii wa handan o ayamatta dake dewa naku,	Kanojo wa handan o ayamari
		only poor judgment	kanja o ikaku shi, dooryoo	kanja o ikaku shi
		but reckless attitude	o bujoku shi, tookyoku o	tookyoku o keeshi shita
		towards patients and	keeshi shita kara, kaiko	tookyoka o keesiii siiita
		a blatant disregard for	sareru n da.	Legaspi has
		authority.	Sarcra II aa.	demonstrated poor
		additionity.	Legaspi has not only	judgement but also a
			demonstrated a poor	threatening attitude
			judgement but also a	towards patients, and
			threatening attitude	disregard for authority.
			towards patients,	
			disrespect towards	
			colleagues and disregard	
			for authority. That's why	
			she'll be fired.	
18	Romano	She's out. She's fired.	Wakatta ka?	Dakara kubi da
		End of discussion.	ljoo, owari.	ijoo
			Understood?	That's why she is fired.
			End of discussion	That's it.
19	((Romano			
	enters a			
	men's rest			
	room and			
	Weaver follows			
	him.))			
20	Weaver	If she goes, I go.	Watashi mo	Yamemasu
			kubi ne.	
				I'll quit.
			I'm fired, too.	·
21	Romano	What?	Nani?	N/A
			What?	
22	Weaver	You heard me.	Yamemasu.	Yamemasu
			, , , , , , , , , , , , , , , , , , ,	
			I'll quit.	I'll quit.
23	Romano	(.)Are you giving me	(.) Toire de saigotsuuchoo	N/A
		[an ultimatum?	ka.	
			Are you giving mean	
			Are you giving me an ultimatum in the toilet?	
24	Weaver	I swear] to God.	Watashi [wa shinken desu	Tekkaishinai nara
~ 7	VVCaVCI	i swear; to dou.	yo	hontoo ni watashi mo
			,~	yamemasu
			I am serious.	,
				I will quit if you don't
				back off.
25	Romano	I do not respond well	Watashi wa saigotsuuchoo	N/A
		to [ultimatums!	to iu mono [wa suki janain	
			da.	

			I quite don't like	
			ultimatums.	
26	Weaver	[Robert, I will walk out	[ <b>Sensei</b> ga kangae	N/A
	VVCaver	if you don't back off.	naosanain nara, watashi	1,471
		,	mo hontoo ni yamesasete	
			itadakimasu.	
			If you don't reconsider, I	
			will also resign.	
27	Romano	You had] better	Senjutsu o erabu] toki wa,	Jibun no tachiba o waki
		choose your battles	motto shinchoo ni yare.	maero
		very carefully!	Keesotsu de jikaku ga	
			tarinai.	Be aware of your
				responsibilities in your
			You had better be careful	position
			when choosing your	
			strategy. Your behaviour is	
			thoughtless and you're not	
28	Romano	You're the Chief of	aware of your position.  Omae wa iiaaru buchoo	liaaru buchoo da zo
20	Komano	Emergency Medicine	nan da. <b>Gesu na</b> gee	rezu janai
		not the country's	aikooka janai.	Teza janar
		lesbian advocate.	amoona janan	You're the ER Chief, not
		iconian autocato.	You're the Chief of the ER.	a lesbian.
			You're not a gay lover.	
29	Weaver	That's where you're	Gozonji nai yoo desu ga,	N/A
		wrong. Robert.	watashi wa ryoohoo desu	
		Because I am both.	yo.	
			It seems that you're not	
			aware, but I am both.	
30	Weaver	I am the Chief of	liaaru buchoo deari,	Watashi wa iiaaru
		Emergency Medicine	rezubian demo arun desu.	buchoo de ari
		and I am a lesbian.	Loweth a Chief of the ED	rezubian demo arimasu
			I am the Chief of the ER and I am also a lesbian.	
			allu i alli also a lespiali.	I am the Chief of the ER
				and I am also a lesbian.
31	Weaver	And if <b>you</b> pursue this	<b>Sensei</b> ga akumade	Tekkai shinai
	l reare.	matter any further	shuchoo o magenai yoo	nara
		, , , , , , , , , , , , , , , , , , , ,	nara,	
			,	
			If you don't withdraw your	If you don't withdraw
			assertion,	
32	Weaver	I will take it to the	Kono mondai o kauntii	kono mondai o hyoogi
		County Board of	hyoogi iinkai,	iinkai shimin jyuu
		Supervisors, the ACLU,	shimin jiyuu renmee,	renmee masukomi
		the press, and anyone	shinbunsha, doko ni demo	doko ni demo uttaete
		elsewho will listen!	mochikonde tettee teki ni	tatakai masu
			tsuikyuu shimasu.	
				I will take this matter to
				the board committee
	<u> </u>	L	<u>l</u>	

			I will take this matter to the County Board of Supervisors, ACLU, newspapers and anyone else who will listen.	the civil liberties union, mass media and anywhere, and I will fight.
33	Weaver	So, I suggest <b>you</b> choose your battles very carefully!	Sensei koso, shinchoo ni senjitsu o erabinasai! I suggest you yourself should choose your strategy carefully!	N/A
34	((Romano looks surprised and he does not say anything. Weaver leaves the room.))			

This is a strong conflict situation between Romano and Weaver, and a shift of footing is observed in the course of this scene. In the English version, although Romano (Chief of Staff) is higher in the hospital hierarchy than Weaver (Chief of ER), there is not much power gap between them and they talk in a collegial tone and address each other by their first names.

This long dialogue can be divided into two parts. The first section is from lines 1 to 18, and the second section is from line 20 to the end. In the first part, Weaver speaks as principal and Romano is the addressed recipient. In line 1, Weaver approaches Romano but Romano does not want to talk about the topic ('Anything but Legaspi'). Weaver knows that Romano is firing Lagaspi because of her sexual orientation, but Romano camouflages this fact by making excuses about Lagaspi's incompetence. Weaver knows it is not true and says: 'That's not what you were gonna say' (line 7). Romano jokes 'you're a mind reader now' (line 9). Throughout the series Romano makes ironic jokes, which provide comic relief to the drama. Weaver uses a different tone, which is rather sarcastic. In line 10, Weaver says that Romano is firing Legaspi because she is gay. Weaver says this directly and clearly, and again is doing this act 'baldly without redress', on the basis of Brown and Levinson (1987). In the second section, the footing is shifted. Weaver shows Romano her determination to save Legaspi from being fired. In line 16, Weaver is showing power towards Romano by forcing him to change his mind, saying 'If you don't rethink this Robert, there's a good chance you'll be out of your job'. Romano still does not

admit that it is a mistake to fire Legaspi. Then, the stakes increase when Weaver says: 'If she goes, I go.' Weaver is showing power towards Romano by giving an ultimatum, indicating that she will resign if he fires Legaspi. Here, she makes it clear that she is not only the Chief of the ER, but gay herself, and shows her determination to fight for the rights of her girlfriend and a colleague. In line 33, Weaver uses a high-stakes, strong message: 'I suggest you choose your battles very carefully'.

In the Japanese version, the institutional hierarchy between Romano and Weaver is more significantly illustrated than in the English version. Romano uses the plain form, and Weaver the polite form, consistently. In line 16 in the dubbed version, *anata* is chosen for the translation of 'Robert', which is consistent with the footing change in the English version. However, in lines 1, 3, 26 and 33, *sensei* is used by Weaver to refer to Romano. In lines 1 and 26, although the English version uses Romano's first name (Robert), based on a collegial relationship, the Japanese version clearly illustrates the hierarchy between Weaver and Romano (lower to higher). In line 33, *sensei* is used, even though Weaver is showing anger and displaying power towards Romano and this would potentially threaten Romano's 'face'. The line 33 is translated into the imperative in the dubbed version. *Sensei* is an honorific address form for teachers, doctors and other high-profile professionals, including lawyers and politicians. It is used to show deference, and therefore, it is unlikely to be used in conjunction with the imperative form. However, the use of *sensei* from Weaver to Romano can be considered as a negative politeness strategy used to mitigate the FTA by Weaver.

In addition, in line 28 of the dubbed version, discrimination towards homosexuals is portrayed through the use of the word *gesuna* (vulgar), although there is no equivalent in the English version. Although Romano is strongly prejudiced against homosexuals, he tries not to show it in the English version, as he knows it is politically incorrect to express such feelings (line 11). This choice of words in the dubbed version is consistent with what is in Romano's mind, but it is not consistent with what he says in the original English version.

#### Excerpt 2

(From ER Season 9, Episode 3, 'Insurrection')

# a. Story and context

Since Weaver took over the position of Chief of Staff and Romano stood down to become the Chief of ER, Romano's reckless behaviour is getting worse. After the amputation of his left

arm, the hospital has provided him with a prosthesis, which is covered by insurance. He is very unhappy with the quality of the prosthesis, which only allows limited movement of his left arm. He believes that, since he was injured while treating a patient, the hospital should provide him with a more functional prosthesis. Romano is very irritated, and earlier in this episode, he shows inappropriate behaviour (demonstrating the clumsiness of his prosthetic arm by breaking things with it) in front of an important guest in Weaver's office. Furthermore, Romano fires six experienced nurses on the same day, and Weaver expresses anger about this. This scene is a dialogue between Romano and Weaver. Nurse Abby tries to intervene in their heated argument, as a group of school children are listening. However, they ignore her.

**Table 7-19** 

	Speaker	English	Dubbed	Subtitled
1	Weaver	Robert	Robaato	Robaato
			Robert	Robert
2	Romano	Well. To what do we	Oya oerai- san ga	Dai-sensei no onari ka
		owe this royal visit?	wazawaza odemashi ka.	
				The great doctor is
			Oh, higher-up is here all	here.
3	Weaver	De very beve envidee	the way.  Kesa no taido wa nan desu	Kesa no taido wa nan
3	weaver	Do you have any idea who was in my office	ka? Daijina [okyakusama	desu ka?
		this morning?	ga	uesu ku:
		tins morning:	gu	What was your attitude
			What was your attitude	this morning?
			this morning? I had an	
			important guest.	
4	Romano	Let me see. Do I care?	Dare] daroo to	Kankee nai na
		No.	shicchakocchanai	
				I don't care.
			I don't care who it was.	0111
5	Weaver	That was totally	Reeoshi suru ni mo hodo qa	Shitsuree nimo hodo ga
		inappropriate.	<u>arimasu.</u>	aru wa
			((Incomprehensible in	That was very impolite.
			meaning.))	That was very imponte.
6	Romano	Yeah? I'll tell you	Reeoshi shiteiru no wa	Shitruree nano wa
		what's inappropriate,	byooin no hoo da.	byooin da
		Kerry.		
			((Incomprehensible in	I was not impolite but
			meaning. ))	the hospital was.
7	Romano	This hospital boning	Kono watashi ni tsukai	Konna gishu ga
		me with a prosthesis	mono ni naranai gishu o	tsukaeru to omotteru no
		with a limited functional field.	ategau to wa nani goto da	ka
		runctional field.		

	<u> </u>	1		[]
			How could the hospital fix	Do you think I could use
			me up with a useless	such a useless
			prosthesis?	prosthesis?
8	Romano	I'll have peripheral	Kore ja, masshoo shinkee	Koreja masshoo shinkee
		neuropathy, overuse	shoogai to obbaauusu	shoogai
		[syndrome	[shoogai	
				With this, I'll have
			With this, I'll have	peripheral neuropathy
			peripheral neuropathy,	
			overuse syndrome	
9	Weaver	Did you] fire six nurses	Kangoshi] o rokunin kaiko	Kangoshi o rokunin
		today?	shimashita?	kaiko shita?
			Did you fire six nurses?	Did you fire six nurses?
10	Romano	Yes. As a matter of the	Did you fire six nurses?  Shita sa. Kyoo ichiban no	Did you fire six nurses?  Shita yo medetai na
10	KUIIIaiiu	fact, it was the only	medetai koto da.	Sinta yo Theaetai na
		good part of my day.	medetai koto da.	I did. It's a celebration.
		good part of my day.	Yes I did. It was the	Tuld. It's a celebration.
			happiest event today.	
11	Weaver	How'd you like me to	Anata o kaiko shimasu yo.	<b>Anata</b> o shimasu yo
11	vveavei	fire you?	Anata o kaiko siiiniasa yo.	Anata o silinasa yo
		ine you:	I will fire you.	I will fire you.
12	Romano	Well, I've got a	Soo wa ikan na.	watashi wa shoogaisha
		handicap, [remember?	Watashi wa shoogaisha [da	da zo
			[au	
			You can't do that. I have a	I have a disability.
			disability.	
13	Weaver	Yes.] Somehow I don't	Sore] wa kooryo no taishoo	kooryo shimasen
		think that'd be an	ni wa narimasen.	·
		issue.		
			That wouldn't be	I wouldn't consider it.
			considered.	
14		((Lockhart tries to stop		
		them arguing in front		
		of the group of		
		children.))		
15	Lockhart	You guys have an	Yamete [kudasai kodomo	Kodomo tachi ga
		audience.	tachiga.	
			Please stop it. The children	The children are
			are	
16	((Weaver			
	and Romano			
	ignore			
	Lockhart.))	) v 6:	, , , , , , , , , , , , , , , , , , ,	
17	Weaver	You fire anyone else,	Kongo kankeesha o hitori	Kongo hitori demo kaiko
		even a candy striper,	demo kaiko shitara yamete	shitara yamete morai
		and you're going with	itadakimasu.	masu
		them.	F	F
			From now on, if you fire	From now on, if you fire
			any of the staff, you'll be	any of the staff, you'll
			fired.	be fired.

18	Weaver	Consider this is an official reprimand.	Kore wa seeshiki na chookai shobun desu yo.	Chookai shobun to shite
		'	,	As a reprimand.
			This is an official	·
			reprimand.	
19	Romano	You are one grade A	Hhanamochi naranai	Omae wa kuso yaroo
		bitch!	babaa da.	da
			You are a snobbish old	You are a bitch!
			woman!	
20	Romano	You know that, Kerry?	Nan da to omotteru?	Shitteru ka
			Who do you think you are?	You know that?
21	Weaver	No, Robert, I 'm your	Watashi wa <b>anata</b> no	Watashi wa <b>anata</b> no
		boss.	jooshi desu.	jooshi desu
			I am your boss.	I am your boss.
22	Weaver	And as long as I am,	Anata koso hanamochi	Anata koso kuso yaroo
	Weaver	you're my bitch.	naranai.	desu yo
		you re my breem		acsa yo
			You're snobbish yourself.	You're a son of a bitch
			,	yourself.
23	Weaver	Now get your ass and	Hayaku shigoto o shinasai	N/A
		back to work.		
			Do your work promptly!	

In the previous example, Romano is higher in position than Weaver. In this example, however, Weaver is the Chief of Staff, and Romano is lower than Weaver as Chief of the ER.

In comparison to the first example, it is interesting to observe the illustration of power between Romano and Weaver. It is obvious that Weaver has more power than Romano as the Chief of Staff, but Romano does not want to accept this and still tries to show power over Weaver by using aggressive language.

In this scene, Weaver is speaking as principal and Romano is the addressed recipient. There are some unaddressed recipients, including nurse Lockhart and a group of children visiting the hospital. Weaver is condemning Romano's inappropriate behaviour from earlier in the morning. However, Romano does not accept that it was his fault, justifying his behaviour by accusing the hospital of not providing him with a functional prosthesis.

In line 9, Weaver shows power over Romano by saying that, if he fires more nurses, he will be fired himself. Here, it is clear that, although Romano wants to believe that he still has the power

to do whatever he likes, he is not top of the hierarchy anymore. Weaver has more power and she is entitled to fire Romano. Nevertheless, he tries to wield power over Weaver by using abusive language such as: 'You are one grade A bitch!'. Soon it becomes clear that Romano is under the power of Weaver. Weaver says, 'I am your *boss*', uses the imperative form, and orders Romano 'back to work'. They speak very clearly and directly. This is 'doing an act baldly, without redress' (Brown & Levinson, 1987).

In the Japanese version, the change of hierarchy between examples 1 and 2 is illustrated by the choice of address form and second person pronouns. The plain form of verbs is used by Romano, and the polite form is chosen for Weaver, which is consistent with the first example. However, although Weaver addressed Romano as *sensei* in the first example, *sensei* is not used in this example. In line 1, his first name *Robaato* (Robert) is used, which is the same as in the original English version. In lines 11, 19, 20 and 21, the second person pronoun, *anata*, is used, which is normally used in equal relationships or when speaking from higher to lower.

The difference between the first and second examples, in choice of address form and second person pronouns from Weaver to Romano, illustrates the shift in power and hierarchy more significantly in the Japanese versions than in the English version.

#### 7.2.3 From outsider to insider

#### 7.2.3.1 Non-conflict settings

In non-conflict settings, outsiders to the hospital (patients or patients' families) are likely to address doctors as doctor + surname in the English version. In the Japanese versions, *sensei* or surname + *sensei* is used.

