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Make the Invisible Visible: Attitudes, Barriers and Strategies for Inclusive Language in UK Translation and Healthcare Communication

BY

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Abstract

This dissertation explores how inclusive language is conceptualised and applied by professionals working across translation and healthcare communication in the United Kingdom, with particular attention to gender-neutral and disability-inclusive terminology. While inclusive language is increasingly acknowledged as central to equity, representation and accessibility, its implementation in practice remains uneven, especially within multilingual and institutionally constrained settings.

Drawing on in-depth, semi-structured interviews with professionals from translation, language services and health communication, the study employs thematic analysis to uncover how inclusive language is understood, challenged and enabled within real-world workflows. The analytical framework is grounded in Saldaña's two-cycle coding method and informed by scholarship in translation studies, sociolinguistics and health literacy. In doing so, the research brings practitioner voices into dialogue with wider academic debates on translator agency, linguistic ethics and inclusive communication.

The findings reveal inclusive language to be a dynamic and context-sensitive practice, shaped as much by ethical intent as by technological, institutional and interpersonal constraints. Participants reported barriers such as the limitations of gendered language systems, conflicting preferences around disability terminology, client hesitancy and the restrictive outputs of machine translation. Despite these challenges, professionals described using a range of strategies to advance inclusivity, including internal training, adaptation of style guides, collaborative development processes and reference to exemplary materials produced by third sector organisations.

This dissertation contributes to a growing body of work that sees translation not merely as a technical task but as a socially embedded and ethically charged activity. It calls for greater institutional support, sector-specific resources and participatory approaches to guideline development. Ultimately, it positions inclusive language as an ongoing, reflective practice; one that demands curiosity, care and a commitment to making language work more just for all those it seeks to represent.

Keywords: Inclusive language; translation; healthcare communication; gender-neutral language; disability-inclusive language; professional practice; United Kingdom.

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1. Introduction

Inclusive language has become an increasingly prominent concern across sectors such as education, media, healthcare and public policy. It refers to linguistic choices that aim to avoid marginalising or excluding individuals on the basis of gender, disability, race, sexuality or other aspects of identity (Lardelli, 2024; González Núñez, 2016). Within translation studies, scholars have drawn attention to the ethical responsibilities of translators, highlighting the role of language in shaping perceptions, identities and social realities (Tymoczko, 2006; Pym, 2017). From this perspective, inclusive language is not merely a matter of style or preference but an active engagement with issues of representation and equity.

In the United Kingdom, inclusive communication has taken on particular importance in the healthcare sector, where language plays a critical role in enabling individuals to understand information, navigate services and make informed decisions (Patient Information Forum, 2022). As health information is increasingly translated or localised for multilingual audiences, the challenge of ensuring clarity, cultural relevance and inclusivity has become more pronounced. Communicators and translators must consider how to avoid stigmatising language, reflect the preferences of different user groups and remain sensitive to evolving norms around gender identity and disability.

These efforts often take place within highly structured workflows, shaped by commercial pressures, institutional policies and technological tools. Translators and language service providers frequently work under time and budget constraints, using machine translation and translation memory systems that may reinforce binary or exclusionary norms (Chen et al., 2024). As a result, even practitioners who are personally committed to inclusive practices may find themselves constrained by client expectations, platform limitations or lack of guidance.

While international institutions such as the United Nations and national bodies like the NHS have begun to produce inclusive language resources, few of these are tailored to the needs of the translation industry. Moreover, much of the guidance currently available focuses on gender inclusivity, with relatively limited attention to disability, neurodiversity and intersectional considerations. The experiences of professionals attempting to integrate inclusive language into their day-to-day work remain largely undocumented in academic literature.

This dissertation responds to that gap by examining how inclusive language is understood and operationalised by professionals in the UK translation and healthcare communication sectors. It explores how practitioners define inclusivity, how they implement it in practice and how they navigate the ethical and institutional complexities that arise in the process.

1.1 Research Problem and Rationale

Despite growing recognition of the importance of inclusive language, there remains limited empirical research into how professionals interpret and implement it in practice. Most existing

scholarship has focused on theoretical frameworks, institutional guidelines or policy-driven recommendations, often overlooking the perspectives of those working directly with language in translation and communication settings (Schäffner et al., 2014; Prieto Ramos, 2021). The result is a knowledge gap between abstract principles and the situated decision-making that occurs in professional contexts.

This gap is especially visible within the UK translation industry and related sectors such as healthcare communication. While public-facing organisations increasingly emphasise inclusion in their mission statements and materials, the extent to which inclusive language principles are embedded in translation workflows remains unclear. Translators and language service providers are frequently required to balance their own ethical commitments with the expectations of clients, the constraints of technology and the norms of institutional style guides. These tensions are further compounded by the evolving nature of inclusive terminology, particularly around gender identity and disability, where preferences can differ significantly across communities and over time.

Emerging literature in translation studies has called for greater attention to these dynamics. Scholars such as Pym (2017) and González Núñez (2016) have highlighted the role of translators as ethical agents who make decisions that carry social and political weight. Others have emphasised the importance of participatory and community-informed approaches to translation, especially in contexts where language intersects with healthcare, identity or access to services (Tymoczko, 2006; Attig and López, 2020). However, few studies have explored how these ideas are taken up by practitioners within the constraints of real-world professional environments.

This dissertation aims to address that need by documenting how inclusive language is understood, negotiated and applied by professionals working in the UK. It draws on the perspectives of individuals from translation, language services and healthcare communication, providing insight into the practical realities of making language more inclusive in complex and often challenging settings. In doing so, the study contributes to both academic and professional discussions, offering a grounded account of inclusive practice that bridges theory and lived experience.

1.2 Research Aims and Objectives

The aim of this study is to investigate how inclusive language, particularly in relation to gender and disability, is perceived and implemented by professionals working in translation and healthcare communication in the United Kingdom. It seeks to understand how practitioners define inclusive language, what challenges they encounter in applying it and what strategies and resources they draw on in their work. By focusing on both translation and healthcare communication, the study considers how inclusive language functions across sectors that are closely linked yet subject to different institutional pressures and professional norms.

The research is guided by four main objectives:

- To explore how inclusive language is conceptualised by UK-based professionals working in translation and healthcare communication

- To identify some linguistic, technological and institutional challenges that arise when applying inclusive language in translation workflows

- To examine how client expectations and organisational policies influence the adoption of inclusive strategies

- To document tools, guidelines and collaborative practices used to support inclusive language in professional settings

Together, these objectives aim to generate a detailed understanding of how inclusive principles are interpreted and enacted by practitioners. The study focuses not only on individual choices, but also on the broader systems, relationships and values that shape professional language use in practice.