#### Excerpt 1

(From ER Season 4, Episode 19, 'Shades of Gray')

## a. Story and context

In this scene, Alison (a former patient of Dr Elizabeth Corday) was taken to the ER due to a serious injury from an accident. The doctors are going to inject Alison with morphine for the pain. Romano offers to do this, but Alison asks Corday to perform the procedure, as Alison trusts Corday because they have already established a good relationship.

**Table 7-20** 

	Speaker	English	Dubbed	Subtitled
1	Romano	Do you want me to do it?	Watashi ga yaru ka?	Yaru ka?
			Shall I do it?	Shall I do it?
2	Alison	No <b>you</b> do it.	le, <b>sensei</b> ga shite.	<b>Sensei</b> ga shite
			No. Doctor, I want you to	I want you (doctor) to
			do it.	do it.

Although the word 'doctor' does not appear in the original English version, *sensei* is used in both the dubbed and the subtitled versions. Two doctors are present, but Allison addresses only Corday as *sensei*. This is a typical example of the second person pronoun 'you' being replaced by *sensei*. From a patient to a doctor, the word *sensei* is generally used to show respect to the doctor. Although two doctors are present, *sensei* is used without the surname. The translator's intention may be to illustrate the trust between Allison and Corday.

# Excerpt 2

(From ER Season 4, Episode 20, 'Of Past Regret and Future Fear')

# a. Story and context

This scene depicts Benton and the father of his patient. Benton conducted a medical procedure (a splenectomy) for the patient due to irreparable damage. The operation was successful and the patient survived.

**Table 7-21** 

	Speaker	English	Dubbed	Subtitled
1	Benton	Now, listen to me.	Mondai wa desu ne,	Tadashi arushu no
		He's gonna be prone	arushu no kansenshoo ni	kansenshoo ni yowaku
		to certain infections.	yowaku narun desu.	naru no de yoboo o
		So he is going to be	Dakara, kyoomakusee	
		vaccinated [against	taikin ni taisuru wakuchin	But, he 'II be prone to
		these.	no yoboosesshuu [o shite	certain infection so he is
				going to be
			The problem is he'll be	vaccinated
			prone to certain infections.	

			So he is going to be vaccinated [against pleural infection.	
2	Father of the	Thank <b>you.</b> ]	Arigatoo.]	<b>Sensei</b> arigatoo
	patient	Thank <b>you</b> so much.	<b>Sensei</b> wa onjin desu.	
				Thank you, doctor.
			Thank you, doctor.	
			You saved my son's life.	
3	Benton	Yeah.	Aa.	N/A

In line 1, Benton explains to the father the necessity of a vaccination, as the patient is prone to infections. However, the father does not listen to Benton. In line 2, he shows his appreciation for saving his son's life, saying 'Thank you' twice, adding '...so much'. Although the English version does not include the address form 'doctor', in both the dubbed and the subtitled versions the word *sensei* is used. *Sensei* is commonly used not only by the patient but also by the patient's family in *ER*, as it is a very common way of showing respect to a doctor in Japanese society. In line 2, if *arigatoo* (thank you) were used without the use of *sensei*, the Japanese audience might get the impression that not enough respect and appreciation is being paid to the doctor by the patient. The other option in this case would be 'doomo arigatoo gozaimashita' [Thank you very much]) The translator's effort to apply the target culture's system of address form in the translation is evident. This can be considered an example of domestication (Venuti 1995) in translation.

### 7.2.3.2 Conflict situation

#### Case 1: Benton and his patient's father

#### **Excerpt**

(From ER Season 5 Episode 16, 'Middle of Nowhere')

## a. Story and context

Benton is away from County General Hospital for two weeks, and goes to a country practice in LaVerne, a small country town in Mississippi, in order to earn extra money to purchase a hearing aid for his deaf son Reece. Benton works there on behalf of the nurse practitioner and nun Maureen, who has injured her leg. Benton is staying with Maureen and her adopted son

Sonny. Benton is African American, and he faces racial discrimination in LaVerne. In this scene, Benton goes to see his patient Melanie, who is from a very conservative white family. Melanie is a pregnant teenager who lives with her family. Her father is very unhappy that the father of Melanie's baby is African American. Melanie had a consultation with Benton outside of the house, as her mother does not allow him inside. The scene described involves Melanie, her father and Benton, with Melanie's brother and sister and Sonny looking on.

**Table 7-22** 

	Speaker	English	Dubbed	Subtitled
1	Melanie's father	What's going on?	Nani shite n da?	Nanishiteru
			What's going on?	What's going on?
2	Melanie	Ah, (.)Papa, Dr Benton	Toochan, (.) benton sensei	Benton sensei no
		is looking after me.	ni mitemoratte n da.	shinsatsu o
			Papa, Dr Benton is	Consultation with Dr
			examining me.	Benton.
3	Melanie's	This would be a doctor	Nani ga sensei da. Dekee	Nani ga sensei da
	father	for you, wouldn't it?	tura sunna.	
			I wouldn't call him a	I wouldn't call you a
			doctor. Don't take that	doctor.
			high horse attitude with	
			me.	
4	Benton	Sir, your daughter	<b>Ojoosan</b> wa kensa ga	Kensa ga hitsuyoo desu
		needs some tests.	hitsuyoo desu.	Ch a manda sama basta
			Your daughter requires	She needs some tests.
			some tests.	
5	Melanie's	She don't need	Omee ni wa nan ni mo	<b>Omae</b> wa kankee nai
	father	nothing from you.	shite hoshiku nee.	
				This has nothing to do
			I don't want you to do	with you.
			anything	
6	Benton	Her blood pressure is	Ketsuatsu ga takaku natte	Ketsuatsu ga takai
		elevated.	imasu.	Pland proceure is high
			Her blood pressure is	Blood pressure is high.
			elevated.	
7	((Benton			
	helps			
	Melanie to			
	standing			
<u> </u>	up.))		4)	
8	Melanie's	(.)Melanie, Irene, get	(.) Mearanii, omee wa uchi	Uchi ni haittero
	father	on inside.	ni haittero.	Cot into the house
		•		Get into the house.

			Melanie, get into the	
9	Melanie's	Get this man off the	house.  Konna yaroo wa tsurete	Tsurete kaerina
	father ((Says to Sonny))	property.	kaere.  Take this jerk home.	Take him home.
10	Melanie's father	Melanie had help from this kind already.	Kokujin nanka to kakawari mochitakunee.	Kokujin wa moo takusan da
			I don't want to do anything with this kind.	I don't want to do anything with black people anymore.
11	Benton	Let's see what the authority has to say.	Sonna koto iu to, uttaeraremasu yo. If you say such a thing,	Uttaemashoo ka Shall I sue you?
12	Melanie's	You can call the	you would be sued.	Daita a mara da mara a san da
12	father	President as far as I'm concerned.	Jootoo da. Daitooryoo demo dare de mo yonde kiyagare.	Daitooryoo demo yonde kina
		Concerned	I'm not scared. Call the President or anyone.	Call someone like the President.
13	Melanie's father	Ain't nobody gonna tell me how to do with	Ore no musume ni yokeena koto wa sasenee.	Musume ni te o dasu na
		my kid.	I won't let you do anything unnecessary to my daughter.	Don't touch my daughter.

This excerpt begins with Melanie's father's surprise and anger that she is being treated by an African American doctor.

The father's words are spoken in southern American English. The stereotypical/ social bias attached to 'Northern 'and 'Southern' accents in the US is well documented. (e.g. Giles & Billings, 2004; Labov 2006; Kinzler & DeJesus, 2013). Linguistic studies show that American people from diverse region are likely to associate particular attributes with speakers of Southern American English. This may contribute to the creation of the stereotypical image of this father as 'uneducated'. (reinforced in a later scene, where he appears to be illiterate). Although Benton comes to see Melanie as a doctor and Melanie shows respect to Benton by addressing him as Dr Benton, in line 2. In the next line, Melanie's father says: 'this would be a doctor for you, wouldn't it?'. In lines 1 and 2, Melanie's father is the principal and Melanie is the addressed

recipient. The father says: 'She don't need nothing from you'. It is evident that Melanie's father does not show respect to Benton because he is African American. In line 4, the role of the characters is reversed, and Benton is the principal while Melanie's father is the addressed recipient. In line 10, Melanie's father says, 'Melanie had help from his kind already', which is a highly offensive and discriminatory thing to say. By 'his kind' he means African American, referring to the fact that the father of Melanie's baby is also African American, which Melanie's father is very unhappy about. This reinforces the fact that African Americans are unwelcome in his family.

In this example, Melanie's father assumes a position of power over Benton. Melanie's father makes it clear that he believes that, as a white American, he is superior to Benton. The roughness and power displayed here are a projection of masculinity. Benton remains calm and professional despite the treatment from Melanie's father. In line 4, Benton uses 'Sir' to address Melanie's father at the beginning, and shows deference/negative politeness towards him. After Melanie's father's highly offensive use of 'his kind' in line 10, he ceases to show deference, saying: 'Let's see what the authority has to say'. By using the word 'authority', Benton is challenging the power of Melanie's father, who is displaying power over his daughter and Benton. This also challenges the father's autonomy, as he claims to have the right to make decisions concerning his daughter. For example, although Benton insists that Melanie requires medical attention because of her high blood pressure, her father refuses Benton's treatment. As Brown and Levinson (1978, 1987) would state, the statement threatens the negative face of Melanie's father.

In the Japanese versions, a polite speech style (polite form) is chosen for Benton's utterances, which contributes to his overall polite demeanour towards Melanie's father. Conversely, a casual speech style (plain form), including imperative forms, are chosen for Melanie's father's utterances. This contributes to his image as an arrogant character.

In line 4, Benton address Melanie's father as 'Sir', but there is no equivalent of 'Sir' in Japanese. Therefore, an omission is observed. Instead, the word, *ojoosan* — the respectful form of 'your daughter' — is used, which is a plausible choice in this case. It could be argued that although *ojoosan* is not semantically equivalent to 'sir', by using *ojoosan*, Benton is showing deference to Melanie's father. This is considered to be an instance of a negative politeness strategy consistent with the use of 'sir' in the original English.

In contrast, in line 5, the second person pronoun, *omee* (a phonological reduction form of *omae*) — which is a casual, rough form of *omae* — is chosen for the utterance of Melanie's father. *Omee* is used by a speaker in a higher position when speaking to someone in a lower position, or when the status between two people is equal. The medical profession is highly regarded by Japanese society, so it would be expected that the father of a patient addresses a doctor as *sensei*; the use of *omee* would be disrespectful in this case. Therefore, the choices of *omee* and *omae* here are considered to be an appropriate and effective way of expressing this man's attitude, which is that he does not show respect to Benton as a medical doctor because of his race, and does not want his daughter to be seen by Benton. By using *omee* or *omae* instead of *sensei*, Melanie's father shows impoliteness to Benton. He also uses the word *yaroo*, a highly offensive term in Japanese that could potentially threaten the face of Benton.

For the translation of the second person pronoun, 'you', into Japanese, *omae* is used in the subtitled version, and *omee* (a phonological reduction form of *omae*) is used in the dubbed version. *Omee* gives the impression of a 'country person' (Gaubatz, 2007). Hence, the choices of *omee* and *omae* are considered to be appropriate and effective for expressing this man's attitude. In addition, Melanie's father makes commands such as 'daitooryoo demo daredemo yonde ki yagare' (yagare is an imperative form of yagaru). According to Kinsui (2014), yagaru is used to abuse someone, and is categorised as 'role language'. Therefore, the use of yagaru, as well as the line in the subtled version, 'daitooryoo demo yonde kina' (Call someone like the President), displays the masculinity and rough image of the character in the English version, as well as in the Japanese version.

#### Case 2: Carter and the police officer

## Excerpt

(From ER Season 4, Episode 9, 'Obstruction of Justice')

## a. Story and context

A couple injured as a result of domestic violence are taken to the ER. The wife is suspected to have tried to kill her husband by running over him, and so has been handcuffed. She claims that she was simply trying to escape from her violent husband, and that the police are taking her husband's side because he has been working as the parking officer at the police station. Carter and Del Amico (both of them are interns – first-year residents) are in charge of these patients. The police officer insists that his wife should be required to undertake blood tests to determine

whether she has used drugs or alcohol. However, Carter says that he cannot conduct such tests without a warrant. The police officer brings a warrant for the blood tests to be performed while the officer is in the examination room of the ER. He says that he needs the patient's stomach contents as well. However, Carter rapidly disposes of the stomach contents and the police officer arrests him, claiming that he has destroyed evidence and will be charged with obstruction of justice.

**Table 7-23** 

	Speaker	English	Dubbed	Subtitled
1	Carter	I'm gonna take this tube out now.	Soreja, chuubu o nukimasu yo.	Dewa nuki masu I'm going to take the
			I'm going to take the tube out, then.	tube out.
2	Del Amico	Blood alcohol is pretty high. 270.	Kecchuu arukooru ga takai wa. 270 yo.	Kecchuu arukooru ga takai wa
			Blood alcohol is high. It's 270.	Blood alcohol is high.
3	Del Amico	Is she coming around?	Kakusee shita?	Kakusee shita?
			Is she waking up?	Is she waking up?
4	Carter	Yes, she is perking up.	Jojo ni da kedo ne.	Ooto shite kara jojo ni
			Gradually, though.	Gradually, after vomiting.
5	Carter	Since she has puked. Let's see.	Ooto shite kara, dore.	N/A
			Since she vomited. Let see.	
6	((Carter looks into the stomach contents.))			
7	Carter	No pill fragments though.	Piru no kakera wa nai ne.	Piru wa nai
			There are no pill fragments.	There is no pill.
8	Del Amico	Here comes that cop.	Hora, modotte kita.	Kita wa
			Look, he came back.	He came back.
9	Police officer	Here is your warrant.  Smart earthnut. Draw	Gokiboo no reejoo <b>da zo.</b> Saiketsushiro.	Saiketsu no reejoo da
		the dumb blood.	Here is the warrant you wanted. Do the blood test.	Here is a warrant for the blood test.
10	Carter	Read it first.	Misete kudasai.	Misete

			Please show it to me.	Show it to me.
11	Police officer	Maybe stomach	Ino naiyoobutsu ka	Ootobutsu mo morau
		contents? Want that,	sore mo morau	
		too.		I need the vomit too.
			Stomach contents? I need	
12	Carter	Does it specify	that, too.  Ino naiyoobutsu to tokutee	Reejoo ni kaite arimasu?
12	Curter	stomach contents?	shite aru n desu ka.	neejoo iii kaite aiiiiiasa:
				Is it described in the
			Does it specify stomach	warrant?
- 10	D 1: CC:	D //	contents?	
13	Police officer	Doesn't matter. Give it here!	Kankee nai yokose!	Yokose
		nere:	Doesn't matter. Give it to	Give it to me.
			me!	
14	Carter	Oh, no, you don't.	Soo wa ikimasen ne.	Iya desu
15	//Combon		It doesn't go that way.	I don't want to.
15	((Carter flashes the			
	stomach			
	contents.))			
16	Police officer	That's destroying	Sore wa shooko inmetsu	Shooko inmetsu da
		evidence, <b>pal.</b>	kooi da.	The desired as the disc
			That's destroying the	That's destroying the evidence.
			evidence.	evidence.
17	Police officer	You're under arrest.	Kisama o taiho suru.	Taiho suru
4.0	Control	V	I will arrest <b>you</b> .	I will arrest (you).
18	Carter	You can't arrest me.	Mondai ni narimasu yo.	Sonna bakana
			It's going to be a problem.	This is ridiculous.
19	Del Amico	You can't arrest him.	Sonna koto dekinai wa.	Ihoo da wa
			You can't do such a thing.	It's illegal.
20	Police officer	Watch me.	Doo shite da?	Soo ka
			Why not?	Is that right?
21	Del Amico	No, no no!	Matte!	N/A
			Wait!	
22	Police officer	You have the right to	Omae ni wa, mokuhi suru	Mokuhiken wa aru
		remain silent.	kenri ga aru.	You have the right to
			You have the right to	remain silent.
			remain silent.	
23	Del Amico	Where are you taking	Doko e tsurete iku no?	Doko e?
		him?		
2.4	Delies office	lail	Where are you taking him?	Where to?
24	Police officer	Jail.	Ruuchijo da.	Ryuuchijo
	<u>I</u>			

			To jail.	Jail.
25	Police officer	You have a right to the	Bengoshi no tachiai o	Bengoshi mo yoberu <b>zo</b>
		presence of an	motomeru kenri ga aru.	
		attorney.		You can call an
			You have a right to the	attorney.
			presence of an attorney.	

Present in this scene are the interns, Carter, Del Amico, and the police officer. Some shifts in participation roles are observed in the speech of the police officer. On the basis of Goffman's participation roles, Carter speaks as principal and leads the dialogue, and Del Amico is the addressed recipient. Both are interns, so their positions within the institutional hierarchy are equal.

The police officer comes back in line 8 and he hands over a warrant, which Carter requested before conducting the blood test. The police officer speaks as principal and Carter is the addressed recipient. The police officer uses imperatives: 'draw the dumb blood' (line 9) and 'Give it here' (line 13). He addresses Carter as 'smart earthnut' (line 9) and 'pal' (line 16), which shows the police officer's authority over and anger towards Carter. This language could overly threaten the face of Carter on the basis of Brown and Levinson's theory (1978, 1987). It could be argued that this choice of language reflects the fact that the police officer sees Carter as someone disturbing his job, first by asking him to bring a warrant and then by destroying material that he wished to retain as evidence. In addition, the police officer talks to Carter the way a police officer talks to a suspect, which is higher to lower in an institutional setting.

There is a shift of footing and participation role when the police officer begins to give the 'Miranda warning' following the announcement of Carter's arrest. The Miranda warning is a police warning given to criminal suspects in the USA who are in the custody of law enforcement, before police can ask questions about what took place during a crime. In this scene, prior to Carter being given the Miranda warning, the police officer was talking as principal. However, when giving the Miranda warning, he is simply delivering information that he is legally required to give, rather than using his own words. Therefore, the police officer's role has shifted from the principal leading the conversation to 'animator' (Goffman, 1981, p. 226). In line 19, Del Amico speaks as principal and the police officer replies as an addressed recipient. In line 22, the police officer returns to his role as animator and continues giving the Miranda warning. In line 23, Del Amico speaks as principal again, and asks the police officer where he is taking

Carter. The police officer again answers as an addressed recipient. In the next line, he continues giving the Miranda warning and his role shifts back to animator once again.

The Japanese versions are broadly consistent with the English version. However, the choice of second person pronouns and address forms as pragmatic markers contribute to the illustration of the power relationship between Carter and the police officer. Medicine is a highly regarded occupation in Japan, so the police officers are likely to address doctors as *sensei* in any context. However, although 'pal' in line 16 is not translated, in line 17, 'you' is translated as *kisama*. The use of *kisama* is very limited, and is done abusively to show the speaker's anger towards the listener. This pronoun is commonly used when a character in a fictional world is swearing at someone else. Kinsui (2014) categorises *kisama* as 'role language', stating that the term is likely to be used to portray a cold character image, compatible with Japanese popular culture such as *manga* and animation. In this scene, the police officer is looking down on Carter, even though he is a doctor. The use of *kisama* shows the police officer's authority as well as his irritation, which then turns to anger and threatens the face of Carter. Even though the police officer's use of *kisama* with a doctor is unrealistic, it can be argued that it is used as 'role language', as it dramatises the scene.

In line 9, instead of choosing an equivalent for 'smart earthnut' in the dubbed version, the personal pronoun is omitted instead, and the male- associated SFF zo is used. Zo here as a pragmatic marker contributes to the rough, arrogant male character image of the police officer. Although the speech style used by Carter is the polite form, the police officer consistently uses the plain form when speaking to Carter. For instance, in line 12 of the dubbed version, *Ino naiyoobutsu to tokutee shite arun desuka* (Does it specify the stomach content?), the subtitled version is '*Reejoo ni kaite arimasu*? (Is it described in the warrant?). In line 13, the police officer says: 'Doesn't matter. Give it here'. The dubbed version translates this as 'kankee nai. yokose' (Doesn't matter. Give it to me). The subtitled version is 'yokose' (Give it to me). Imperative forms are used in the Japanese versions, which is consistent with the original English version. The contrast between the police officer and Carter in the institutional setting. The use of imperative form here is considered to be 'doing an act baldly, without redress' (Brown & Levinson, 1978, 1987) in both Japanese and English versions.

In terms of the Miranda warning, the translator would have encountered a problem here because Japanese police are not obliged to give such a warning to suspects. Even though the right to silence is guaranteed by the Japanese Constitution, there are no fixed phrases like the Miranda

warning. In the dubbed version, in line 22, for the translation of the second person pronoun 'you' in the Miranda warning, *omae* is used. *Omae* is most unlikely to be used in formal announcements, and the use of this pronoun shows the police officer's authority and power over Carter. It can be interpreted that, although the police officer has shifted to animator in the English version from line 22, he still speaks as principal in the dubbed Japanese version, and no shift of footing is observed. However, in line 25, there is no personal pronoun and the plain form of speech is used. Therefore, it is possible to interpret this as an official statement.

This translation can be interpreted in two ways. One is that the police officer speaks as animator and simply delivers a message. The other is that he speaks as principal and Carter is the addressed recipient. In line 24 in the subtitled version, no second person pronoun is chosen, and plain form is used in line 22. Therefore, the same interpretations for the dubbed version can be applied: that the police officer speaks as principal, or that he is an animator who simply delivers a message. In line 25 of the subtitled version, the male-associated SFF, *zo*, is used. *Zo* emphatically states one's opinion or judgement (Kawashima, 1999, p. 258). The use of this particle is not formal, and it is unlikely to be used in formal settings. In this translation, the police officer is speaking from his perspective, and he speaks as principal.

In the English version, when the police officer delivers the Miranda warning, his participant role shifts from that of principal to animator, and this footing change is significant. However, it can be argued that the shift is not consistent in the Japanese versions. The reason for a different approach in the dubbed and subtitled versions is unknown. As mentioned earlier, the translator may have encountered difficulties when translating the Miranda warning, so although the approach looks inconsistent, it may have been the best solution to the dilemma. In this case, it would not have been possible for the translator to avoid 'domestication', as there is no equivalent of the Miranda warning in Japan.

## Case 3: Kovac and his patient's husband

# **Excerpt**

(From ER Season 6, Episode 3, 'Greene with Envy')

### Scene 1

# a. Story and context

Dr Luca Kovac, an attending physician in the ER, and (Lucy) Knight, a medical student, are assessing a patient named Lauren Johnson. Lauren has a broken arm and leg, diagnosed as a fracture sustained by falling from a ladder. However, from examining the x-ray as well as past x-rays, and considering Lauren has been treated many times at other hospitals, Kovac suspects that her injury is the result of domestic violence inflicted by her husband Pauly. Since Lauren does not explain exactly how the accident happened, medical student Knight asks Pauly to provide the details.

**Table 7-24** 

	Speaker	English	Dubbed	Subtitled
1	Pauly	Dr Kovac?	Kobacchi <b>sensei</b> desu ka?	Kobacchi <b>sensei</b> ?
			Are you Dr Kovac?	Dr Kovac?
2	Kovac	Yes	Hai.	Hai
			Yes.	Yes.
3	Pauly	Hi. I'm Lauren's	Doomo. Rooren no otto no	Otto no pori desu
		husband Pauly	pori desu.	I am Lauren's husband
			Nice to meet you.	Pauly.
			I am Lauren's husband	
_	Davile	1 to ak one aka al orang ka	Pauly	Aluanda a su ancomi
4	Pauly	I just wanted you to thank you for looking	Nyoboo ga osewa ni natte imasu. Arigatoo.	Nyooboo ga osewani natte.
		after her so well.	illiusu. Aligutoo.	natte.
		arter ner so wem	Thank you for looking after	
			my wife.	(Thanks for) looking
				after my wife.
5	Knight	Lauren was not clear	Okusan wa nani ga atta no	Okusan ga ossharanai
		how the accident	ka, kuwashiku itte	node
		exactly happened.	kudasaranain desu kedo.	Your wife does not tell
			Your wife does not tell us	us the detail.
			what exactly happened.	us the detail.
6	Pauly	Yeah, maybe that's	Doji na jibun ga kitto	Ochita jibun ga
		because she is a little	hazukashin desu yo.	hazukashiin da yo na
		embarrassed about it,	Soo da yo na.	
		is that right Lauren?		You're embarrassed
			She is embarrassed about her blunder. Is that right?	about falling, right?
7	((Lauren is smiling))		ner brunder, is that right:	
8	Knight	So how did it happen?	Doo nasatta n desu ka?	Kikitai wa
			What happened?	I want to know.

9	Pauly	She was up the ladder in our bedroom hanging drapes and she lost her footing. Asked not to do it by yourself, didn't I honey?	Ee, beddoruumu no kaaten o torikaeru no ni, hashigo ni nottete, baransu o kuzushite hitori ja abunai to itta no ni. soo da yo na?  Yes, she was up the ladder changing a curtain and lost her balance. I told her it would be dangerous to do it by herself, right?	Kaaten o torikaeteite baransu o kuzushite dakara abunai to itta no ni.  She was changing the curtain and lost her balance. That's why I said it would be dangerous.
10	Lauren	Yes, you did.	Ee soo yo. Yes, that's right.	Soo ne Yes, that's right.
11	Knight	Shall I splint her?	Fukuboku o atemasu?  Shall I splint her?	Fukuboku o?  Shall I splint her?
12	((Kovac puzzled and silent.))			

In this scene, Pauly's choice of words contributes to his character image as a 'good husband'. In line 1, Knight and Lauren are unaddressed recipients here. Pauly politely introduces himself to Kovac, who is looking after his wife. In line 1, the address form 'doctor' is used. Pauly is showing appreciation and solidarity with Kovac, so employs positive politeness strategies (Brown & Levinson, 1978, 1987). This contributes to the impression of Pauly's character as a nice husband. In lines 6 and 8, Knight speaks as principal, asking Pauly how Lauren was injured, because Lauren is not sure. Here, Pauly is the addressed recipient. Pauly explains how Lauren was injured. Here, Pauly pretends that he is passing on information from Lauren, and pretends to be 'the author' by simply delivering information about the injury. However, his words are not based in fact, nor do they originate from him. In line 10, Lauren smiles and agrees with Pauly, pretending that there is no domestic violence problem.

The Japanese versions are generally consistent with the English version. In line 1, the translator chooses the address form surname + *sensei*, which is the only appropriate translation of surname + doctor. In the dubbed version, the polite form is chosen for Pauly's utterances throughout the scene. These choices create an image of Pauly as a polite, gentle husband who shows respect to the doctor and the medical student. In both the English and Japanese versions, Pauly engages in 'impression management' (Goffman 1959) through his language choices.

#### Scene 2

## a. Story and context

In this scene, Kovac's patient Lauren Johnson is about to be discharged and looks happy to be able to go home with her husband, Pauly. Although Lauren does not admit that her injury is due to domestic violence, given her history of multiple hospitalisations, Kovac thinks it would be dangerous for Lauren to return home with the husband whom he suspects is violent. To protect his patient, Kovac calls security and tries to detain the husband in the hospital as mentally ill. Later in the episode, the psychiatric doctor explains to Kovac that he is unable to examine Pauly as a psychiatric patient unless Lauren admits that she has been the victim of domestic violence.

At the beginning of this scene, Lauren is about to be discharged. Pauly, Kovac and Knight are in the same room. Neither Knight nor Lauren speak. Kovac tries to talk to Pauly, pretending that he simply needs him to complete a form. They move to another room after line 5. At the entrance of the room stand security guards. In line 7, when Pauly realises that Kovac suspects that he is suffering from a mental illness and has been violent towards his wife, his personality suddenly transforms to that of a rough and violent man. Pauly calms a little at the end of this scene, perhaps realising that it would disadvantage him if he were seen to be violent. However, later in this episode, Kovac asks leading questions about Pauly's violent behaviour and Pauly punches Kovac.

**Table 7-25** 

	Speaker	English	Dubbed	Subtitled
	Pauly	Can we go, doctor?	Tsugi no gyangu no uchiai	Kono byooin wa abunai
1		before there is	ga hajimaru mae ni kaeritai	kara kaerimasu yo
		another 'gang bang'	n desu ga	
		started shooting,		I will go home because
		please?	I want to go home before	this hospital is
			another gang bang starting.	dangerous.
2	Kovac	I need to talk to you,	Sono mae ni onegai ga	Sonomae ni hanashi ga
		first.	arimasu	
				We need to talk before
			I want you to do me a	that.
			favour before that.	
3	Pauly	Sure, what is about?	Hai nan deshoo?	Nan desu ka
			Yes, what is about?	What's that?
4	Kovac	Just some forms to fill	Shorui ni kinyuu shite	Shorui ni kyuu o onegai
		out, please.	itadakitakute.	shimasu

			I wanted you to fill in the form.	Please fill in the form.
5	Pauly	Something wrong?	Doo ka shimashita?	Nani ka?
			Anything happened?	Is there anything?
6	((Kobac and Pauly move to the next room. Two security guards are standing at the entrance.))			
7	Kovac	I have to inform you Mr Johnson that I believe that you're mentally ill.	Anata ga seeshintekina yamai ni okasareteiru to shindanshi, tsuukoku shimasu. I inform you that as I/ we have diagnosed that you're mentally ill.	Anata wa seeshintekina yamai ni okasareteiru  you are suffering from mental illness.
8	Pauly	What?	Nani? What?	Nani? What?
9	Kovac	and because of your illness You 're [reasonably	N/A	N/A
8	Pauly	You 're the one] who is ill, <b>pal</b> .	Byooki na no wa <b>temee</b> da yo.	Byooki na no wa <b>omae</b> da
			You're the one who is ill.	You're the one who is ill.
10	Pauly	What the hell you think?	Nani kangaete <b>yagaru.</b> What the hell you think	Fuzakeruna Stop messing around!
11	((Two security guards try to constrain Pauly on a bed.))			

In this scene, Pauly transforms from an apparently good husband to a violent man, reflected by the footing change in his utterance. Here, Kovac talks as a principal in Goffman's production format. He is announcing his professional judgement and informing Kovac that he is mentally ill. However, at the same time, in line 7, he is just conveying the information (Pauly's medical condition) as a member of the institution and as a protocol to Pauly, which may also be considered as the role of author, 'the agent who scripts the lines' (p. 226). It can be argued that, although Kovac's announcement is based on his own judgement and that he is responsible for the words, by formalising the announcement institutionally, Kovac tries to give Pauly the impression that he must follow the announcement.

Pauly speaks as an addressed recipient in this scene, according to Goffman's (1981) participation framework, and a prominent change of footing is observed. Pauly's attitude towards Kovac changes dramatically once Kovac tells him that he is mentally ill. The footing shift in the English version can be observed here by the shift in address form from 'doctor' to 'pal'. 'Pal', in this case, is used as address form to indicate anger or aggression (Oxford Dictionary, 2015). Furthermore, Pauly is disagreeing with Kovac, and insults him, saying, 'you are mentally ill'. This utterance, as well as the use of 'pal' in the previous line, would potentially threaten the face of Kovac.

In the Japanese version, the change of footing is consistent with the analysis above. However, the choices made by the translator make this shift more prominent. From lines 1 to 5, the polite form is chosen for Pauly's utterances, contributing to the good impression of his character; while from lines 8 to 10, the plain form has been used, portraying a violent image. The choice of address form contributes to the footing change. The address forms used by Pauly when talking to Kovac are *temee* (dubbed) and *omae* (subtitled). *Temee* is a very impolite form that is not commonly used, and is stronger than *omae*. Both *omae* and *temee* are used by people in a higher position when speaking to a person in a lower position of power. They can also be used by people of equal status; however, in such cases, it is limited to use between people in a very close relationship. Japanese people may assume that a person who uses *temee* is violent and hostile. It is often used alongside *yagaru*, a verb form expressing anger and impoliteness, which would potentially threaten the hearer's face. Pauly's shift from addressing Kovac as *sensei* to using *temee* contributes to the shift in image of Pauly as a 'good guy' to a 'bad guy'. Although Kinsui (2014) has not categorised *temee* as 'role language', it can be argued that the use of *temee* is an example of 'role language effect' and it contributes to the image of Pauly as violent.

By observing these two scenes sequentially, it is possible to see the illustration of power that contributes to the footing change. In the first scene, although Kovac does not intentionally demonstrate power over Pauly, Pauly's polite attitude towards Kovac creates a situation in which Kovac is placed in a position of power relative to Pauly. In the next scene, Pauly shows

power over Kovac by using the words *temee* and *omae*. As explained above, these pronouns are used between people in equal positions or close relationships, or by a person in a higher position to one in a lower position. In this case, the choice of pronoun illustrates Pauly lowering Kovac by displaying his anger. In scene 1, the choice of language by Pauly is used for the strategy to save the face of Kovac. In contrast, in scene 2, the choice of the language directly threatens the face of Kovac.

# Case 4: (Lucy) Knight and her patient's son

## **Excerpt**

(From ER Season 5 Episode 17, 'Sticks and Stones')

### Scene 1

# a. Story and context

This story involves medical student Knight and the Fong family, from a Chinese background. The elderly Mrs Fong is taken to the ER following a seizure, and the CT scan reveals she has cancer. Knight is responsible for telling Mrs Fong and her family about the cancer. However, the patient's son Mr Fong and his wife already know about Mrs Fong's diagnosis, and do not want their mother to be informed as they believe she would be too upset and lose the will to live. Present in this scene are Knight, Mrs Fong's son, her daughter-in-law (the son's wife), and her granddaughter, Emily.