1.3 Study Scope and Scale

This is a small-scale qualitative study based on three interviews and one two-participant focus group conducted in the UK. The research therefore aims to highlight indicative patterns rather than provide exhaustive or generalisable answers. While participants referred to a range of professional text types, public-facing informational materials, especially patient information, emerged most often in their examples. These instances are presented here to illustrate broader inclusive language practices in translation and healthcare communication, without limiting the scope exclusively to this text type.

1.4 Proposed Research Questions

This dissertation is guided by four research questions that reflect the study's focus on professional practice, sectoral context and ethical complexity. These questions were developed to investigate both individual decision-making and the institutional factors that influence inclusive language use in translation and healthcare communication.

1. How do UK-based translators and language service providers perceive and approach inclusive language in professional translation, particularly for public-facing informational texts?

2. What challenges do professionals in translation and healthcare communication report when implementing gender-neutral and disability-inclusive language in their

workflows, which are possible to observe in a small-scale project?

3. How do institutional and client expectations shape the adoption of inclusive language practices across the translation and healthcare communication sectors?

4. What practical strategies, guidelines, or resources can be identified that help professionals navigate inclusive language in translation and related public-facing communication, that can be identified in a small-scale study?

These questions provide a framework for exploring the everyday realities of inclusive practice, with particular attention to the intersection of language, identity and institutional structure.

1.5 Structure of the Dissertation

The structure of this dissertation reflects its aim to explore inclusive language as both a practical and socially situated phenomenon. The first chapter introduces the study, outlining the background, research problem, rationale and guiding questions. It establishes the relevance of inclusive language in contemporary translation and communication contexts and positions the study within broader social and professional debates.

The second chapter provides a review of the literature, tracing how inclusive language has been theorised in translation studies, sociolinguistics and healthcare communication. It engages with academic discussions around gender, disability, translator agency and linguistic representation, while also identifying key gaps in sector-specific guidance and empirical research.

The third chapter outlines the methodological approach adopted for the study. It explains the rationale for using qualitative semi-structured interviews, describes the process of participant recruitment and data collection and details the thematic analysis framework used to interpret the findings. The chapter also considers ethical considerations and reflects on the positionality of the researcher.

Chapter four presents the findings of the study, organised around the four core research questions. It explores how participants conceptualise inclusive language, the challenges they face in applying it, the influence of institutional and client dynamics and the strategies they adopt to support inclusive practice.

The fifth chapter offers a critical discussion of the findings in relation to the existing literature. It highlights key tensions between professional values and structural constraints, compares sectoral differences and draws out broader themes relating to relational labour, translator agency and the evolving nature of inclusive language.

The final chapter concludes the dissertation by summarising the key findings, reflecting on the study's contribution to research and practice and identifying directions for future inquiry. It also offers closing reflections on the role of translators and communicators in shaping more inclusive linguistic landscapes.

2. Literature Review

Inclusive language in translation has emerged as a crucial area of inquiry at the intersection of linguistics, ethics, and social justice. As translation mediates communication across languages and cultures, it also plays a powerful role in shaping representation and reinforcing or resisting dominant ideologies. In particular, gender-inclusive and disability-inclusive language have become central to debates about visibility, identity, and linguistic agency in professional and institutional translation contexts.

While international organisations and language communities have begun to implement inclusive reforms, translators often operate within systems that prioritise standardisation, market expectations, or perceived neutrality. These constraints can lead to ambivalence, resistance, or uneven adoption of inclusive practices. At the same time, translation training institutions and educators face the challenge of equipping future professionals with the critical, linguistic, and technological tools to address these evolving norms.

This literature review synthesises current scholarship on inclusive language in translation, focusing on how it is conceptualised, how translators perceive and apply it, the institutional and market dynamics at play, and the pedagogical and technological resources supporting its implementation. It lays the foundation for the empirical portion of the dissertation by identifying key gaps in the literature and areas of ongoing contestation.

2.1 Conceptualising Inclusive Language in Translation

Inclusive language in translation refers to the deliberate use of linguistic strategies that acknowledge, respect, and represent diverse identities, for instance in relation to gender and disability. This concept challenges long-standing conventions of language use, where male or able-bodied norms are often embedded and unmarked, shaping representation in subtle but powerful ways. In translation contexts, inclusive language goes beyond terminological equivalence to engage with ethical and ideological considerations about whose perspectives are rendered visible and how.

2.1.1 Definitions and Competing Perspectives

At the heart of inclusive language lies a tension between linguistic neutrality and the politics of representation. In gendered languages like French, for instance, the so-called "generic masculine" is frequently critiqued for rendering women and non-binary individuals invisible. Reijngoud (2019, p. 11, 39) shows that debates around *écriture inclusive* in France reveal starkly opposed language ideologies; one that views language as socially constitutive and another that insists on its descriptive neutrality. Similarly, Muredda (2012, pp. 2–3) explores the shift from pre-modified terms like "disabled people" to post-modified "people with

disabilities", highlighting the ethical aim of 'person-first' language while also critiquing its potential to obscure systemic issues.

In translation studies, inclusive language intersects with wider discussions on translator agency and the ethics of representation. Tymoczko (2006, p. 447) argues that translation is inherently ideological and performative, or rather it constitutes a “metastatement” that reframes and recontextualises the source text in accordance with the translator's values and the socio-cultural expectations of the target audience. This places inclusive translation within the broader category of ethically engaged translation practices, where shifts in form reflect deeper shifts in social values.

2.1.2 Ethical and Ideological Debates

Scholars such as Tymoczko (2006) and Pym (2017) have positioned translation as a site of ideological struggle. Tymoczko emphasises that translations participate in constructing “identities and affiliations,” shaping social structures by what is included, excluded, or reframed (pp. 445–446). The ideological complexity of inclusive language becomes particularly evident in contexts where dominant linguistic structures resist reform, as in the backlash to inclusive reforms examined by Reyes (2013, pp. 339–340, 354), where language users defend existing norms as tied to identity, ownership, or rationality.

Pym (2017, pp. 363–366), meanwhile, critiques certain forms of ideological imposition in language policy, advocating instead for translation strategies that foster cooperation and trust. He is wary of frameworks that uncritically equate inclusive reforms with progress, noting the tensions that arise when translator-client dynamics are shaped by asymmetrical information and differing expectations. Yet, his emphasis on performative communication aligns with inclusive aims when translation is understood as a tool for social cohesion rather than mere transmission.

This tension between prescriptive reform and collaborative negotiation lies at the heart of inclusive translation. As Tonti (2024, p. 173) illustrates through the E-MIMIC project, even AI-assisted systems require human annotation that reflects ethical and inclusive decisions, particularly when translating institutional discourse. The role of human annotator then becomes a proxy for the translator’s ethical responsibility, deciding not only how but *what* to represent, and for whom.