**Table 7-26** 

	Speaker	English	Dubbed	Subtitled
1	Knight	Mr and Mrs Fong, I am	Ano hongu-san,	Jitsu wa warui oshirase
		afraid I have some bad	jitsu wa warui oshirase ga	ga
		news.	arimasu no.	
				I have some bad news.
			Mr and Mrs Fong, I am	
			afraid I have some bad	
			news.	
2	Son (Mr	Emily, why don't you	Emirii, omae wa naka de	Omae wa naka ni haitte
	Fong)	go inside and keep	obaachan no aite o [shite	
		grandmother		You should be in the
		[company.	Emily, you should stay	room (with your grand
			inside and keep	mother).
			grandmother company.	
3	Emily	In a] minute	lie] koko ni iru.	N/A

			No, I'll stay here.	
4	Son	I think it would be better [if	Omae wa kikanai hoo ga ii.	Kikanai hoo ga ii
			It is better for you not to	You had better not to
			listen.	listen.
5	Emily	It's] ok dad.	Daijoobu yo, papa.	Daijoobu yo
			I am fine, Dad.	I am fine.
6	Son	(.)Yes, Miss Knight.	(.) Nan deshoo ka?	Nan deshoo?
			What is it about?	What is it about?
7	Knight	Ah, your mother has a	Okaasan wa, hai ni shuyoo	Hai no shuyoo ga
		tumour in her lung	ga atte, sore ga noo ni teni	noo ni teni sihteite
		and it has spread to	shiteirun desu.	
		her brain.		There is a tumour in her
			Your mother has a tumour	lung. It has spread to
			in her lung and it has spread to her brain.	her brain.
8	Knight	That's what caused	† ·	Sorede keeren o
٥	Knight	the seizures. It's a	Sore de keeren ga okimashita. Hijoo ni	shinkoo shita gan desu
		cancer in very	shinkoo shita jootai no gan	Sillikoo silita gali aesa
		advanced stage.	desu.	That's what caused the
		davancea stage.	ucsu.	seizure It's a cancer in
			That's what caused the	advanced stage.
			seizures. It's a cancer in	auvancea stage.
			very advanced stage.	
9	Emily	Oh, my god.	Uso deshoo?	Masaka
		, , ,		
			It shouldn't be true.	Shouldn't be true.
10	Knight	I know this news is	Okimochi wa yoku	Okimochi wa juubun ni.
		difficult to take in.	wakarimasu.	
				I understand your
44		14//	I understand your feeling.	feeling.
11	Son	We've known about	Gan wa ichinen mae kara	Gan wa shittemasu
		the cancer for a year.	shittemashita.	We know about the
			We've known about the	cancer.
			cancer for a year.	cancer.
12	Emily	Why didn't you tell	Dooshite damatteta no?	Naze watashi ni wa?
		me?		Traze wacasmin wa.
			Why didn't you tell me?	Why didn't you tell me?
13	Son's wife	You were away at	Omae wa ryoo ni ita kara.	Ryoo ni ita kara
		school.		
			It is because you were at	Because you were at
4.0	Facil	V	the boarding school.	the boarding school.
14	Emily	You couldn't call?	Denwa wa aru wa.	denwa shite yo
	((says to her		There was a phone	Vou could call ma
1 -	mother))	Mayba yay taka sans	There was a phone.	You could call me.
15	Knight	Maybe you take some time to discuss this.	Gokazoku de yoku hanashi awareru to ii to omoimasu.	Yoku hanashiaware tara
		unie to discuss tills.	מייטובוט נט וו נט טוווטווווטטע.	How about taking some
				time to discuss this.
				unite to discuss tills.

	T		Little 1 to 1 t	Γ
			I think it is good to take	
			some time to discuss this	
			as a family.	
16	Son	We didn't want to	Kanashimasetaku nakattan	Kanashimu to omotte
	((says to his	upset you.	da.	
	daughter))			We thought you would
			We didn't want you to feel	feel sad.
			sad.	
17	Emily	This is worse, not even	Shiranai hoo ga yoppodo	Katte ni kimenai de
		[knowing it.	kanashii.	
				Don't just assume.
			I feel more sad, not even	
			knowing it.	
18	Knight	While you] talk about	Kensa no kekka wa, ato de	Kekka wa ato de
		this, I will come back	okaasan ni oshirase	gohonnin ni oshirase
		and review the result	shimasu node, sore made	shimasu
		with your mother, OK?	ni hanashiatte kudasai.	
		,		I will review the report
			I will review the result of	to the patient later.
			the test to your mother.	·
			Please take some time to	
			discuss this by then.	
19	Son	That won't be	Haha niwa iwainaide kure.	Haha niwa iwanaide
13	3011	necessary	Trana mwa mwamarae kare.	Trana mwa manarac
		necessary	Don't tell the result to my	Don't tell it to my
			mother.	mother.
20	((Lucy is		mother.	motiler.
20	surprised			
	and silent ))			
21	Son	My mother does not	Honnin wa mada gan da to	Honnin wa shiranai
21	3011	know about the	shiranai n da.	Trommi wa simanai
		cancer.	Simunarii aa.	She doesn't know.
		cancer.	She doesn't know that she	She doesn't know.
22	Frail.	You haven't told her?	has a cancer, yet.  Mada ittenai no?	Ittorai no 2
22	Emily	You haven t told her?	Wada Itterial no?	Ittenai no?
			V	Va., ba., a, 44 talal ba., 2
		14//	You haven't told her, yet?	You haven't told her?
23	Son	We're not going to tell	lu tsumori wa arimasen.	limasen
		[her.		7
		,	I don't intend to tell her.	I won't tell her.
24	Emily	oh god]	Dooshite?	N/A
<u> </u>			Why not?	
25	Lucy	Should be seeing an	Shuyookai no shinsatsu o	Shuyookai no chiryoo o
		oncologist and getting	ukete chiryoo o ukenai to.	ukenai to
		treatment.		
			She shoul be seeing the	She should be getting
			oncologist and getting	treatment by
			treatment.	oncologist.
26	((Emily			
	leaves))			
27	Knight	I don't understand	Dooshite honnin ni	Naze kakusun desu ka.
		why you're doing this.	shirasenain desu ka.	
	•			

			Why don't you tell your mother the truth?	Why you hide the truth?
28	Son	This news will only depress her.	Oshietara, nozomi o nakusu dake da.  If we told her, she will lose her hope.	Shokku ga ookii  It will be a big shock for her.
29	Son's wife	She will die sooner for [knowing	Kaette inochi o mijikaku [suru wa. She will die sooner for knowing it.	Inochi o chijimeru wa It will hasten her death.
30	Knight	No. radiation] therapy can improve her quality of life and stop the seizures but she should be informed.	Hooshasen] chiroo wa yomee o juujitsusasemasu - shi, keeren no hossa mo fusegeru node, zettaini kokuchi subeki desu.  Radiation therapy can improve her quality of life and stop the seizures. So I believe she should be informed	Hooshasen chiryoo o sureba hossa mo fusegemasu Radiation therapy can stop the seizure
31	Son	We are not telling her and we don't want you to tell her.	Akumade iutsumori wa naishi, kimi kara mo iwanaide kure.  We don't intend to tell all and we don't want you to tell her.	Iu tsumori wa nai We don't intend to tell her.
32	Son	You're right Ms Knight. You do not understand.	Amerikajin no kimi ni wa wakaranai koto na n da.  That is what you don't understand as you are an American.	Kimi ni wa wakaran koto da It is that you don't understand.

In this scene, Knight tells Mrs Fong's family that Mrs Fong has cancer. Knight speaks as author, on the basis of Goffman (1981, p. 226), as her role is to deliver information to the patient's family. However, a shift in roles is observed in both the English and Japanese versions. Here, the son uses two forms of address, 'you' and 'Miss Knight'. In line 10, Knight's participation

role switches from that of author to principal, according to Goffman's production format, by expressing her sympathy to the family. She suggests that the family further discusses the situation until she returns to them. In line 26, she continues talking as the principal by insisting that the Fongs inform Mrs Fong about her cancer. The addressed recipients are the family members. The son asks Knight not to tell his mother that she has cancer.

In lines 31 and 32, the son speaks as principal and Knight is the addressed recipient. The son's choice of words indicate that he believes that he is speaking not only for himself but for the other members of his family, as he uses 'we' in line 32 ('We are not telling her and we don't want you to'). Mr Fong's remark is a request, expressed here in a pragmatically direct way as a 'want' statement. Line 32 ('You're right, Miss Knight, you do not understand') suggests a footing in which he assumes a degree of authority over Knight. Although he addresses her with a title + surname, the title chosen suggests that he is aware that she has not yet attained the status of doctor. Furthermore, he positions her as an outsider in regard to his family and its cultural heritage, and her ability to understand it.

The Japanese version is broadly consistent with the analysis above. While the I/we distinction is not preserved in the Japanese version (no first person pronoun references are used), the positioning of Knight as an outsider to the family and its culture is made more explicit in line 31. In line 6, the omission of the address form 'Miss Knight' is observed in the Japanese versions. The equivalence of 'Miss' in Japanese would be suffix san + surname. However, as explained in Chapter 4, Japanese commonly omits personal pronouns/address forms, so it is natural for no address form to be used in this context. As in the English version, it is apparent that Mrs Fong's son adopts a footing in which he is speaking from a position of seniority. In lines 31 and 32, the second person singular pronoun, kimi, is chosen. kimi is likely to be used by male speakers to an addressee of similar or lower status. Here, the son of Mrs Fong uses kimi when speaking to Knight, as she is younger than him and she has not attained the title of doctor; yet this would not be common in a Japanese institutional setting, and so is rather unrealistic. Surnames would commonly be used as an address form in a case like this in Japanese context.

Mr Fong's use of plain forms reinforces the authority footing that he takes over Knight, as a co-participant in the encounter. In lines 6, 11 and 24, polite speech style (polite forms) is chosen for the discourse between the son and Lucy. However, a casual speech style (the plain form) is used in lines 21, 28, 31 and 32. In line 31, as explained in Chapter 6, the use of *kure* is a strong request similar to an imperative. The son's use of *kimi* and the plain form signifies the

translator's intention to identify the relationship between the son and Knight as higher and lower in status, respectively. In addition, the translator adds the phase, 'as you are an American', in the dubbed version, as the son wishes to place some distance between his Chinese family background and Knight, casting her as an outsider. The translator has made this explicit, probably because a Japanese audience may require more background information to understand this intercultural issue in the US. However, it may have been omitted in the subtitled version due to the limitation of the number of characters that could be used.

#### Scene 2

## a. Story and context

Although Knight does not agree with Mr Fong, she does not intend to deliberately tell her patient about the cancer against the son's will. However, although Mrs Fong is believed to be a monolingual Chinese speaker, she identifies the word cancer when Knight is speaking. As Mrs Fong associates this with her own medical condition, she becomes very upset and suffers another seizure. Mr Fong becomes very angry and misunderstands what happened, accusing Knight of deliberately telling his mother about her cancer. Present in this scene are Knight, a resident Dr Doyle, Mrs Fong, Mrs Fong's son, her daughter-in-law, granddaughter Emily, and nurse (Lily) Jarvik. Neither Mrs Fong nor Emily speak.

**Table 7-27** 

	Speaker	English	Dubbed	Subtitled
1	Son	You did this.	Omae no see da.	<b>Omae</b> no see da
		You upset her.	Shokku o ataeta kara da.	
				It's your fault.
			It's your fault. Because you	
			gave her a shock.	
2	Doyle	What's he talking	Ruushii, nani ga atta no?	Nani ka atta?
		about, Lucy?		
			Lucy, what happened?	Anything happened?
3	Son	You told her about the	<b>Omae</b> ni gan o kokuchi	Gan o kokuchi shita
		cancer. She said you	sareta to itteita <b>zo</b> .	
		did.		You told her about her
			She told me that you told	cancer.
			her that she has a cancer.	
4	Son's wife	Look what is done.	Sekinin o totte.	N/A
			Accept your responsibility	
5	Doyle	How's pulse, ok?	Sanso hoowado wa	N/A
			How is the pulse, ok?	
6	Jarvik	96	96.	N/A

			96.	
7	Son	We asked you not to. But, you wouldn't	Iwanaide kure to, arehodo tanonda no ni.	Iuna to tanonda no ni
		listen.		Although we asked you
			Even though we asked you	not to
			not to tell her so many	
			times.	
8	Son	This is your fault.	<b>Omae</b> no sekinin da.	Sekinin o tore
			lt's <b>your</b> fault.	Accept your responsibility.
9	Son	All your fault.	Dooshite kureru.	N/A
			How are you going to make up for this?	

Here, Mrs Fong's son's anger contributes to the shift of footing from the first scene, in which he was calmly talking to Knight. This footing shift is significant in the original English version through prosodic changes in the tone of voice adopted by the son, as well as pragmatically though the use of a series of directly formulated accusations in lines 1, 3, 7, 8 and 9 (e.g. 'You did this'; 'This is your fault'). It is notable that he continues, even in the presence of Doyle and the nurse Jarvik who is treating his mother. Together with the visual cues accessible to the audience, these changes clearly convey the son's anger towards Knight and what he sees as an arrogant and insensitive disregard for the wishes of the family.

In the Japanese versions, it is interesting to note that this change in footing is marked with the choice of address forms. In the first scene, the second person pronoun *kimi* is used for the son's utterance to Knight. *Kimi* is generally used by a person in a higher position when speaking to someone in a lower position. In lines 1, 3 and line 8, *omae* is used. As noted in Chapter 6 and earlier in this chapter, this is a very informal pronoun mainly used by male speakers in casual contexts, when one speaker is higher, or between close male friends to show solidarity. It can also be used by males when speaking to females, in very limited contexts, as it can be considered very offensive for the female addressee. In this scene, the plain form is also chosen for all of the son's utterances to Knight. Overall, the style chosen for the Japanese version of this scene is very rough (e.g. *doo shite kureru*) and includes imperatives and male-associated SFF, *zo*, in line 3. The rough speech style and the use of *omae* contributes towards a portrayal of the son as strong and arrogant. His intention is to show power over Knight, whose behaviour he regards

as a form of misconduct. In Brown and Levinson's terms, this represents 'an overt threat to the other person's face'.

#### Scene 3

# a. Story and context

Mr Fong is unhappy about Knight's care and asks Dr Doyle for another doctor in a senior position. Doyle explains that everything has been handled appropriately by Knight, and that an attending physician will check the patient as well. Because of the second seizure, Mrs Fong has suffered memory loss in this scene and does not remember that she has cancer. Mrs Fong asks Knight about her medical condition. Since Mrs Fong has very limited English, her son interprets. Knight explains that Mrs Fong had the seizure because of epilepsy. Mr Fong is grateful that Knight does not disclose the true diagnosis. Present in this scene are Knight, Mrs Fong, her son, and the nurse Jarvik.

**Table 7-28** 

	Speaker	English	Dubbed	Subtitled
1	Son	She doesn't even remember coming to	Haha wa byooin e kita koto mo oboetenain da.	Nani mo oboetenai
		the hospital.		She doesn't
			My mother doesn't even	remember anything.
			remember coming to the hospital.	
2	Knight	There has been some	Keeren no hossa o okoshite,	Keeka o hanashite
		memory loss. Tell her	hakobareta to itte kudasai.	agete
		that she had a seizure.		
			Please tell her that she had a	Tell her the process.
			seizure and was taken to the	
			hospital.	
3	Son	I want another doctor.	Hoka no sensei ni mite hoshii.	Betsu no sensei o
			I want her to see another doctor.	I want another doctor.
4	((Jarvik and			
	Knight			
	silent))			
5	Knight	Mr Fong, I 'm just	Hongu san, atashi wa okaasan	N/A
		trying to help your	no oyaku ni tachitai dake desu	
		mother.	yo.	
			Mr Fong, I 'm just trying to	
			help your mother.	

6	Knight	Mr Fong, all I am asking to do is to tell her that she had a	Keeren o okoshita to, itte kudasai.	Keeren no hossa no hanashi o shiteagete kudasai
		seizure.	Please tell her that she had a seizure.	Please tell her that she had a seizure.
7	((Mrs Fong and his son talking in Chinese))	N/A	N/A	N/A
8	Son	She wants to know why.	Geein o shiritai tte.  She says she wants to know	Geein wa? What caused the
			what caused the seizuire.	seizure?
9	Knight	What you've been experienced is fairly common so you don't need to worry.	Sore wa yoku aru koto nanode, shinpai wa irimasen.  It is common and you don't	Goshinpai wa irimasen You don't need to
			need to worry.	worry.
10	Knight	You had a seizure because you have a condition called epilepsy.	Keeren o okoshita geein wa, tenkan to yobareru byooki desu.  You had a seizuire because of a condition called epilepsy.	Geein wa tenkan to yobareu byooki de  Because you have a condition called epilepsy.
11	Knight	But you 're gonna be fine.	Yoku narimasu kara. You will get beter.	Yoku narimasu You will get better.
12	((Son smiles to Knight.))			
13	Son	Thank you, doctor.	Arigatoo <b>sensei.</b>	Arigatoo
			Thank you, doctor.	Thank you.