2.1.3 Relevance to Communication, Representation, and Social Justice

Inclusive translation has profound implications for communication equity. As González Núñez (2016, p. 10, 22-23) observes in his discussion of translation policy, inclusive practices are often linked to broader goals of participation and non-discrimination. Translation then becomes a vehicle not only for linguistic equivalence but for social justice, mediating access to information, legal rights, healthcare, and political representation. In

healthcare, for example, the use of inclusive language directly impacts the readability, credibility, and accessibility of patient materials UK-based guidance from the Patient Information Forum (PIF) demonstrates how inclusive terminology, tone, and visual design can significantly enhance the accessibility of patient information across gender identities and disabilities (PIF, 2024). Strategies include co-production, audience-led language choices, and avoiding stigmatising or passive phrases such as "suffering from" or "wheelchair-bound", especially for gender-diverse and disabled audiences.

In sum, inclusive language in translation is not simply about lexical or grammatical choices. It is an evolving ethical practice shaped by ideological positions, institutional constraints, and the lived experiences of translators and their audiences. The translator's role as mediator is intensified in inclusive contexts, requiring not only linguistic skill but also social awareness and ethical reflexivity.

2.2 Translator Attitudes and Perceptions

Understanding how translators perceive and engage with inclusive language is essential to gauging the feasibility and ethics of its implementation in professional settings. These attitudes are shaped by personal beliefs, institutional norms, and broader sociolinguistic discourses on identity, neutrality, and visibility. Studies suggest that translators' responses to inclusive language range from cautious support to overt resistance, with many navigating a complex field of linguistic, ideological, and market-driven tensions.

2.2.1 Discrepancies Between Practitioners and Communities

A key point of divergence lies between institutional guidelines favouring person-first language and the preferences expressed by self-advocates in marginalised communities. Taboas et al. (2023, p. 567) found that while autistic adults in the US overwhelmingly preferred identity-first language (e.g. "autistic person"), professionals working in clinical and educational settings were significantly more likely to endorse person-first constructions (e.g. "person with autism") in line with institutional standards. This disconnect points to an ethical dilemma in translation: whether to prioritise institutional expectations or community-authored self-representations.

Similarly, Botha et al. (2023, pp. 875-876) argue that person-first language may have so-called "material consequences," perpetuating stigma by implying that conditions like autism are separable from personhood. Their commentary highlights how translators, by choosing linguistic framings, participate in either reinforcing or resisting dominant discourses. Translator choices therefore become performative acts that shape perception and potentially public policy.

2.2.2 Resistance and Professional Tensions

Despite the growing call for inclusive practices, some translators remain hesitant. Kuhn (2021, pp. 11–12, 854) documents that while explicit instruction in gender-fair language improves short-term usage, long-term adoption depends on motivation, linguistic competence, and social reinforcement. Her work shows that even when translators are equipped with the tools for inclusive language, internalised norms and lack of client pressure often lead them to default to traditional forms (p. 83). This aligns with Reyes (2013, p. 354), who found that users frequently oppose top-down language reforms, perceiving them as threats to linguistic identity or professional autonomy. Translators, especially those embedded in established institutions, may feel similarly constrained by longstanding conventions and client expectations.

Reijngoud (2019) and Bessaïh (2021) both suggest that in francophone contexts, inclusive language, particularly in its non-binary forms, can be perceived as an affront to linguistic purity or clarity. These perceptions may explain the cautious adoption of inclusive forms in French-to-English translation workflows, especially among translators who operate in technical, legal, or medical domains where perceived neutrality is essential.

2.2.3 Intersectional Awareness and Translational Ethics

Recent studies call for both a more community-informed and intersectional approach to translation. Fontenot (2022) emphasises the exclusionary effects of marked categories in both LGBTQIA+ and disabled discourses. Translators who fail to consult affected communities risk erasing identities or reinforcing majoritarian norms. Attig and López (2020) underscore this in their analysis of audiovisual translation, revealing how translations that ignored queer community input often resulted in misgendering or ridicule. In contrast, versions developed in collaboration with these communities were more accurate, respectful, and politically empowering.

These findings highlight a broader ethical imperative: inclusive translation is not merely a matter of terminology but of recognising lived experience. As Knisely (2020) shows in their research on non-binary French speakers, users develop and adapt forms that resist binary constraints, even in grammatically gendered languages. Translators who adopt such forms, and reflect on their implications, are engaging in a praxis of solidarity and justice.

2.3 Institutional and Market Dynamics

The implementation and sustainability of inclusive language in translation are not shaped solely by individual translator ethics or preferences but are deeply embedded in institutional frameworks and market pressures. These structures influence what is considered acceptable or

even possible in a professional context, often determining the success or failure of inclusive translation strategies.

2.3.1 Institutional Norms and Constraints

Institutional translation is characterised by standardisation, collectivity, and anonymity; features that promote consistency but can restrict innovation. As Schäffner et al. (2014, pp. 494, 507-508) observe, institutional translations reflect the voice of the institution rather than the translator, thus shaping the normative "subordination" of translators to organisational goals and workflows. Translation is guided by internal style guides, glossaries, and procedural norms that leave limited room for ideological or inclusive interventions unless such initiatives are embedded at a policy level.

This structural constraint is evident in the European Commission's Directorate-General for Translation (DGT), where inclusive language is formally addressed in the English Style Guide. However, López-Medel (2023, pp. 2–3) notes that despite a long-standing commitment to gender-neutral language in English, there is a lack of coherent implementation across other EU languages and guides, leading to inconsistency and translator uncertainty. Even when inclusive principles exist, their fragmented nature across departments and languages impedes their effectiveness as institutional norms.

Holden and Ziliotto (2023, pp. 3–5) echo this in the legal domain, emphasising the necessity of inclusive language in court and legal documents to avoid reinforcing discriminatory stereotypes. Yet they caution that many institutional guides adopt a static, prescriptive approach that fails to account for linguistic evolution or the situatedness of legal communication.

2.3.2 Market Logics and Professional Risk

Market dynamics further complicate inclusive language practices. As Prieto Ramos (2021) argues, institutional translation, especially in legal or supranational contexts, prioritises intertextual consistency and legal reliability over innovation, favouring "high precision" and "interlinguistic concordance" (p. 178). Translators working for the EU or the UN, for instance, are expected to maintain terminological coherence with prior texts, which may predate inclusive language reforms.

In commercial markets, translation agencies may resist inclusive language to meet client expectations or to avoid reputational risk. Lima (2022, pp. 649–650) highlights this tension in feminist translation projects, where translators must balance the ethical imperative of inclusive representation with the limitations imposed by tools, budgets, and client briefs. This reflects a broader market trend where innovation in language use is often undercut by risk aversion and cost-effectiveness.

Moreover, Monzó-Nebot and Lomeña-Galiano (2024, pp. 1–3) identify institutional translation and interpreting (ITI) as a field fraught with hierarchical power dynamics. Institutions may espouse inclusive values but often lack operational mechanisms to implement them effectively, reinforcing exclusionary practices through the very structures intended to facilitate access. They argue that inclusive translation must be situated within broader justice frameworks, requiring collaboration across stakeholders; not only translators, but also policymakers, trainers, and affected communities.

2.3.3 Inclusive Language as Organisational Change

There are, however, promising examples of institutional engagement with inclusive language as part of broader equity goals. Benson et al. (2013, pp. 231–233) document the University of Wisconsin–Eau Claire's development of a non-sexist language policy grounded in interdisciplinary collaboration and community feedback. Their approach emphasises iterative, participatory processes and living documents that evolve with language and culture.

Dufour et al. (2021, pp. 2–4) similarly advocate for inclusive translation and interpretation services in multilingual community settings. Their research underscores that inclusive language access is not merely about translation accuracy but about building social trust and enabling equitable participation in civic life. These case studies demonstrate that institutional support for inclusive language is most effective when coupled with sustained training, consultation, and feedback mechanisms. This trend is echoed beyond healthcare and translation, notably in the tourism industry. The IGLTA Foundation's Comprehensive Guide for LGBTQ+ Inclusive Communication in the Tourism Industry (2024) outlines sector-specific strategies for embedding inclusive language into guest interactions, booking systems, and staff training. It highlights the business and ethical imperatives of linguistic inclusivity, reinforcing the idea that inclusive communication enhances user trust, brand loyalty, and access across sectors (IGLTA, 2024).

2.4 Implementation Challenges

While inclusive translation is increasingly acknowledged as an ethical imperative, its practical implementation remains fraught with challenges. These challenges stem from linguistic constraints, institutional inertia, cognitive demands on translators, and diverging user expectations, particularly in contexts involving non-binary identities and grammatical gender systems.

2.4.1 Linguistic Constraints and Systemic Resistance

One of the most widely cited challenges lies in the structure of gendered languages. As Reijngoud (2019, p. 40-42) demonstrates, the debate around *écriture inclusive* in France has revealed entrenched ideologies that view language as either static or agentive. Many speakers and institutions regard grammatical gender as neutral or apolitical, dismissing reforms such as the *point médian* (e.g. acteur·rice) as excessive or illegible. This ideological resistance complicates uptake, even when inclusive alternatives exist within the language system.

Similarly, Olk (2002, p. 110) argues that translators often lack "critical discourse awareness" when confronted with gendered or stereotypical representations in texts. Without explicit training in discursive analysis, they may unconsciously reproduce exclusionary patterns, especially in institutional contexts that prioritise fluency and norm compliance over reflexivity.

Knisely (2020, p. 857) further highlights how grammatically binary languages such as French can exclude non-binary subjectivities by default. In his study of non-binary French speakers, respondents reported high variance in the forms they use, often drawing from neopronouns (e.g. *iel*, *yiel*, *ol*) and hybridised affixes (e.g. *allé.e*) to make themselves linguistically visible. However, these innovations face structural and cultural barriers to uptake in professional and educational contexts.

2.4.2 Cognitive Load and Workflow Integration

Empirical studies suggest that even translators with inclusive awareness encounter practical difficulties in integrating gender-fair language into their workflows. Lardelli (2024), for example, conducted a process-oriented case study in which six professional translators were instructed to use three different gender-fair strategies: neutral rewording, gender-inclusive characters (e.g. the gender star), and neosystems, while translating English texts into German. The study found that neosystems, which attempt to introduce new grammatical categories (e.g. *Lesens*), caused significantly more keyboard activity, translation problems, and perceived cognitive effort than more familiar strategies (pp. 1151–1153). Translators reported that such forms often felt unnatural or ambiguous, even when they aligned ideologically with the source text.

Paolucci and Lardelli (2023) similarly found that language professionals tended to favour inclusive forms using known typographic conventions (e.g. the colon in *Leser:in*) over novel neosystems, citing readability and comprehensibility concerns. Despite a willingness to engage with inclusive forms, translators noted that some strategies could hinder user understanding, especially when applied inconsistently across a text (pp. 6–7).

2.4.3 Machine Translation, Bias, and Intervention Strategies

Machine translation (MT) adds another layer of complexity. As Chen et al. (2024, p. 2) show, MT systems continue to exhibit significant bias in the handling of non-binary identities. Their benchmark, AmbGIMT, revealed that MT outputs for non-binary contexts not only suffer from lower translation quality, but also reflect more negative emotional attitudes than translations in binary-gender contexts. Even when gender constraints were provided in prompts, the systems often defaulted to binary assumptions or failed to disambiguate pronoun usage appropriately (p. 7).

These findings underscore the need for more robust intervention strategies. While lexical constraints in MT prompts improved performance, moral or abstract framing had limited impact (p. 7). For human translators using MT post-editing workflows, this raises questions about responsibility and effort distribution: should the translator correct systemic bias, and if so, at what cost?

2.4.4 Negotiating Stakeholder Expectations

Another critical implementation challenge is the divergence between institutional, client, and community expectations. Moser (2011, pp. 9–10) observes that institutional guidelines often promote gender-fair language as part of broader equality commitments yet lack enforcement mechanisms or adequate training for implementers. As a result, uptake is patchy and often dependent on individual initiative.

Moreover, as Knisely (2020) and Lardelli (2024) note, there is no universally accepted standard for representing non-binary identities in translation, particularly across language pairs with divergent grammatical systems. This lack of consensus can generate uncertainty for translators who wish to align with inclusive values but are unsure how to proceed without alienating clients or readers.

2.4.5 Language-System Considerations in Inclusive Translation

Inclusive language practices vary significantly depending on the grammatical resources of the languages involved. In English, inclusive forms are relatively accessible: the singular *they* has long been established as a neutral pronoun (Bodine, 1975; Baron, 2020), and occupational titles such as *chairperson* or *firefighter* offer neutral alternatives to gender-marked forms. Because English lacks pervasive grammatical gender in articles and adjectives, inclusive reform is often achieved through lexical choice rather than systemic restructuring.

By contrast, morphologically gendered languages such as French, Spanish or Italian encode gender across multiple grammatical categories, making neutrality harder to achieve.