In this final scene, another shift of footing is observed. Knight speaks as principal and Mrs Fong is an addressed recipient. Other members of the family are unaddressed recipients. In line 7, Knight asks the son to tell Mrs Fong in Chinese that she has had a seizure. Goffman's participation framework has been utilised to investigate the role of interpreters in linguistic studies. As Leung and Gibbons' (2008) study shows, although the expected role of the interpreter is that of animator (Goffman, 1981, p. 226), it may shift to principal. The son's expected role is as an animator and an interpreter. In this setting, as the son is unhappy with Knight and because of the fear that Knight may tell his mother the truth, he ignores his role as animator and speaks as a principal by telling her that he prefers another doctor. However, he

decides to follow Knight and to pursue his role as animator as Knight explains her desire to help Mrs Fong, in lines 5 and 6. Mrs Fong asks Knight the reason for her seizure and she tells her that it was caused by epilepsy. This answer pleases Mrs Fong's son, and contributes to another shift in footing towards Knight as co-participant. In line 13, this shift is marked by the use of 'doctor', a title that Mr Fong had not previously used with Knight.

The Japanese dubbed version marks this shift in a way close to the English version, with the title *sensei* used by Mr Fong to address Knight in line 13. The stark contrast between this address form and the rough *omae* used in the previous scene effectively highlights the marked change in alignment that Mr Fong takes with Knight.

# 7.3 Summary and discussion

## 7.3.1 Within the hierarchy

Within the hospital hierarchy of *ER*, in both conflict and non-conflict situations, the choice of address form is determined by the power and distance between two people, and the context of the scene. In both conflict and non-conflict settings, the address forms doctor + surname in the English version, and *sensei* or surname + *sensei* in the Japanese versions, are commonly used to address doctors.

Although 'doctor' is used reciprocally between doctors in the English version, the use of *sensei* is not reciprocal in the Japanese version, and it is only used from lower to higher. Alternatively, the term *doctaa* is used between doctors in equal positions, or from higher to lower. This is distinct from *sensei*, and may help to identify the hospital hierarchy in *ER* for a Japanese audience. Doctors and teachers tend to address each other as *sensei* regardless of hierarchy in Japanese hospitals.

This distinction between *dokutaa* and *sensei* may also be considered a reflection of the Japanese social system, with the notion of *uchi to soto* (distinction between in-group and out-group). This notion is very strong in Japanese society, and it affects people's choice of language and manners. For instance, in the series of *ER*, there are some cases in the original English version in which doctors address each other by their first names or surnames. However, they tend to address other doctors as doctor + surname (doctor + first name in some cases) in front of patients, to show deference to the other doctor. This is translated to *dokutaa* + surname in the Japanese versions. However, since *sensei* is an honorific term, if the insider uses it to introduce a colleague (insider) to an outsider, this means that he/she is showing more respect to the

colleague (insider) than to the patient (outsider). Therefore, to show respect to the patient (outsider), the term *doctaa* is used instead of *sensei* in Japanese versions of *ER*. The distinction between *sensei* and *doctaa* by this translator may help to identify the use of address form reflected by the two different Japanese social structures: hierarchy, and insider and outsider.

In addition, the choice of 'suffix + kun' (which is norally used someone higher to lower in the hierarchy) for the translation of 'Doctor' by when addressing young doctors more clearly displays a hierarchical relationship between an experienced doctor in the position of responsibility and young doctors, than in the original English version.

In both non-conflict and conflict settings between doctors, hierarchy and power are more clearly displayed in the Japanese versions than in the English version, demonstrated by the choice of second person pronoun/address forms such as *anata* and *omae*. *anata* is normally used between speakers of equal status or higher to lower, and is likely to be used as a strong pragmatic marker when it is used from someone in the lower position to higher in conflict settings. The use of *omae* with the combination of GASFFs by Benton and Romano illustrates the power display within the hierarchy, as well as a strong and arrogant male character image.

Since the use of first name is generally a very common address form in American English (Murray 2002), there are cases where first names are chosen to address hospital staff in the original version in both conflict and non-conflict settings. However, since the first name is not very commonly used within the Japanese institutional hierarchy (in particular, from junior staff to senior staff), many of these first names are replaced by other forms of address (e.g. *sensei*) or omitted.

In conflict settings, the findings show that shifts of power and hierarchy are clearly displayed with the footing change, and supported by the choice of address form and second person pronouns, in the Japanese versions. For instance, in the first example of the case of Weaver and Romano (Table 7-18) as a Chief of surgery, Romano's is higher than the position of Weaver. However, in this scene, the first name 'Robert' is consistently used to address Weaver to Romano in the original English version. In both dubbed and subtitled versions, address shift is observed from honorific address form *sensei* to *anata*, which is consistent with the change of the alignment in the original version.

Furthermore, although the first name 'Robert' is consistently chosen to address Romano from Weaver in the English original version, shift of address forms is observed between two different scenes of Weaver and Romano in the Japanese versions. In the first scene, as explained above,

the choice was made for Weaver to address Romano as *sensei*, and the second person pronoun *anata*. In the second scene (Table 7-19), when Weaver — who used to be under the power of Romano (Chief of Surgery) — has become higher than Romano (as Chief of the ER), the address form chosen for 'Robert' was the second person pronoun *anata*. This is significantly portrayed in the examples of reversing power within the hierarchy between Romano and Weaver. In addition, honorific address form, *sensei*, is used by Weaver as a negative politeness strategy to mitigate FTA toward Romano.

Graham (2009) attributes a communication problem between doctors and care-workers to the co-existence of two different hierarchical systems: institutional hierarchy, which values qualifications; and social/experienced hierarchy, which values age and experience. Conflict within the institutional hierarchy is often observed in *ER*. Since County General Hospital in *ER* is a teaching hospital, many of the doctors are residents. Hence, conflicts between residents and doctors in higher positions are often observed. The choice of address forms in Japanese contribute to the display of power and emotion in the conflict situations.

In contrast, little conflict between doctors and nurses is observed in the series. Great respect towards nurses is shown by doctors in *ER*. Doctors address nurses by their first names, and nurses address doctors either as doctor + surname (*sensei* or surname + *sensei* in the Japanese versions) or by first name/surname, depending on the distance between the doctor and nurse and the context. Nurses address doctors as doctor + surname in front of patients in the English version, and *sensei* or surname + *sensei* in the Japanese versions.

### 7.3.2 Outsider to insider

In the case of interactions between outsiders and insiders, the findings show that there is a distinct difference in the use of address forms in conflict and non-conflict situations. In non-conflict situations, it is observed that outsiders address doctors as doctor + surname to show deference to the doctor. This is considered a negative politeness strategy, based on Brown and Levinson (1978, 1987). In such instances, it is translated as an honorific address form, *sensei*, in Japanese versions.

On the contrary, in conflict situations, outsiders tend to adopt an assertive stance towards the doctor (or medical student), and the address forms 'doctor' or *sensei* are used less often. In the Japanese versions, the choice of the second person pronoun 'you' also contributes to the power display between outsider and insider. Furthermore, *omae* has been chosen by the translator in some instances. *Omae* is used in very limited contexts between male speakers of equal status

or higher to lower, and it may sound offensive in some contexts. Accordingly, the use of *omae* results in threatening the other character's face, in some examples. It would be expected that members of the medical profession are addressed as *sensei* in Japan. Hence, it is not acceptable to use a form such as *omae* when someone talks to a doctor. As a result, this choice is likely to convey a strong message, including about the emotional state of the speaker. In addition, in conflict settings, *omee*, *temee* and *kisama* are also used. These forms are often used with the combination of male-associated SFFs (eg. *zo*). These choices in translation not only display the power over the doctor but also contribute to an image of the character (especially a rough masculine image). Within these three forms, only *kisama* is categorised as 'role language' by Kinsui (2014), and it could be argued that *omee* and *temee* have 'role language effect'.

In the case of the scenes analysed in this chapter involving Kovac (Tables 7-24, 7-25) and Knight (Tables 7-26, 7-27, 7-28), the choice of address forms and second person pronouns in the Japanese versions contribute to the footing change and shift of power between outsider and insider.

### 7.3.3 Issues of address forms and second person pronouns in AVT

Address forms, including second person pronouns, are effective pragmatic markers for displaying power and distance between interlocutors. However, it tends to be overlooked in the area of AVT (Hatim & Mason, 2000). As Clyne (2009) point out, it is important in understanding the social significance of address mode between the addresser and addressee, in negotiating address mode. In the case of the Japanese address system, there are some restrictions on using second person pronouns. They can be used only between people of the same status, or higher to lower (Takubo, 1997). Therefore, translating the English 'you' into Japanese can be difficult, as the translator has to choose between numerous options, balancing the need to stay faithful to the intent of the source language script and the need to come up with a translation that sounds natural to target language viewers within the restrictions of AVT.

The focus of the investigation in this chapter was on how the power and hierarchy displayed in the original version was transferred into the Japanese versions. Although hospital hierarchy exists in both Japan and America, because of the different language systems and cultural differences, it is possible that the distance and power between the characters in the original version might be displayed differently in the Japanese versions. Miwa (2000) draws attention to the danger of replacing the 'you' of English-speaking dramas into less polite forms in Japanese dubbed versions, due to the different social systems between the original and the target

cultures. However, in the present study, the data shows that many of the original English instances of 'you' are omitted in the Japanese versions. Only 'marked' uses are translated in the Japanese versions. The choices are made appropriately, and so effectively demonstrate power and hierarchy in *ER*. Furthermore, the choices have been made not only within the category of second person pronouns, but sometimes replacing other address forms as well, such as *sensei*, which is effectively used as a negative politeness strategy. In most cases, these strategies are not found in the English version. However, these additional strategies are appropriately utilised in the Japanese versions.

It could be argued that the restrictions and difficulties on the various choices of second person pronouns and address forms in the Japanese version are effectively utilised as a tool to display the power and distance between speakers in this drama, which is the focus of this study. Moreover, the choice of 'role-language', including some of the GASFFs, also contribute to the display of power, as well as the character images.

### 7.4 Chapter summary

This chapter discussed the findings of textual analysis from the first phase of this study. The main focus of this chapter was hierarchy and power reflected by the choice of address forms, including second person pronouns, as pragmatic markers. The chapter provided the findings for two different settings (within the hierarchy, and from outsider to insider), leading to the summary and discussion of the findings. Chapter 8 will discuss the findings of the second phase of the study.

# CHAPTER 8: FINDINGS OF THE SECOND PHASE OF THE STUDY

#### 8.1 Introduction

The aim of this chapter is to present the findings from the second phase of the study. As explained in Chapter 5, the aim of the second phase of the study was to compare the native Japanese speakers' impressions of each character in one of *ER* episodes, 'The Gift', with those of the native English speakers. The results of this phase of the study were based on a survey and a follow-up interview conducted with two different groups of participants: six native English speakers and six native Japanese speakers. The details of the participants and procedures in the second phase of the study can be found in the Methodology chapter (Chapter 5). The present chapter presents and discusses the findings from the surveys and the interviews completed by participants.

At the interview, three questions were asked: 1. 'Did you have any difficulties in choosing your answers in the survey? Please explain if you did'; 2. 'Were there any particular scenes or language use that affected your choice of answer? Please explain if there were'; and 3. 'Did you find any unnatural use of language in this episode? Please explain if you did'.

The following section begins with an explanation of the difficulties for participants in making choices in the survey, based on the results of the first interview question ('Did you have any difficulties making decisions when answering the survey?'). As it is particularly important for this chapter to know the problems participants had when making choices in the survey instrument, this will be discussed first. Section 8.2.2 then discusses the results of the survey and interview based on each character image; and Section 8.2.3 presents the important themes found in the interview, which are associated with the results of the survey. Section 8.2.4 summarises and discusses the results.

# 8.2 Results and findings

## 8.2.1 Participants' difficulties in making choices

Some participants reported that it was difficult to complete the survey form for all five characters. Participants A and B (from the Japanese-speaking group) and Participant G (from the English-speaking group) said that they had made choices when starting to view the video, but for some characters they had to make some amendment in the end because their final images of the characters differed from their initial choice.

Some characters appeared in both professional and private scenes (e.g. Lewis and Ross), which show different attitudes and images. In constrast, it might have been easier to score Benton and Hicks, who appear only in the professional context in this episode. As discussed in Chapter 5, the focus of this phase of the study was character image in the professional context. Furthermore, it is the nature of the series that there are not many episodes in the series in which all characters only appear in a professional context. Many of the scenes and storylines in this drama include the private life of the characters.

Another interesting finding is that all three male Japanese participants claimed that it was difficult for them to make a decision about 'masculine-feminine'. Participant D said that he made choices on the basis of how the character managed problems. Participant E said it was difficult to choose the gender image in the professional context, but not in the private context. This might be because Japanese gender-associated language appears more in private contexts than in professional/formal contexts (as explained in Chapter 4). For instance, GASFFs are more likely to be used with the plain form of the verbs as a casual speech style than with polite forms, which makes for a more formal and polite speech style. No female participants claimed difficulties choosing the gender image. As discussed in Chapter 6, more female-associated SFFs are used in the series than male-associated SFFs. Hence, it is possible that female participants of the same gender as the characters, with their life experience participating in interactions as females, could more easily associate the language use and gender character image for female *ER* characters than for the male characters.

#### 8.2.2 Results in character image

Figure 8.1 shows the survey sheet used for data collection; and Figure 8.2 shows the sample of the graph used for data analysis. On the basis of Figure 5.1, as noted in Chapter 5, these aspects were chosen so that the viewers could see the characters from different perspectives. Each attribute was arranged without any figure, and randomly positioned either on the left or the right.

Figure 8.1 Sample survey sheet

Character's nan	ne		
(Image of the character)			
Background info	ormation regard	ing the charact	ter
Modest 謙虚			Arrogant 傲慢
-2 -1	0	+1	+2
Kind/Gentle 優しい			Strict 厳しい
Diligent 几帳面/真面目			Slack/Lazy いい加減
Self-confident 自信家			Lacking confidence 自信に欠ける
Feminine 女性的			Masculine 男性的

There were no scores (numbers) on the survey sheet that was distributed to the participants. However, the mean scores for each character were calculated from the score of all participants in the range between +2 and -2, as shown in red in Figure 8.1. The plus/minus aggregate is

simply an indication of polarity of each attributed pair. It does not reflect either positive or negative appraisal of the character. Figure 8.2 shows the sample of the graph used for data analysis.

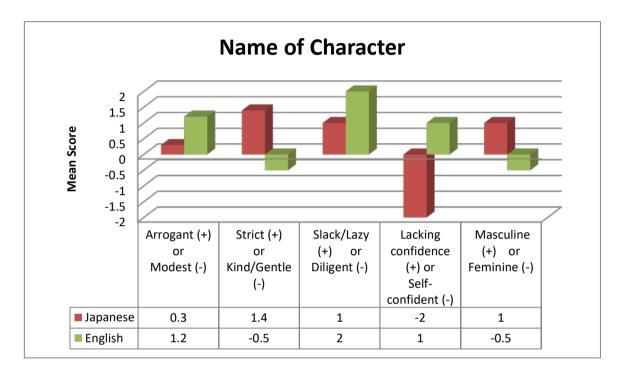


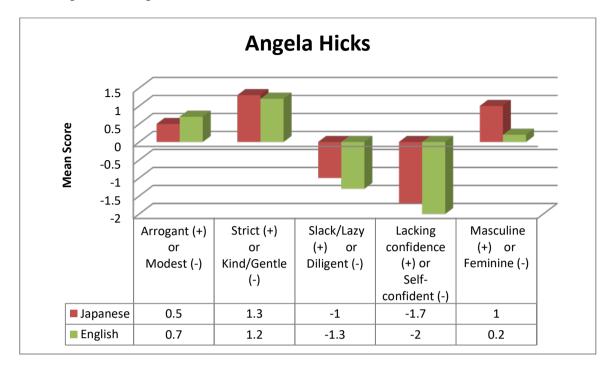
Figure 8.2 Sample of graph

The results for some of the characters raise more issues for discussion than for other characters. The results of the survey show that the choices made for female characters are more likely to be associated with the language use of the characters than the choices made for male characters.

## 8.2.2.1. Angela Hicks

Figure 8.3 presents the results of the survey for Angela Hicks. Hicks is a surgeon, so is in a higher position than residents. Regarding Hicks, the overall results between the group that saw the English version and the group that saw the Japanese version are very similar. The findings of Chapter 6 and the literature review indicate the (arguably) unnatural use of female-associated SFFs in TV dramas and translation. However, it appears that the use of GASFFs by Hicks in this episode did not contribute to the difference in her character image between the two groups.

Figure 8.3 Angela Hicks



As mentioned earlier, the female participants could more easily associate the language with female gender character images than could male participants. However, as female-associated GASFFs are used by Hicks in the dubbed version (explored in Chapter 6), it is notable that the choice of those forms in translations did not appear to interfere with Hicks' strong image.

Two of the three female Japanese viewers (Participants A and B) mentioned that Hicks' tone of command affected their choices in the survey sheet. In particular, they pointed out that the *te*-form is often used by Hicks. Participant A said that the use of *te*-form without *kudasai* sounded arrogant, although she knew that there was no choice for the translator, considering the context. Nevertheless, both participants pointed out that because of her supervisory position, Hicks talks in an imperative mode. '*Te-kudasai*' is a request form. However, without *kudasai* (please) the tone shifts to the imperative mode. Hence, for people in the equal position, or lower to higher in institutional hierarchy, it is not acceptable to omit *kudasai*. Therefore, Hicks' use of the *te*-form without *kudasai* when talking to Benton reflects the power that Hicks has over Benton in the hospital hierarchy. Participant A and participant B stated that they would talk more gently, and pointed out the difference between the language they normally use and the language used by Hicks in this episode.