Strategies include explicit coordination (*étudiants et étudiantes*), typographic devices such as the *point médian* (e.g. *étudiant·e·s*), and the creation of neomorphemes or neographic suffixes (Piergentili, 2024). These strategies, however, remain contested in both professional and public discourse (Reijngoud, 2019; Knisely, 2020), with critics raising concerns about readability and legitimacy. Experimental studies in German also suggest that while gender-fair forms may reduce stereotypical biases, they are not always fully effective or universally adopted (Sczesny, Formanowicz and Moser, 2016; Gabriel, Gygax and Kuhn, 2018). Importantly, such constraints should not be read as deficiencies of gendered languages but as markers of linguistic diversity, each with its own affordances for expressing inclusivity (Lardelli, 2024).

The challenge differs again in relation to disability-inclusive language, where the issue is less grammatical gender than lexico-syntactic framing. Translators must decide between person-first (*person with a disability*) and identity-first (*disabled person*) constructions, choices that are heavily debated across communities and contexts (Botha et al., 2023; Taboas et al., 2023). These decisions can affect not only representation but also readability and rhythm in target texts. In many languages, syntactic reordering is required to reproduce person-first formulations, while identity-first phrasing may resonate more with activist discourses.

For practitioners, these systemic differences underscore that no single language offers a universal model for inclusivity. Instead, translators manoeuvre within the resources of each linguistic system, making situated decisions that balance clarity, community preference and institutional demands. Recognising these cross-linguistic dynamics enriches our understanding of inclusive translation and foregrounds the need for flexible, context-sensitive strategies.

2.5 Guidance, Resources, and Emerging Tools

The practical implementation of inclusive translation relies not only on individual motivation or institutional mandates but also on access to structured guidance, robust resources, and evolving technological tools. This section examines existing guidelines, translation frameworks, and computational solutions that support inclusive and gender-fair translation, with a particular focus on multilingual contexts.

2.5.1 Style Guides and Institutional Frameworks

Style guides remain one of the most widespread tools for implementing gender-inclusive language in professional translation settings. In the European Union, for instance, the English Style Guide (ESG) of the Directorate-General for Translation (DGT) has evolved over the past two decades to reflect more inclusive norms. As López-Medel (2023, p. 5-7) outlines, the ESG moved from merely discouraging generic masculine pronouns to proactively

recommending neutral alternatives such as "they" or "themself". However, the coexistence of multiple EU style guides (some mandatory, some advisory) has led to inconsistencies that can frustrate translators attempting to maintain coherence across languages and institutions (p. 3). Moreover, while English guidelines favour neutralisation strategies, other EU languages (e.g., French, Spanish, German) often rely on gender specification, leading to conflicting expectations for translators working across language pairs (p. 2). The uneven adoption of inclusive principles between departments and languages signals a need for harmonised policies and cross-linguistic guidance. Unlike supranational style guides, UK-based resources such as those published by the Patient Information Forum prioritise co-production with users and adaptive communication based on feedback from lived experience. Their guidance explicitly recommends using terms preferred by communities, including disability-first or gender-diverse expressions when appropriate, and stresses the importance of revising tone and imagery to avoid embedded bias (PIF, 2024).

2.5.2 Community-Driven Practices and Queer-Inclusive Translation

Beyond institutional documents, community engagement offers critical insights into inclusive practices, especially for LGBTQIA+ and non-binary representation. Attig and López (2020, pp. 2–3) show how translations of audiovisual media like Netflix's *One Day at a Time* improved markedly when queer communities were consulted. Spanish and French dubbing versions that incorporated community-preferred forms such as *elle*, *ielle*, or {-e} suffixes offered more accurate and affirming representations of non-binary characters. In contrast, versions developed without such consultation often misgendered characters or turned them into punchlines, undermining the inclusive intent of the original (p. 2).

The key takeaway is that inclusive translation cannot rely solely on prescriptive guidelines. Instead, meaningful consultation with target communities, especially those directly affected by marginalisation, is essential to producing translations that are not only accurate but also respectful and empowering. Similar considerations are echoed in disability-inclusive guidance from UK healthcare professionals. Ensor (2024) stresses that terms like "wheelchair user" are preferred over "wheelchair-bound," and that inclusive advice must consider intersectionality and physical accessibility, not just vocabulary (Ensor, 2024; Gow, 2024). These findings reinforce the need for inclusive translation frameworks to be flexible and user-informed.

2.5.3 Gender-Neutral Translation in Machine Translation (MT)

Recent years have seen growing interest in adapting machine translation technologies for inclusive language use. Piergentili et al. (2023a) introduce the concept of *gender-neutral translation* (GNT) as a viable MT strategy, where gender-specific elements are replaced with neutral terms (e.g. "chairperson" instead of "chairman"). This approach avoids gender misassignments when the source language provides no explicit cues, especially

when translating from notional gender languages like English into grammatical gender languages like Italian or Spanish (pp. 2–4).

Building on this, the NEO-GATE benchmark and the GeNTE corpus (Piergentili et al., 2023b; Savoldi et al., 2025) offer evaluation datasets that allow researchers to test MT systems' ability to produce neutral outputs under appropriate conditions. The corpus creation process involved expert-led neutralisation of source texts and yielded multiple versions per segment, accounting for linguistic variation and offering a robust foundation for model training and assessment.

2.5.4 Neologisms and Computational Innovations

More experimental approaches are emerging through the use of neomorphemes and large language models (LLMs). Piergentili (2024) introduces *neomorphemes* (e.g., -@, -3, -u, -ə) as gender-neutral alternatives to traditional binary suffixes in Italian. By training multilingual LLMs on specially designed corpora (e.g., NEO-GATE), the author demonstrates that LLMs can learn to adapt to these novel paradigms through prompting, even without large-scale annotated datasets (p. 10). This represents a promising path forward for languages that lack established gender-neutral forms.

Similarly, the *INCLURE* toolkit and dataset (Lerner & Grouin, 2024) for French provides a parallel corpus of standard-to-inclusive French translation, accompanied by a rule-based system and a neural model trained specifically for this purpose. This resource allows users to experiment with different inclusive strategies, such as coordination, morphological combination, and neologisms, while keeping translation outputs consistent and reproducible (p. 2).

2.5.5 Educational and Collaborative Initiatives

Translation training programmes have begun integrating inclusive practices into their curricula. Lima (2022, p. 650, 660) describes a collaborative translation of prefaces to *Our Bodies, Ourselves* into Brazilian Portuguese, where students used CAT tools and revised machine-generated output through an inclusive and feminist lens. This pedagogical model not only developed students' technical skills but also raised critical awareness of inclusive practices and the ethical implications of language use.

Similar participatory approaches are evident in UK patient communication initiatives led by the Patient Information Forum. These include plain language adaptation, testing inclusive materials with LGBTQIA+ groups, and adjusting visuals and pronouns based on user feedback, as documented in their "Beyond Words, Into Practice" programme (PIF, 2024). Similarly, the IGLTA Foundation provides practical resources for cross-sectoral implementation, emphasising inclusive communication not only in digital design but also in in-person interactions, service delivery, and marketing content (IGLTA, 2024). Tools such

as *Inclusively*, developed through the E-MIMIC project (Tonti, 2024), also demonstrate how human annotation and classifier-based approaches can train AI systems to detect and rewrite non-inclusive content in institutional texts. Here, the human annotator's role is central, not just as a corrector but as a linguistic specialist who guides the AI model toward ethical reformulations (p. 173).

2.6 Training, Education, and Pedagogical Implications

The integration of inclusive and gender-fair language into translation and interpreting education presents both theoretical and practical challenges. These challenges relate to pedagogical design, educator preparedness, and the broader ideological framing of translator competence. As awareness of linguistic discrimination grows, so too does the demand for inclusive pedagogical models that equip future professionals with the ethical and critical tools to translate responsibly.

2.6.1 Inclusive Pedagogy and Translator Competence

The European Master's in Translation (EMT, 2022) competence framework underscores the importance of personal and interpersonal skills, critical reflection, and service provision in translator training. However, institutional translation often reinforces a default neutral or 'invisible' translator stance, which can obscure the importance of social engagement and inclusion (Svoboda et al., 2023, pp. 1–3). Translator education must therefore resist the reduction of training to technical proficiency and instead incorporate ethical reasoning and critical discourse awareness.

Olk (2002, p. 102) critiques the absence of critical discourse awareness in many translation curricula, particularly in cases where students unconsciously reproduce gender stereotypes or ideological biases. He argues for explicit training in the effects of lexical choices and the socio-political consequences of translation strategies; skills that are essential for inclusive practice but frequently underdeveloped in traditional models.

Kuhn (2021, pp. 80–83) reinforces this by showing that students exposed to gender-fair language through both instruction and implicit exposure (e.g. reading inclusive texts) were more likely to use such forms themselves. She concludes that explicit instruction and visibility of inclusive forms are key to promoting sustainable change in language use.

2.6.2 Teaching Gender-Fair and Disability-Inclusive Strategies

Efforts to teach inclusive language must extend beyond gender to include disability and neurodiversity. Eikel-Pohen (2019, pp. 1–4) offers a compelling example of a language instructor adapting her German curriculum for a blind student using Universal Design

Principles (UDPs) and multimodality. Her experience highlights the inadequacy of existing materials and institutional support This gap is mirrored in professional healthcare communication, where inclusive formats are still underused despite clear guidance. Gow (2024), for example, notes that blind and partially sighted patients benefit from direct, non-patronising descriptions and prefer person-first constructions like “a person with sight loss,” rejecting collective terms such as “the blind” which dehumanise the individual, as well as the significant time commitment required to ensure accessibility. This case demonstrates the need for systemic reform in language education that prioritises access, student agency, and multimodal teaching strategies.

Sosoni (2017) similarly calls for tailor-made theoretical models in translation pedagogy that can address the complex realities of EU texts and their hybrid, intercultural nature. She argues that traditional concepts such as “source text” and “equivalence” are inadequate when dealing with multilingual and inclusive contexts, especially where translation functions as political communication (pp. 76–79). Pedagogy should thus encourage functionalist and activist approaches that embrace variability and context-specificity.

Malkawi et al. (2024) push this further by illustrating how culturally inclusive prototyping in higher education institutions (HEIs) must consider both gender segregation and linguistic diversity. Their prototype for Saudi HEIs uses dual-language interfaces and gender-specific classroom access, tailored to local cultural norms (pp. 625–627). While the political context may differ, the pedagogical insight is transferable: inclusive language and system design must reflect both linguistic and cultural pluralism.

2.6.3 Bridging Education and Institutional Realities

While educators can foster inclusive attitudes, they must also prepare students to navigate conservative or standardised institutional environments. As Schäffner et al. (2014, p. 494) point out, institutional translation is typically collective, standardised, and controlled by hierarchical norms that limit individual agency. Translator training must therefore prepare students for ethical negotiation, helping them develop strategies to push for inclusive practices within the bounds of institutional constraints.

Sosoni (2017) and Svoboda et al. (2023) all suggest that closer collaboration between academic institutions and international organisations can improve training outcomes. Programmes like the EMT, internships, and curriculum co-design can aid students. The IGLTA guide further exemplifies how training and stakeholder engagement can reinforce inclusive practices in professional settings, offering clear staff discussion topics and feedback metrics for sustainable implementation (IGLTA, 2024), developing not only technical proficiency but also the critical and ethical reflexivity needed to challenge systemic bias.

2.7 Literature Review Concluding Remarks

Inclusive language in translation is not a purely linguistic concern but a deeply ethical and political practice that intersects with questions of representation, power, and social responsibility. As this review has shown, the adoption of inclusive strategies varies widely depending on linguistic systems, institutional contexts, and translator beliefs. While some translators and organisations champion inclusive forms as tools of resistance and empowerment, others perceive them as incompatible with norms of clarity, neutrality, or client expectations.

Despite increasing awareness, the field still faces significant challenges including the lack of standardised inclusive frameworks across languages, the cognitive and technical burdens placed on individual translators, and limited integration of inclusive practices in translator training. However, promising developments in community-driven approaches, institutional guidelines, and AI-assisted tools are reshaping the landscape.

This literature review provides a critical foundation for exploring how inclusive language is negotiated in practice, particularly by translators working with gendered and disability-related content. The subsequent chapters will examine these dynamics through empirical research, contributing to ongoing conversations about translation ethics, institutional reform, and inclusive pedagogy.

2.8 Finalised Research Questions

This literature review addresses the following questions, which guide the direction of the study:

1. How do UK-based translators and language service providers perceive and approach inclusive language in professional translation, particularly for public-facing informational texts?

2. What challenges do professionals in translation and healthcare communication report when implementing gender-neutral and disability-inclusive language in their workflows, which are possible to observe in a small-scale project?

3. How do institutional and client expectations shape the adoption of inclusive language practices across the translation and healthcare communication sectors?

4. What practical strategies, guidelines, or resources can be identified that help professionals navigate inclusive language in translation and related public-facing communication, that can be identified in a small-scale study?

3. Methodology

3.1 Research Design and Justification

This study adopted a qualitative research design to explore how inclusive language, particularly gender-neutral and disability-inclusive terminology, is understood and implemented in the UK translation industry. Given the exploratory nature of the research questions, qualitative methods were deemed most appropriate for capturing the nuanced perspectives of translation professionals and healthcare communication experts. Semi-structured interviews were chosen for their ability to elicit rich, detailed narratives while allowing participants to guide the conversation in meaningful directions (Kvale, 2007). In addition, one small focus group with two healthcare communication professionals was conducted to enable interactional insight and convergence checking across roles.