The two viewers of the English version made similar comments to the viewers of the Japanese version (Participants H and I). Participant H said: 'Dr Hicks was quite abrupt in the way she gave orders.' Participant I said: 'I think her role, I thought her role has to be strict because she

is high up.' Four participants in both groups attributed the image of Hicks to her power and position within the hospital hierarchy.

#### 8.2.2.2 Susan Lewis

Figure 8.4 shows the results for Susan Lewis who is a resident. There was no significant difference in results between the two groups. Overall, both groups had a soft image of Lewis, which supports the character image supported by the first phase of the study.

**Susan Lewis** 0 -0.2 -0.4 **Mean Score** -0.6 -0.8 -1 -1.2 -1.4 -1.6 -1.8 Arrogant (+) Strict (+) Slack/Lazy Masculine Lacking (+) confidence (+) or or Modest (-) Kind/Gentle Diligent (-) (+) or Feminine (-) Self-(-)confident (-) Japanese -0.5 -1.3 -0.8 -0.5 -0.8 English -1.2 -1.7 -0.5 -0.8 -1.5

Figure 8.4 Susan Lewis

The results of phase one reveal that female-associated SFFs are used effectively to support the soft image of Lewis. However, no Japanese participants mentioned the association between those forms and the choices they made.

As noted earlier, both English and Japanese viewers commented in the interviews that they noticed a difference in Lewis's communication in professional and private contexts, which made it difficult to make choices in survey sheets. For instance, English-language Participant G said: 'The way she was interacting with Dr Greene was very different from how she interacted with her sister.' In addition, Japanese-language Participant D said: 'Amari hageshii bamen te iuka, waa tte kooo, ittari dato ka, sorekara nani ka misu o shitari da to ka, sooiu shiin ga, kanojo tte tabun amari nain desu.' ['There were probably not many dramatic scenes (of her) like showing emotions or making mistakes.'] Furthermore, Participant D compared Lewis with Benton, saying: 'Tatoeba sono, ano konsento o sono kazoku no kata ni toru mae ni, arenji

shichatte misuttari, sooiu wakariyasui misu o shiterunde, aru teedo, tsukeyasukatta n desu kedo. ['It was easy to make choices [for Benton] as he made an obvious mistake like arranging (organ donation) without obtaining consent from the patient's family.']

#### 8.2.2.3 Peter Benton

In the case of Benton, the results from the Japanese-speaking and English-speaking participants were very similar. The overall results support the character's image as 'confident and masculine'.

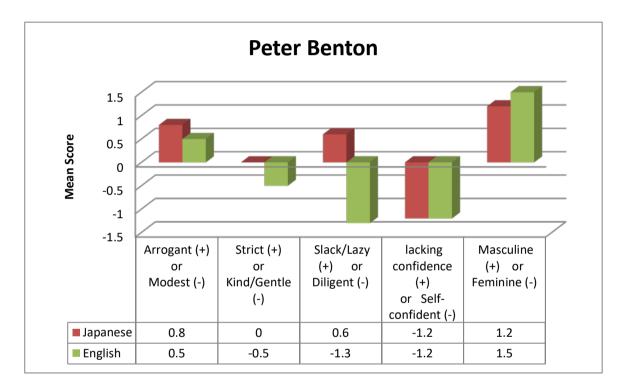


Figure 8.5 Peter Benton

At the interview, no participant associated the language used by the characters and their choices made on the survey. However, the male-associated SFF zo is often used by Benton in this episode. Kinsui (2014) categorised zo as 'role language', which tends to contribute to the power and masculine image of the person/character (as explored in Chapter 6). Hence, it is possible that the language used by Benton affects the ratings by the Japanese-speaking participants, on a subconscious level.

One notable difference in rating was found between the two groups, that of 'Diligence or slack/lazy'. This difference in choice may be attributed to the interpretation of what happened in the episode. In the episode ('The Gift') used for the data collection in the second phase of the study, Benton arranges a transplant without gaining the consent of the family of the patient

(the donor). Hicks, who is in a higher position than Benton, accuses him of irresponsible behaviour. Benton asks his colleague, Greene, to talk to the patient's wife. Later, Benton manages to obtain consent from the patient's wife, and the transplant is performed successfully.

Two participants from the two groups commented on Benton from two different perspectives. As mentioned earlier, Japanese-language Participant D noted that Benton's 'mistake' was arranging an organ transplant without the family's consent, and this made it easier for Participant D to make choices in the survey. He thought that Benton had made a mistake, so rated Benton as 'Slack/lazy' on the survey.

# Conversely, English-language Participant H said:

You know, he would tie his arms across while speaking and so wasn't as warm... But then, at the end had trouble with... Because I could see he was a kind of compassionate man who wanted to finish his job, so, his body language helped to find his character more than some of the others.

Although it is not possible to generalise these comments to the other English-speaking participants, it is possible that the English-speaking participants had an image of Benton as a highly professional and diligent person, despite his apparent disregard for formal protocol.

Only two comments from the interview are relevant to the choices on the survey, so it would not be possible to generalise them to the wider population. These comments discuss the possible reason for the rating, Diligent or slack/lazy'. On the one hand, it is possible that the Japanese-language participants focused on the 'mistake/failure' of not following the organ donation protocol, thus contributing to the negative image of Benton as 'slack'. However, the English-speaking participants might have focused on his passion and the outcome of the organ donation, which was successful. This might have supported the image of Benton as a positive and 'diligent' person. Although more evidence is needed to support this interpretation, it is possible that the result is due to the difference in professional value of two groups, including the importance of protocol.

#### 8.2.2.4 Mark Greene

In the case of Mark Greene, the overall results from the two groups were very similar. However, the English-language and Japanese-language participants rated 'Diligent or slack/lazy' differently. More English-language participants thought Greene was diligent. It is possible that

the difference between these two groups may be due, once again, to cultural differences. In the episode, 'The Gift', Greene had difficulty making time to go shopping to buy a Christmas present for his wife during his lunch break, as he was busy seeing patients. Every time he was about to go out, another patient came in and the nurses forced him to stay. The English-speaking participants might think that Greene showed dedication to his work by sacrificing his lunch break and time shopping for his wife. Conversely, Japan is known to have long working hours—evident in the word, 'karoshi' (death through overwork). Karoshi is a social problem in Japan, and there has been a government report, 'Karoshi hakusho' (Karoshi White Paper) produced by the Japanese Ministry of Health, Labour and Welfare. Dedication to work is always expected in any profession. It is possible that, even thinking about making time for lunch or to go shopping during a busy time at the hospital, suggests insufficient dedication to one's job, which may have affected the Japanese-language participants' views about Greene's diligence and his professional value being questioned.



Figure 8.6 Mark Greene

A few comments were made about Greene in the interviews. Japanese-language Participant D commented that he had a kind and soft image of Greene, which made it easier for the participant to make a decision on the survey. There were no participants that associated Greene's language use with their choices on the survey. However, English-speaking Participant H commented that she thought Greene's body language (such as touching someone when he talks) contributed to

his gentle image. Although no participants mentioned this in the interview, it is possible that his use of language — such as the male-associated first-person pronoun *boku*, and his less frequent use of the imperative form than other characters — contributed to the soft image of Greene (as noted in Chapter 6).

# 8.2.2.5 Douglas Ross

Regarding the survey of Douglas Ross, not much difference was found between the two groups. English-language Participant K mentioned that it was difficult to make a choice of attributes for Ross, as he appeared in both professional and private contexts. In this episode, Ross tries hard to regain his former relationship with Carol Hathaway, who is now engaged to another doctor. He tries to persuade Hathaway to return to him at her engagement party. It is possible that his assertive attitude in the scene contributes to both language groups' impression that Ross is an arrogant or confident person. The results of the survey do not show any difference in terms of 'modest or arrogant' between the Japanese-speaking and English-speaking participants.

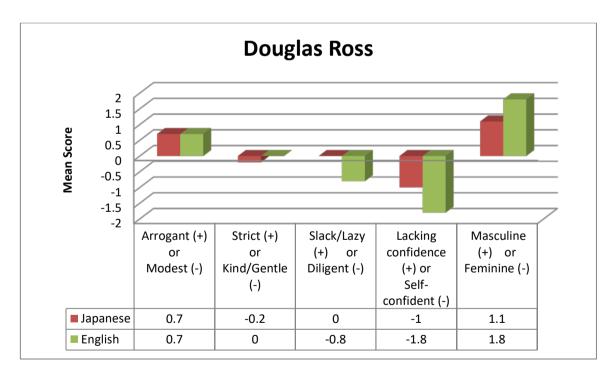


Figure 8.7 Douglas Ross

George Clooney, the actor who played Ross, was not very famous when this episode was first broadcast. However, he was one of the most famous actors in the world when this data was collected. Therefore, it is possible that some participants overlapped the images of Douglass Ross and George Clooney. For example, English-language Participant K referred to him as

'George Clooney's character'. Japanese-language Participant C began, 'George Clooney said...'. It is thus possible that Clooney's popularity contributed to the character image of Ross.

# 8.2.3 'Unnaturalness of the Japanese version'

All of the Japanese viewers mentioned what they perceived to be the overall unnaturalness in the dubbed version. In the interview, two comments made by two female Japanese participants implied the expectation that *ER's* female characters would speak more politely and softly. Participant B said: '*Tabun watashi ga onaji serifu o iu to shitara, moo sukoshi, koo yawarakai hyoogen, toku ni, josee ga koo yawarakasa ni kakeru to iu innshoo o mochimashita.*' ['If I spoke in the same setting, I would choose more gentle expressions. I had an impression that particularly female characters showed a lack of softness in speech'.] Furthermore, Participant A said: '*Onna no hito ga "nani siteru no" tte ittandesu kedo, soo wa iwanai to omoun desu ne. Nani ka chotto henna yaku tte omottan desu kedo. "nani shiteiruno kashira" toka no hoo ga iihazu nano ni.*' ['The woman said, "What is he doing?" I found it a little bit of an odd translation. I think a line such as 'I am wondering, what he is doing?' would be more appropriate.'].

Three participants claimed that they found some of the translators' choices to be 'chokuyaku' (literal translation/word-for-word translation). They thought that the translator had not put the words into a Japanese context, thus contributing to the unnaturalness of the Japanese language in the dubbed version.

Participant D said that the quality of translation in this dubbed version of ER was 'average':

'Iwayuru sooiu fushizensa tte iu no wa, zutto saisho kara saigo made kanji mashita ne. Kore wa tabun, shikataganai koto da to omoun desu yo ne... ee tada yappari.. so no... moo chotto nante iunn deshoo ka ne. ee... muzukashii na, eeto... tabun, chokuyaku sugirun da to omoimasu.' ['I felt so called unnaturalness (of language) throughout the episode in the dubbed version. It is probably unavoidable for translation. Having said that, also... How can I say... it's difficult to put into words... I think, well, it is too literal.'].

Participant B also attributed the translation problems to the translator's insufficient understanding of the target culture.

It is important to ask whether the Japanese-language participants thought the translations were unnatural based on a comparison between the Japanese language used in the episode, and either

their own language or the language commonly used in Japanese medical dramas. Participants C and E said that they thought that the language used in the dubbed version was unnatural because it was different from the language used in Japanese medical dramas. Conversely, Participants A and D said that it was different from the language they normally used.

# 8.3 Summary and Discussion

## 8.3.1 Character image associated with language use and character equivalence

In terms of the female characters, the results of the survey and interview were not consistent with the analysis of the first phase of the study, and the literature reviewed in the area. As noted in Chapter 6, female-associated forms were often used by female characters in the series. In general, these forms support stereotypical images of females. Hence, they do not always support the image of the character, if the character is not a stereotypical female. Therefore, it was hypothesised that the characters would be perceived differently in the target version and the original version of the drama. In the case of Hicks, female-associated forms were often used in the discourse of this episode, analysed in the first phase of the study. However, the results of the survey by the Japanese-speaking group showed the impression of a less 'feminine' or 'soft' image of Hicks, in comparison to that of the group of English speakers.

As explained in Chapter 4, Mizumoto (2005, 2006) revealed that script-writers in the Japanese language continue to use gender and gender-specific sentence final particles in Japanese dramas, even though those forms are less commonly used in the real world than they used to be. Mizumoto suggests the effect of a 'gender filter' (people's expectations of the use of SFPs by women as a preferred language) on Japanese script-writers. Therefore, it is possible that more Japanese female forms are used in *ER* than in real-life Japanese discourse. The results of the analysis of the first phase of the study show that female SFFs are used by many female characters in various contexts in this series.

However, in the interview, two comments made by two female Japanese participants implied the expectation that *ER's* female characters would speak more politely and softly. Both of these participants appeared to compare the language of this episode to the language they normally use. Accordingly, it can be assumed that these two Japanese female participants have a 'gender filter', as explained above. Participant A suggested the use of female form, *kashira*. As explained in Chapter 6, *kashira* is categorised as 'role language' on the basis of Kinsui (2014). Although it is still used in dramas and films, as the study of Ozaki (1999) reveals, *kashira* is

not commonly used in the real world. The gender filter of those participants may have subconsciously affected their choices in the survey.

Participants from both groups attributed the strong character image of Hicks to her position of power within the hospital hierarchy. In this episode, most of Hicks' discourse is in interaction with Benton, who is a surgical resident, and thus lower in the hospital hierarchy than Hicks. It is possible that viewers would have a different image of Hicks if the discourse was set in a scenario where Hicks and the other character were in a different power and hierarchy dynamic. The choice of speech style may contribute to the character image of Hicks. Although the use of GASFF did not appear to contribute to the character image, in this episode Hicks is consistently using plain form (casual speech style). However, it is possible that a polite speech style would be chosen if the character was talking to someone in a higher position, thus projecting a softer image of the character.

In the case of the male characters, the results show a significant difference in terms of 'Diligent or slack/lazy' for Benton and Greene. The Japanese-speaking group had a more 'slack/lazy' image of these characters. On the basis of some of the comments in the interviews, it can be suggested that the attitude of the characters, and how they handled problems and situations, affected the participants' choices. In addition, it is possible that cultural differences — in particular, the social expectations of Japanese and English speakers — led to the differences in some aspects of the character image of Benton and Greene.

There was no comment in the interviews about the language used by the male characters, as opposed to that of the female characters. However, it is possible that some of the male-associated language — including 'role language' such as GASFF zo and the first-person pronoun boku — might have affected the choices made about male characters, and thus the image of the character, on a subconscious level.

Hatim and Mason (1997) argue that, if the interpersonal meaning is missing in the subtitled text, the audience of the subtitled text may receive a different impression. Hence, the notion of 'character equivalence' (Petrucchi, 2012) is important. As discussed earlier, as translation is considered a form of intercultural communication, the socio-cultural aspect of the source text is expected to be rendered in the target text. In the first phase, 'character equivalence' was investigated in text analysis. In order to mitigate the potentially subjective impression of a single researcher in looking at the data, this phase of the study investigated 'character equivalence' in a different way. By comparing the impressions of the viewers who watched the

original version and those of the viewers who watched the dubbed version, it is possible to investigate the degree to which the translator has achieved 'character equivalence'.

As there is not much difference between the ratings of various characters by the English and Japanese speakers, it is possible to say that character equivalence of the five characters in this episode of *ER* was achieved. However, this was a small-scale study, and not many comments associated character image and language use. Other factors may also contribute to viewers' image of characters. Elements external to the drama itself — such as expectations about how participants would approach their work — could possibly be included in these factors. Furthermore, as noted earlier, it is possible that the participants associated language use and character image subconsciously.

# 8.3.2 Unnaturalness of the language used in the Japanese dubbed version

The overall unnaturalness of the Japanese version was raised by the Japanese participants. It appears that they attributed this to a 'chokuyaku' (word-for-word translation). However, they only viewed the Japanese version and did not have the opportunity for cross-linguistic comparison with the original English version. Accordingly, there was no way in the present study to know whether literal translation contributed to their perceived unnaturalness of the target text.

Although there are few restrictions in terms of the length of each line as compared to subtitles, undertaking translation for dubbing imposes conditions upon the translator such as synchronising with the lip and body movement of the character. The translator inevitably faces a dilemma in terms of choice within such restrictions. Hence, the problem of the translation may not be as simple as the problem of literal translation. It is possible that translators are forced to make choices in order to adjust to lip and body movements, even though they are aware of the unnaturalness of the target text. For instance, Japanese-language Participant C noted that, when the taxi that Ross took arrived at the destination and the driver said, 'here we are', she found it unnatural that Ross replied 'nani?' (what?) in the Japanese version. In this case, Participant C could easily assume that the original version was 'what?'. The author found that the English version was, indeed, 'what'. According to Participant C, it is more natural to say 'e?' than 'nani?', which she believed was a literal translation. However, it is possible that the translator chose 'nani' due to lip synchronisation, as the actor would have to open his mouth wide to pronounce both 'nani' and 'what', whereas pronouncing 'e' does not require a wide-open mouth. In the interviews, as participants were not familiar with the complexity of AVT,

including the restrictions imposed by AVT such as dubbing synchronisation, participants appeared to assume that unnaturalness could be attributed to 'word-to-word translation'.

There are also questions over whether the judgement of 'unnaturalness' is compared to the language participants' use in daily life, or the language used in medical dramas. Two participants mentioned that they compared it to the language they use, and the other two compared it to the language of Japanese medical dramas. However, as all participants were living in Australia when this data was collected, their access to Japanese medical dramas have been limited. Therefore, it is possible that they subconsciously compared the language to that used in their daily life.

Intercultural transfer between source and target language has often been discussed on the basis of 'domestication' (adapting the source text to the target culture) and 'foreignisation' (accommodating the target text in the source language) (Venuti, 1995). In the interviews conducted as part of the present study, the Japanese-speaking audience commented on what they saw as the unnaturalness of the language in the dubbed version. Nevertheless, in order to sell the series, it is likely that the speech style would be accommodated to the target audience — an approach called 'domestication'. Through the textual analysis of the first phase of this study, some of the translation effect was found to be domestication, which aims to transfer the source language into the fluent natural target language. This includes the use of GASFFs and 'role language. As noted earlier, Hatim and Mason (1997) argue that domestication can generally be observed in the dubbed version of English-language television series translated into minority-status languages. Although Japanese is not a minority-status language, domestication can clearly be observed in the target text of the present study. This will be discussed further in the next chapter.

## **8.4** Chapter summary

This chapter has presented and discussed the results of the second phase of this study. It began by discussing the findings of one of the follow-up interview questions, which revealed the difficulties and dilemmas that the participants faced when making choices in the survey. The chapter then provided the survey data collected from the Japanese and English-speaking groups, on the basis of each character image, along with the results of the interview. The perceived 'unnaturalness' of the Japanese version' was also discussed, which was a common theme brought up by the participants during interviews.

## **CHAPTER 9: DISCUSSION AND CONCLUSION**

#### 9.1 Introduction

This thesis has presented the findings from a cross-cultural pragmatic comparison between the English original version and the Japanese translated (dubbed and subtitled) versions of the American TV drama series *ER*. The study aimed to investigate how aspects of hierarchy, power and gender in the source text were transferred into the target text.

The study consisted of two phases. The first phase was a comparative textual analysis of *ER* episodes, and focused in particular on address forms including second person pronouns and GASFFs as pragmatic and gender markers. The second phase of the study aimed to investigate 'character equivalence' by comparing the character image perceived by groups of English and Japanese speakers, via a survey and follow-up interviews.

The first phase of the study revealed that hierarchy, power and gender were more clearly displayed in the Japanese versions. This difference could be attributed to the effect of the choice of second person pronouns and the use of GASFFs in the Japanese versions. The results of the survey and the follow-up interview in the second phase of the study did not show much difference between the groups of English and Japanese speakers in the impression that they formed of the characters.

This chapter concludes this study. Section 9.2 summarises the key findings and answers the research questions, followed by a discussion of some of the broader issues including unnaturalness of certain aspects of the translation. Section 9.3 addresses the limitations of this study, and offers recommendations for future research. Section 9.4 provides some final thoughts.

## 9.2 Research questions

This study sought to answer the following four research questions:/

- 1. How are the pragmatic dimensions of communication presented in the English source text realised in the Japanese translated text?
- 2. How do the source text and translated text compare from the perspective of gender-related language choices?
- 3. To what extent can individual viewers' impressions of characters be traced to the translation choices reflected in the target text?

4. From an intercultural perspective, what issues arise as a result of the translation choices reflected in the dubbed and subtitled texts?

# 9.2.1 Research question 1: Summary of findings

How are the pragmatic dimensions of communication presented in the English source text realised in the Japanese translated text?

# 1) Within the hospital hierarchy:

- 1. In both conflict and non-conflict settings, the address form 'Doctor + surname' in the English version is translated to *sensei* or 'surname + *sensei*' in the Japanese versions.
- 2. In some cases, doctors call each other by their first names or surnames in the English version. However, in the translated versions of such cases, the use of first names and surnames are not always reciprocal. In some cases, more experienced doctors or those in higher positions address younger doctors as *sensei*, even though they call each other by their first names in the original version.
- 3. In the English version, the address form 'doctor' is used reciprocally. However, in the Japanese versions, *sensei* is used to address doctors in higher positions, or between equals.
- 4. In conflict settings, the shift of power and hierarchy is more clearly displayed in the target text than the source text, with footing changes between participants reflected in shifts in the choice of address form and second person pronouns.

#### 2) Outsider to insider:

- 1. In non-conflict settings, patients or patients' families address the doctor as 'Doctor + surname' in the English version, and *sensei* in the Japanese version. In terms of second person pronouns, 'you' is sometimes used in the English version but tends to be replaced by *sensei* in the Japanese versions, or omitted altogether. This is very common in such a professional context in the target culture, as there is no pragmatically appropriate second person pronoun form that is useful for polite professional encounters.
- 2. In conflict settings, the second person pronoun used by outsiders more clearly displays power toward the insider in the target text than in the source text.

As noted in Chapters 3 and 7, address forms including second person pronouns are effective pragmatic markers used to display power and distance between interlocutors. However,

choosing address forms including second person pronouns in the target language is demanding for AV translators, due to the restrictions in the process of subtitling and dubbing. Translators may also face difficulties making choices for the translation of the English second person pronoun 'you' in Japanese, which has numerous options. The use of many of the Japanese address forms is restricted, due to the hierarchical nature of Japanese society. For example, Japanese second person pronouns are expected to be used only between people of the same status, or from higher to lower in the hierarchy (Takubo 1997). First and second person pronouns tend to be omitted in Japanese discourse. Hence, second person pronouns may not even be used in professional encounters between colleagues of equal status. Second person pronouns are likely to be 'marked' forms (Yanagisawa, 1995). In addition, in some cases the English 'you' is replaced with other address forms, including *sensei*. *Sensei* is often used both within the hierarchy and from outsiders to insiders, in this study. As *sensei* is used to show deference from the speaker to the hearer, it is categorised as a 'negative politeness' (Brown & Levinson, 1978, 1987), but does not exist in the source text.

One focus of this study was on how the power and hierarchy displayed in the original English version were transferred into the Japanese versions. As explained in Chapters 3 and 7, although hierarchical relationships between staff exist in both Japanese and American hospitals, the distance and power between the characters in the source and target texts might be displayed differently. This is because of differences in the language system and culture.

Despite the restrictions and difficulties of transferring English address forms, including second person pronouns, into Japanese in AVT, the choice of particular second person pronouns and address forms, including *sensei* in the Japanese version, enables the display of power and distance between characters. In particular, the distinction between *sensei* and *doctaa* is the translator's original idea. The term 'doctor' is used reciprocally in the English version; but in the Japanese version, the translator established two categorisations for the translation of 'doctor' according to context. While *sensei* is used only from hierarchically lower to higher, *doctaa* is used from higher to lower or between equals. This distinction may help the Japanese audience to understand the hierarchical relationship between the characters. This categorisation is particularly effective for displaying the hierarchy between doctors when they address other doctors in the presence of an outsider. Since *sensei* is an honorific address form, if the doctor uses this term when introducing his/her colleague (insider) to the patient, it means that the doctor is showing more respect to his/her colleague than to the patient (outsider). Instead, the doctor addresses his colleague as *dokutaa* in the Japanese versions. This is based on the concept

of *uchi to soto* (insider and outsider) in Japanese culture. As noted in Chapter 7, in reality, the term *dokutaa* is not commonly used in Japan, and doctors reciprocally address each other as *sensei*, regardless of their status. In addition, some hospitals do not allow their staff to address their colleagues as *sensei* in front of outsiders, including patients.

There are also cases where the honorific address form *sensei* is used as a face-saving strategy in conflict settings. For instance, in the example of a conflict between Weaver and Romano in the institutional context, *sensei* is chosen for the translation of 'you' in the original English version. It could be argued that the use of *sensei* by Weaver is a negative politeness strategy that mitigates FTA toward Romano.

Some Japanese personal pronouns including *omee* are used as 'role language' or 'role language effect' in the context of *ER*. As such pronouns are likely to display power towards the hearer, they may contribute to the power relationship between the characters, as well as the character images. In some cases, involving in the context of outsider to insider, *omee* was used by the patient's family to the doctor. Using these forms may convey the outsider's power over the doctor, as well as a strong character image, as in the episode where Benton was assessing Melanie and then was confronted by her angry father.

# 9.2.2 Research Question 2: Summary of findings

How do the source text and translated text compare in their gender-related language choices?

- In the first phase of the study, many GASFFs were observed in the target text. As noted
  in Chapter 4, these forms contribute to the images of the characters, although they do
  not exist in English. In particular, female-associated SFFs are observed by many
  characters in various contexts.
- Japanese male-associated SFFs are used much less often than female-associated forms.
   Male-associated forms tend to be used effectively as communicative strategies to support particular character images.
- 3. 'Role language effects' are observed to support some male and female character images.

In the Japanese versions of *ER*, GASFF contributes to supporting stereotypical gender character images. However, as these forms do not exist in English, the question arises as to whether the forms support the image of the character in the source text. Hence, the notion of 'character equivalence' (Petrucci, 2012) was investigated in the present study.

The textual analysis in the first phase of the study found that stereotypical gender image was more evident in the characters in the target text than the source text, because of the use of GASFFs. Female forms are used for many characters in various contexts. However, as not all of the characters conform to stereotypical female-associated gender images, it could be argued that the use of these forms is at odds with the image projected by some of the female characters. In particular, the case of homo-sexual female character, Alyssa, the choice of female-associated SFF is problematic, since the forms are based on the traditional binary gender categorisation. Furthermore, female-associated forms used in the Japanese versions function, in effect, as positive politeness strategies that do not exist in the English version. Conversely, maleassociated forms are not as frequently observed as female-associated forms. The use of these forms may contribute to supporting some particular characters and context as communicative strategies. For instance, the male-associated form zo is often observed when Benton is talking to Carter, and contributes to the rough and arrogant image of Benton, as well as his power over Carter. In addition, there are cases where male-associated GASFF in combination with maleassociated second person pronoun, omae, contribute to portraying solidarity between male characters, as seen the example of Greene and Ross.

'Role language' does not exist in English, and it is used in limited textual genres in Japanese. It is commonly used as a pragmatic marker in virtual worlds, such as Japanese *anime* and *manga*. It may also be used in TV dramas and films. It contributes to supporting a particular image of a character or context in Japanese. Some GASFFs and second person pronouns are categorised as 'role language'. In some cases, 'role language' and 'role language effect' are used in combination with GASFFs.

The use of GASFFs as 'role language' or 'role language effect' contributes to the character images and the natural flow of the target text. However, the use of these forms results in 'domestication' (Venuti, 1995). There is also a danger of over-dramatisation in the application of 'role language' and 'role language effect' in AVT. Dramatisation (the use of certain devices to heighten the interest of excitement in a scene for dramatic purpose) commonly appears in many TV dramas. However, the degree of dramatisation is different depending on the genre and types of TV drama. As noted in Chapter 1, *ER* is a unique medical drama, and the authors and producers aimed to create realistic hospital scenes. There is a question about how much dramatisation should be accepted in the target text. This is another challenge for the AV translator.

## 9.2.3 Research question 3: Summary of findings

To what extent can individual viewers' impressions of characters be traced to the translation choices reflected in the target text?

- 1. The results of the survey in the second phase of the study did not show much difference in the impression of the characters by English-speaking and Japanese-speaking viewers.
- Regarding participants' impressions as expressed in the follow-up interviews, there
  were limited comments associated with the language used by characters and the choices
  made in the survey. Only two female participants mentioned the language used by
  characters and their images.
- 3. In the follow-up interview, two out of three female Japanese participants claimed that they would expect female characters to use more female-associated forms.

In the first phase of the study, 'character equivalence' was investigated within a limited capacity, with textual analysis by a single researcher. This was further investigated in the second phase of the study. As noted in Chapters 5 and 8, the process of viewing the drama while listening to the dialogue, and viewing the drama while reading the subtitles, are two different processes. Hence, the design of the second phase of the study only included the English original version and the Japanese dubbed version.

Overall, the results of the survey showed little difference in terms of the character images perceived by the English and the Japanese viewers. This could be because character equivalence is achieved reasonably well in the target text. It may also imply that the effect of the language choice in the target language (including GASFFs and 'role language') on the character image did not make much difference to the Japanese viewers' character images. Comments in the follow-up interviews on language choice associated with character image were very limited. However, as GASFFs and 'role language' are used by the characters in the episodes used for data collection, it is possible that such language affected the participants' choices on a subconscious level.

The first phase of the study found that female-associated forms were effectively used to support some of the character images. Nevertheless, some comments from the female Japanese participants implied an expectation that female characters should speak less forcefully. Those claims are based on the comparison between the language used in the target text and the language they normally use. Hence, on the basis of the concept of 'gender filter' by Mizumoto (2005, 2006), it would be possible that the participants have their own 'gender filter'. The

'gender filter' might be affected by their age (generation) as well as experience living overseas. It is possible that, if a group of younger female Japanese speakers living in Japan participated in the second phase of the study, the result may not have been affected by the 'gender filter'.

By relating the results of the first and second phases of the study, it is possible to conclude that address forms including the second person pronouns and GASFFs as pragmatic markers did not (at least on their own) determine the character image perceived by each viewer in this study. Some sociolinguistics studies have suggested that both linguistics and semiotic features such as clothes, gestures and make-ups contribute to the characterisations of a particular persona (Coupland, 2007; Eckert, 2012). In a TV series, character images may be affected by not only the linguistic elements but also by visual resources such as the appearance (e.g. closings, make-ups) and body-movement of the characters (actors). There is a possibility that these visual resources were prioritised over the paralinguistic choices of the characters when character images were perceived by each audience member at subconscious level.

It is also possible that the character images perceived by the participants are attributed to external factors. In the case of Benton, impressions of his character are related to how he handles problems. The English-speaking group characterised him as 'diligent'. One participant commented that he is a 'passionate professional who wanted to complete his job', even though Benton organised an organ transplant without obtaining consent from the patient's family. Conversely, more of the Japanese-speaking group characterised him as 'slack/lazy'. One participant commented that it was easy to make a choice on the survey sheet for Benton because he made a 'mistake'. The cultural difference between the two groups may have led to the differences in some aspects of the character images. For instance, it is possible that these choices are attributed to differences in professional expectations. The result might be different if two groups from different cultural backgrounds were compared. Furthermore, as society changes, Japanese participants of a different generation may not have the same expectations.

## 9.2.4 Research question 4: Summary of findings

From an intercultural perspective, what issues arise as a result of the translation choices reflected in the dubbed and subtitled texts?

The following two issues arose from the results of this study.

Intercultural transfer between the source and target language has often been discussed on the basis of 'domestication' (adapting the source text to the target culture) and 'foreignisation' (accommodating the target text in the source language) (Venuti, 1995). As note in Chapter 2, Venuti (2008) points out more foreignisation is found translated text of less powerful language while more domestication is seen in English text translated into than English target text translated from other source languages. Hatim and Mason (1997) argue that domestication can be observed in the dubbed versions of English-language television series translated into minority-status languages.

One of the aims of the present study has been to investigate whether 'domestication' occurs in the target text of ER. The findings show that, although Japanese is not a minority-status language, domestication can clearly be observed in the Japanese ER scripts analysed in this study, and more instances of domestication than foreignisation were observed.

Through textual analysis in the first phase of this study, some of the translation effects were found to be domestication, which aims to transfer the source language into the fluent natural target language. This includes the use of GASFFs, and choice of address forms including 'role language'/'role language effect'. These translation choices may sometimes result in the addition of positive politeness strategies (e.g. female-associated forms) or negative politeness strategies (e.g. the address form *sensei*) that do not exist in the source text, and these are considered to be the effect of domestication. In addition, the analysis of the first phase of the study shows that, although some of the GASFFs and address forms are omitted due to restrictions around the number of characters available in the Japanese language, some domestication effects were observed in the subtitled version.

In the interviews conducted in the second phase of this study, some of the Japanese audience commented on what they considered to be the unnaturalness of the language in the dubbed version. For a DVD series to be commercially successful, the translation choices should be accommodated to the target audience. As noted in Chapter 2, domestication and naturalness of the language has been in emphasised in AVT in both Western Europe in Japan. Although native speakers of Japanese find some unnaturalness compared with the language they normally use, it is possible that the translator aimed to transfer the source language into the natural target language, which includes 'domestication'. Although some 'domestication' appeared in the target text, some of the comments by the audience in the second phase of the study imply that

they expected greater degree of domestication. Concerning the issue of dubbing, particularly in the cases of close-up shots, the phonetic equivalence tends to be prioritised over naturalness in the process of lip-synchronisation (Chaume 2012). This may explain at least some cases in which dubbed text sounds unnatural. The translator may have been unable to find the balance between naturalness and lip-synchronisation within the constrains posed by dubbing.

Hence, 'finding naturalness' in the target text was a complex issue in this study. Two participants of the Japanese audience in the second phase of the study found that the language of *ER* sounded unnatural compared with the language they normally use. The language of TV dramas exhibits unnaturalness compared with the language normally used by Japanese people.