Thematic analysis was selected for its flexibility and capacity to identify patterns across diverse data sets (Braun and Clarke, 2006). Saldaña's (2012) structured coding process enabled an iterative, layered understanding of how inclusive language is navigated in practice. As a researcher with a background in translation and communication, I brought a dual lens of familiarity and critical distance, which helped shape the study design and analytical lens through a reflexive process. I maintained a reflective log during data collection and analysis to surface and challenge assumptions, especially in areas where my own values aligned closely with participant responses.

The full study protocol is provided in Appendix B.

3.2 Participant Recruitment and Sampling

Participants were purposively selected to reflect three stakeholder groups relevant to inclusive communication: freelance translators, representatives from language service providers (LSPs), and healthcare communication experts. Recruitment was facilitated by the Association of Translation Companies (ATC), whose Chief Executive Officer acted as gatekeeper and distributed the call for participants to relevant professionals; the invitation text is reproduced in Appendix D.

Purposive sampling ensured participants had direct, relevant experience with inclusive language in professional practice. This non-probability sampling strategy is common in qualitative research when seeking in-depth insight from information-rich cases (Palinkas et al., 2015). The inclusion of these groups allowed for a triangulated view of both translation production and commissioning. Professionals based outside the UK were excluded to maintain cultural and regulatory consistency.

Participants were eligible if they:

- Were based in the UK;
- Worked professionally in translation, LSP contexts, or healthcare communication;
- Had experience translating into or working with English;
- Were willing to participate in a 30-minute online interview.

Recruitment materials included a Participant Information Sheet, Consent Form, and ethics approval confirmation.

A maximum of ten participants was approved. Data collection concluded after three one-to-one interviews and one focus group with two healthcare communication participants (total n = 5), on the basis of thematic sufficiency, convergence across roles, and time constraints.

3.3 Data Collection Methods

Semi-structured interviews were selected to allow for both consistency across participants and flexibility to explore specific insights in more depth. Three interviews were conducted online via Microsoft Teams, each lasting approximately 30 minutes. A further online focus group was conducted with two healthcare communication professionals. All sessions were audio-recorded with consent and transcribed verbatim by the researcher. Session dates, modes and durations are summarised in Appendix I.

An anonymised transcript and a coded excerpt from Participant B1 are provided (Appendices J and L).

Due to time and geographical constraints, online sessions ensured accessibility, convenience, and adherence to ethical standards. While no formal pilot was undertaken, the interview and focus-group guides were refined in consultation with a supervisor. After each session, brief reflexive notes were written to record immediate observations and emerging ideas.

The question routes were adapted slightly for each participant group but covered five main areas:

1. Definitions and understandings of inclusive language;
2. Practical challenges in implementation;
3. Market and client expectations;
4. Institutional resources and guidance;
5. Strategies and future improvements.

Interview and focus-group guides are included (Appendices E–H). Interviews, the focus group, and transcription followed best practices for qualitative reliability, including verbatim capture of verbal data and reflexive attention to context (Poland, 1995).

3.4 Data Analysis and Presentation of Results

Data were analysed thematically following Saldaña (2012). First-cycle coding was conducted manually using descriptive and *in vivo* codes to capture key concepts and participants' own language. Codes were applied to participant utterances only, while interviewer or moderator turns were used for structural coding to segment the corpus by topic and were excluded from thematic frequency counts. Analytic memos were written where interviewer phrasing or group interaction appeared to shape responses.

3.4.1 Coloured Transcripts and First-Cycle Coding

Coding was carried out manually in Microsoft Word and Excel. To ensure transparency, transcripts were colour coded during the first cycle of analysis. Each colour represented a distinct descriptive or *in vivo* code, with overlapping colours used when a segment was relevant to multiple codes. Margin notes were added to record analytic memos and clarify coding decisions.

Figure 3.1 presents one excerpt from an interview with participant B1 to illustrate how codes were applied and colours used. The full example is provided in Appendix L, which shows the complete colour-coded passage with a corresponding coding legend in the description.

Participant B1 I can't speak every language, but I know that in some cases, the neutral pronoun translates as "it" rather than "them," which obviously isn't appropriate when referring to people with non-binary identities. So we created a whole piece on how to handle this properly.
Interviewer Yep, yep — yeah, exactly.
Participant B1 We focused on how to avoid this as much as possible in the translations, aiming to make the texts much less gendered. I can't go into too many specifics because of an NDA — I worked on the project myself, but we collaborated extensively with linguists. Our company offers a lot of cultural awareness solutions. We have linguists based in markets who help with transcreation, localisation, and providing cultural insights to clients. So, we coordinate those efforts closely.
Interviewer Yep. Mm-hmm.
Participant B1 This was essentially to help us kind of like define the framework for that client of what that look, what gendered sorry non gendered language in their columns looks like when it comes to translation. So that's how it kind of came about.

Figure 3.1: Example of colour-coded transcript excerpt (Participant B1). This excerpt illustrates how first-cycle codes were applied to the data using colour highlights. Each colour corresponds to a distinct code: yellow

indicates Visibility and Representation, red indicates Resistance, Cost and Time, and pink indicates Terminology Gaps. Overlapping highlights show where multiple codes were applied to the same segment. The full excerpt and coding legend are provided in Appendix L.

3.4.2 Thematic Coding Table and Second-Cycle Analysis

After initial coding, data segments from the three interviews and one focus group were extracted into a consolidated spreadsheet. Segments were grouped into provisional categories according to similarity of meaning and their relevance to the research questions. Through iterative comparison, categories were refined and combined into broader themes during the second cycle of coding.

The thematic coding table documented this process (see Appendix K). Each row contained the anonymised participant segment, its first-cycle code(s), the category it was assigned to, the final theme, the relevant research question(s), and a brief rationale. This created a full audit trail linking raw data to the seven themes that structured the findings.

3.4.3 Mapping Themes to Research Questions

The relationship between the seven themes developed during coding and the four research questions is summarised in *Table 3.1* (see overleaf). This table provides the analytic structure for Chapter 4 and illustrates both the scope of each theme and the ways in which themes influence one another.

The themes are labelled T1–T7 for clarity:

- T1: Inclusive language as ethical imperative and representation
- T2: Institutional norms and client expectations
- T3: Terminology and strategy choices
- T4: Technology and workflow limitations
- T5: Audience considerations and health literacy
- T6: Cross-sector comparisons (translation vs healthcare communication)
- T7: Resources, guidelines and training

In the matrix, primary relationships (shown as solid arrows) represent direct influences between themes. For example, technology and workflow limitations (T4) strongly shape both institutional norms (T2) and cross-sector comparisons (T6), while audience considerations (T5) directly influence sectoral comparisons (T6). Secondary relationships (shown as dashed arrows) represent more contextual or supporting influences, such as how terminology and strategy choices (T3) feed into institutional norms (T2) and sectoral comparisons (T6), or how institutional norms (T2) shape the development and use of resources (T7).