Two participants further commented that the language of the dubbed version was 'unnatural' compared with the language used in Japanese medical dramas. The question thus arises of how much access these viewers have to Japanese TV dramas in Australia. Although YouTube and online access is available for some of the Japanese dramas, it is still not very common for Japanese speakers living in Melbourne to subscribe to Japanese TV channels. Their exposure to contemporary Japanese language and culture is limited, compared with Japanese people living in Japan. As discussed in Chapter 2, naturalness in an AVT target text is achieved through language choices which are idiomatic or conventilnally approved by the native speaking audience. However, although these participates of the current study are native speakers of Japanese, they might not share the same expectation and convention shared with the Japanese people living in Japan due to their experience overseas.

## 9.2.7.2 Filters and impressions

Japanese scholars understand that texts can be affected by stereotypical gender images if the image reproduced via certain devices is viewed as a 'filter'. This study's findings show the possible effect of 'filters' in language choices in the Japanese versions.

The results of the first phase of the study reveal that female forms are often used for female characters in *ER*. Although the gender difference in language is becoming less salient in contemporary Japanese society, female forms are still often used in Japanese TV dramas. The language choices of script writers and translators do not always reflect changes in Japanese society, and may reflect traditional binary gender categorisations and stereotypical gender images that can be influenced by a 'gender filter' (Mizumoto, 2005, 2006), and the filter in the process of translation (Yabe, 2001). Nakamura (2013) points out that, although female forms are less often used in society, they can be 'recycled' and used in translation.

In the current study, although female-associated GASFFs are more often used by various characters in a range of various contexts, male - associated forms are more likely to be used in restricted range of context and only by particular characters as communicative strategies. In Chapter 6, it was noted that in terms of male -associated forms, this result is congruent with some studies (e.g. SturtzSreetharan, 2006a & 2006b). It would also be worthwhile to discuss the difference in translation choices between female-associated forms and male-associated forms in perspective of 'gender filter'. As previously discussed, there is a possibility that the choice of GASFFs by the translator is influenced by the 'gender filter'.

As stated in Chapter 2, the literatures show that female language is more often used by older generation speakers than those of younger generations. Since the Japanese female language is based on the traditional stereotypical binary gender categorisation, it would be possible to say that older generations tend (on the whole) to have more traditional views of gender than the younger generations. Also, the gender image and gender expectation in the society would be different depending on the person's age or generation.

Accordingly, the degree of influence of 'gender filter' in the translation process might differ depending on the translator's age or generation. The translator of *ER*, Mr Kihara (1933-) was in his 60's and 70's when he translated the series. Hence, there is a possibility that the translation choices made by Mr Kihara reflect the influence of a 'gender filter' to a greater degree than the choices made by translators in younger generations. For instance, female-associated forms are frequently used in both dubbed and subtitled version in the drama. Since there is no other Japanese translated version of *ER*, it is not possible to make any direct comparisons. Nevertheless, there is a possibility that younger translators may choose fewer female-associated forms in the translation process of the same text if they are less influenced by the 'gender filter'. In addition, there is a possibility that the choice of gender-associated forms is influenced by the translator's own gender. A female translator might make different choices in terms of the gender-associated forms in the process of translating *ER*.

Although the results of text analysis show the frequent use of female forms in the Japanese versions of *ER*, two out of three Japanese female viewers said that they expected more use of female forms by female characters in the dubbed version. It is possible that these comments may be influenced by participants' own 'gender filter'. As discussed in the previous section, these participants had been living in Australia for several years at the time of data collection. It is possible that living in Australia and having limited exposure to Japanese language and culture

may assist them in creating their own 'gender filter', which may be different from the one created by Japanese speakers living in Japan.

Although the second phase of the study was conducted on a small scale, it is possible that, as well as the translator and script writers being influenced by filters, the audience of TV dramas may employ a filter depending on their background, which might contribute to their impressions of the drama. Furthermore, these various filters may contribute to the creation of complex character images.

## 9.3 Limitations and suggestions for future studies

The present research has provided a model for future research in the area of AVT, by looking at a combination of text analysis and taking account of survey and follow-up interviews. This section outlines some ways in which this approach could be refined and improved when it is applied in the future research.

## 9.3.1 First phase of the study

One of the limitations of the first phase of the study is that not all of the episodes were analysed. *ER* consists of 331 episodes; 165 episodes from Seasons 1 to 11 were chosen for this study. As many of the characters from early seasons left after Season 11, episodes from Season 12 and 13 were not selected. Episodes were selected according to the availability of DVDs of the Japanese versions. Hence, it is possible that the study's findings may not be consistent with the findings of a textual analysis that involved all episodes of the series.

As the language of TV dramas is likely to be reflected by society, it is possible that translation choices in long-running series (like ER) are affected by linguistic shifts and changes over the years. For example, as gender differences in the Japanese language have become less salient in recent years, it is possible that more female forms were used in the Japanese versions of ER in the episodes from Season 1 than those from Season 15. Accordingly, a comparison of the discourse of episodes in early seasons and those in late seasons would be worthwhile.

As noted earlier, the textual analysis of the present study is particularly focused on the use of address forms/second person pronouns GASFFs. One of the aims of the current study was to investigate the association between the translation choices and character images. As noted in Chapter 4, some of the literature shows the strong contribution of Japanese address forms and GASFFs to constructing gender/ character image. However, construction of character image is

a complex issue and as the findings of this study shows such images are unlikely to be determined only by the choice of address forms and GASFFs. Therefore, in future studies, it would be valuable to incorporate a broader range of pragmatic/gender markers into the analysis.

In addition, the utterances in Japanese versions in each excerpt were back-translated into English for non-Japanese-speaking readers of this thesis. In this study, the English original and the Japanese translated versions were compared, and the back-translation was not involved in the process of the analysis. Nevertheless, it is important to acknowledge the limitations of back-translation choices by the translator (the present author). However, it would be impossible to perfectly transfer the meaning of the original Japanese into English.

# 9.3.2 Second phase of the study

A significant limitation of the second phase of the study was its scale. As the second phase only included 12 participants, it is difficult to generalise the results to the larger population of viewers.

The age of the participants was controlled to 30 to 49 years, on the basis of the demographics of all US adults and regular *ER* viewers between 1996 and 1997 (Brodie et al., 2001). However, a different generation of participants may perceive the characters differently. In future, it would be worthwhile to compare the results with those of groups of participants belonging to a different generation.

In this study, the Japanese participants had all been living in Australia for some years at the time of the data collection. Accordingly, they would probably have had more limited access to Japanese language and culture than Japanese people living in Japan. It is possible that their experience of living in Australia affected the choices they made in the survey, and their comments in the follow-up interview. In future research, it would be interesting to compare the two different language groups: one living in Japan, the other living in a different country.

In the second phase of the study, the interview was conducted soon after the survey, while the impressions of the characters remained in the participants' memory. The interviews were conducted without reference to the results of the survey, so there were no specific questions regarding the participants' answers in the survey. However, an alternative design for future research would be to conduct the interview after consulting the results of the survey. This would allow the interviewer to ask specific questions about the language use of the characters to be asked.

Another limitation was determining the reason for participants' choices in the survey. There were a limited number of comments regarding the choices on the survey sheet. The number of characters that the participants were to focus on in the survey was decided according to the results of the pilot study. However, during the second phase of the study, three participants commented on their difficulties completing the survey within the allocated time. It is possible that that those participants were forced to make prompt decisions without thinking about the reasons for their choices. Furthermore, the reasons participants gave and their comments are not guaranteed to be reliable: it is possible that the participants were not aware of the real reason for their choices, and the choice may have been made on a subconscious level.

## 9.4 Theoretical contribution of the current study

The current study investigated the cross-cultural and linguistic issues of AVT. Although the importance of the issues has been recognised and many studies have been conducted in this area, most of these studies are focused on European languages and there is limited research conducted in the Japanese language. This study contributes to the field by providing the insights into how cross-cultural aspects of the English - language TV drama *ER* are transferred into Japanese. From a practical standpoint, the study offers insights useful to Japanese AV translators by providing an account of complexities in choosing pragmatic markers in the process of translation.

The study also makes a contribution in the area of gender and language in Japanese. As far as the author is aware, there are limited empirical studies focused on the translation choice of gender-associated forms in Japanese dubbed and subtitled version of American TV dramas. The finding of the present study shows that although female-associated forms are widely chosen in various context, male-associated forms tend to be chosen only in particular contexts and for use by particular characters. The findings also suggest that male-associated forms are likely to be used as communicative strategies. The results also imply the influence of a 'gender-filter' (Mizumoto, 2005, 2006) on the translator which influences these translation choices.

The study employed a range of methods; the first phase was a text-analysis and the second phase involved survey and interview with audience-member participants who watched an episode of the drama in their own first language. The purpose of the second phase was to investigate character images perceived by each viewer. Although the first phase of the study demonstrated that address forms and GASFFs as pragmatic markers were employed as effective devices to display power and gender-images, the result of the second phase of the study did not

support the result of the text-analysis. By linking the findings of the first and the second phase of the study, it is possible to suggest that address forms and GASFFs as pragmatic markers do not -at least in isolation - determine the character image. Other factors such as appearance, body movement may be d prioritise over the language.

# 9.5 Final thoughts

Internationalisation in media has facilitated the accessibility of translated versions of TV dramas and films. Despite the problems and criticisms of the outcome of the translated text including *ER*, we should not forget the difficulties and restrictions of AVT. As Ramière (2006) claims, AV translators play a role in choosing the best way to facilitate the transfer of a film to a new environment. Unfortunately, the dedication and effort of AV translators are often not recognised. Translators are likely to remain 'invisible' (Venuti,1995, 2008). In concluding, I would like to pay tribute to Mr Takeshi Kihara, the translator of the Japanese versions of *ER*, who enabled the Japanese audience to share the magnificent world of *ER* with English speaking audience.

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#### **DVDS AND YOUTUBE**

#### ER DVDs

The following *ER* DVDs, Warner Home Video, for the Japanese market were utilised as data for the first phase of the present study.

The episodes were original broadcasted in the US from 1994 to 2005, and the executive producer was John Wills.

ER (Season 1)	Discs 1 -7 (Episode 1-25)
ER II (Season 2)	Discs 4-6 (Episode 11-22)
ER III (Season 3)	Discs 4-6 (Episode 11-22)
ER IV (Season 4)	Discs 1-6 (Episode 1-22)
ER V (Season 5)	Discs 1-6 (Episode 1-22)
ER VI (Season 6)	Discs 1-6 (Episode 1-22)
ER VII (Season7)	Discs 4-6 (Episode 11-22)
ER VIII (Season 8)	Discs 4-6 (Episode 11-22)
ER IX (Season 9)	Discs 1-3 (Episode 1-12)
ER X (Season 10)	Discs 1-3 (Episode 1-12)
ER XI (Season 11)	Discs 1-3 (Episode 1-12)

## YouTube

Japanese medical drama

Kinkyuubyootoo 24ji [ Emergency room 24 hours]

Season 1 Episode 1, Retrieved March 20th, 2017 from <a href="https://youtu.be/9STm-2XONGU">https://youtu.be/9STm-2XONGU</a>

Season 2 Episode 1, Retrieved March 25<sup>th</sup>, 2017 from <a href="https://youtu.be/QaYR3XEFQ">https://youtu.be/QaYR3XEFQ</a>

Season 2 Episode 12, Retrieved April 20<sup>th</sup> from <a href="https://you.tube/IGnAjRvN5Dc">https://you.tube/IGnAjRvN5Dc</a>

#### APPENDIX A: ETHICS APPROVAL LETTER



23 July 2008

Mrs Miyuki Arai PO Box 781 Glen Waverley VIC 3150

Reference: HE27JUN2008-D05966L&P

Dear Mrs Arai.

#### FINAL APPROVAL

Title of project: "Hierarchy & Gender in the Emergency Room: Pragmatic dilemmas in dubbing & Subtitling"

Thank you for your recent correspondence. Your responses have addressed the issues raised by the Division of Linguistics and Psychology Sub-Committee of the Ethics Review Committee (Human Research) and you may now proceed with your research.

Please note the following standard requirements of approval:

- 1. Approval will be for a period of twelve (12) months. At the end of this period, if the project has been completed, abandoned, discontinued or not commenced for any reason, you are required to submit a Final Report on the project. If you complete the work earlier than you had planned you must submit a Final Report as soon as the work is completed. The Final Report is available at: <a href="http://www.research.mg.edu.au/researchers/ethics/human">http://www.research.mg.edu.au/researchers/ethics/human</a> ethics/forms
- 2. However, at the end of the 12 month period if the project is still current you should instead submit an application for renewal of the approval if the project has run for less than five (5) years. This form is available at <a href="http://www.research.mq.edu.au/researchers/ethics/human\_ethics/forms">http://www.research.mq.edu.au/researchers/ethics/human\_ethics/forms</a> If the project has run for more than five (5) years you cannot renew approval for the project. You will need to complete and submit a Final Report (see Point 1 above) and submit a new application for the project. (The five year limit on renewal of approvals allows the Committee to fully re-review research in an environment where legislation, guidelines and requirements are continually changing, for example, new child protection and privacy laws).
- 3. Please remember the Committee must be notified of any alteration to the project.
- You must notify the Committee immediately in the event of any adverse effects on participants or of any unforeseen events that might affect continued ethical acceptability of the project.
- 5. At all times you are responsible for the ethical conduct of your research in accordance with the guidelines established by the University <a href="http://www.research.mq.edu.au/researchers/ethics/human">http://www.research.mq.edu.au/researchers/ethics/human</a> ethics/policy

ETHICS REVIEW COMMITTEE (HUMAN RESEARCH) LEVEL 3, RESEARCH HUB, BUILDING C5C MACQUARIE UNIVERSITY NSW. 2109 AUSTRALIA

Ethics Secretariat: Ph: (02) 9850 6848 Fax: (02) 9850 4465 E-mail: ethics.secretariat@vc.mq.edu.au

http://www.research.mq.edu.au/researchers/ethics/human\_ethic

### APPENDIX B: CONSENT FORM

Name of project: Hierarchy and gender in the emergency room: Pragmatic dilemmas in dubbing and subtitling

You are invited to participate in a study titled "Hierarchy and gender in the emergency room: Pragmatic dilemmas in dubbing and subtitling". The purpose of this study is to investigate the aspects of politeness and gender in original English and translated (subtitled and dubbed) text of the American TV drama FR.

The study is being conducted by Miyuki Arai, Department of Linguistics, Macquarie University (telephone 02 9850 9650, e-mail miyuki.arai@students.mq.edu.au). The study is being conducted to meet the requirements for the degree of PhD in Linguistics under the supervision of Dr Peter Roger (telephone 02 9850 9650, e-mail

Peter.roger@ling.mq.edu.au) of the Department of Linguistics, Macquarie University.

If you decide to participate, you will be asked to watch one episode of *ER* by DVD. Before viewing, you will be provided with brief information about five characters of the drama and survey sheets. While watching and after watching the episode, you will be asked to answer survey questions regarding impressions about each character.

You will also be asked to participate a following up interview after completion of the survey. The interview will be conducted in your first language and it will be tape- recorded. The entire duration would be approximately 1.5 hours and you will be asked to participate once.

Any information or personal details gathered in the course of the study are confidential. No individual will be identified in any publication of the results. Only the researcher and her supervisor will have access to the data.

If you decide to participate you are free to withdraw from further participation in the research at any time without having to give a reason and without consequence. If you are interested in the results of the study, you can contact Miyuki Arai in late 2009 to receive a short summary of the findings.

I, \_\_\_\_\_have read and understand the information above and any questions I have asked have been answered to my satisfaction. I agree to participate in this research, knowing that I can withdraw from further participation in the research at any time without consequence. I have been given a copy of this form to keep.

Participant's Name:		
(block letters)		
Participant's Signature:	Date:	
Investigator's Name:		
(block letters)		
Investigator's Signature:	_Date:	
The ethical aspects of this study have been approved	by the Macquarie University Ethics Review	
Committee (Human Research). If you have any complaints or reservations about any ethical aspect of		
your participation in this research, you may contact the E (telephone 02 9850 7854; email <a href="mailto:ethics@mq.edu.au">ethics@mq.edu.au</a> ).		
confidence and investigated, and you will be informed of the outcome.		
(PARTICIPANT'S COPY)		
(INVESTIGATOR'S COPY)		

# APPENDIX C: INTERVIEW QUESTIONS

1. Did you have any difficulties in choosing your answers in the survey? Please explain if you did.

アンケート回答欄の選択において、難しいことはありましたか。 もしありましたら、説明して下さい。

2. Were there any particular scenes or language use that affected your choice of answer? Please explain if there were.

特にアンケートの解答の選択に影響を及ぼしたと思われる シーンや言葉遣いなどはありましたか。もしありましたら、 説明して下さい。

3. Did you find any unnatural use of language in this episode?
Please explain if you did.

ご覧になったエピソードの中で、特に不自然な言葉遣いは ありましたか。もしありましたら、説明して下さい。