At the centre of the map is T1 (ethical imperative and representation), which connects to all other themes. This central positioning reflects how participants consistently framed inclusive language as a matter of responsibility, visibility and fairness, with all other themes relating back to this core ethical dimension.

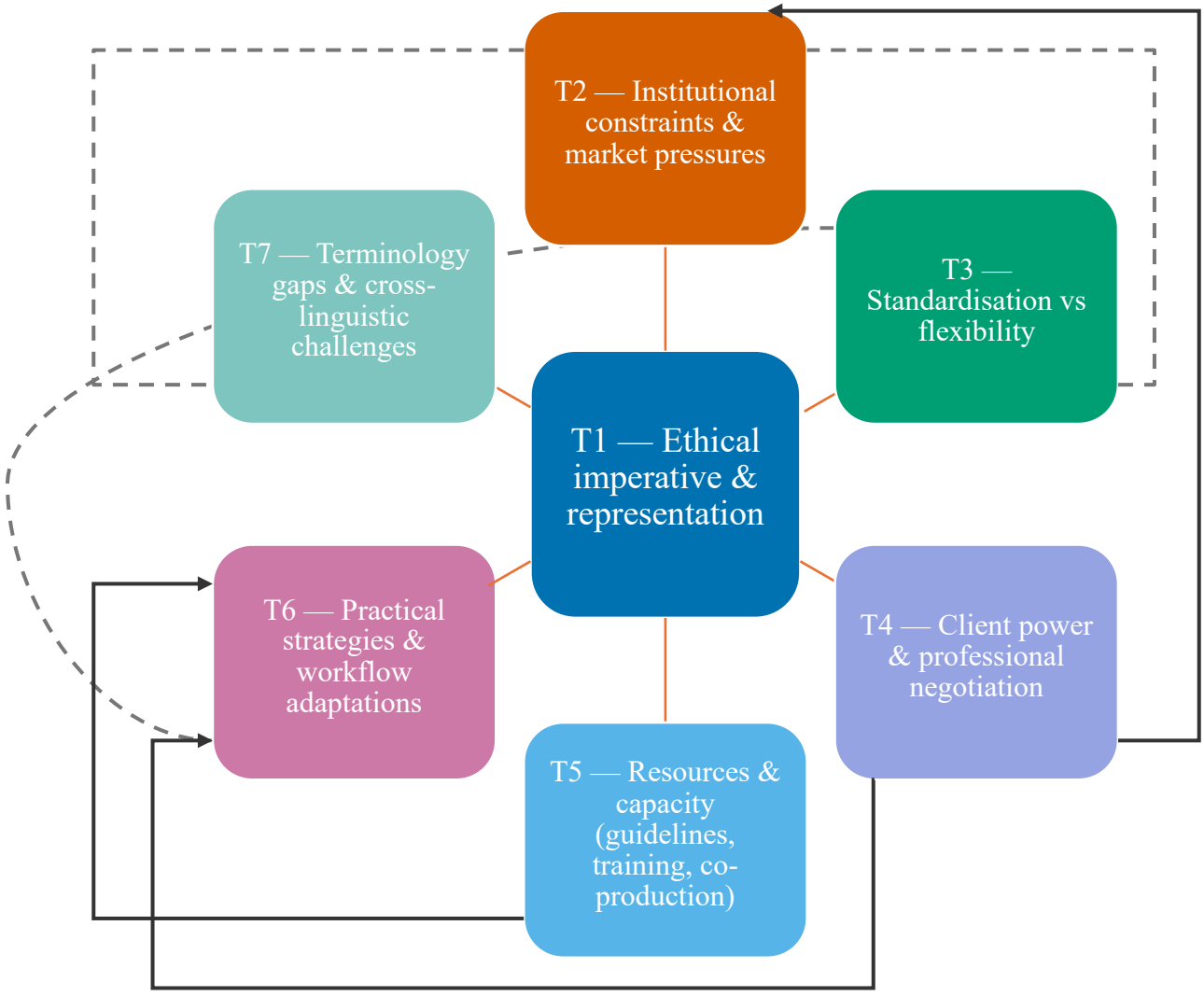

Table 3.1: Theme contribution matrix (T1–T7) mapped to research questions (RQ1–RQ4).

3.4.4 Trustworthiness

Thematic validity was supported by cross-checking themes against raw data and ensuring internal coherence and analytical distinctiveness. To enhance trustworthiness (Lincoln and Guba, 1985), credibility was achieved through triangulation of participant roles, transferability through detailed description of context and method, dependability through the audit trail described above, and confirmability through reflective memos and supervisory feedback.

3.5 Ethical Considerations

This research received ethical approval from the University of Surrey Ethics Committee (ERM ID 1865) (see Appendix A). Participants received detailed information about the study via the Participant Information Sheet (see Appendix C) and provided informed consent prior to data collection. All data were anonymised, and participants were reminded that they could withdraw up to one week after their session.

Interviews and the focus group were coded with alphanumeric identifiers (e.g. A1, B1, C2, C3) to protect anonymity. For the focus group, ground rules regarding confidentiality and respectful discussion were set out at the start, and participants were reminded not to disclose identifiable information about third parties. Consent forms were stored separately from transcripts on a secure, password-protected university server. Audio recordings were deleted after transcription verification. Identifiable data were destroyed at the conclusion of the project, and anonymised data will be retained for ten years in accordance with institutional research data policies.

3.6 Limitations of the Methodology

The small sample size limits the generalisability of the findings, which is consistent with the qualitative and exploratory nature of the research. Although thematic sufficiency was reached across three interviews and one focus group with two participants, some perspectives (for example, a wider range of freelance translators or multilingual end-users) may be underrepresented. Online delivery limited observation of non-verbal cues in full and, in the focus group, may have shaped turn-taking. As a student researcher with prior experience in inclusive translation and health communication, there is a possibility of unconscious bias during interpretation; this was mitigated through reflexive journalling and supervisory discussion during coding.

A document analysis of inclusive language guidelines was proposed in the original design but was ultimately excluded to allow greater analytical depth in the interview and focus-group-based thematic analysis. Future research could incorporate comparative guideline

analysis, observational data within organisations, or reception studies with end users to complement the practitioner-focused approach adopted here.

4. Findings and Discussion

This chapter presents the findings of the study, examining how inclusive language, particularly gender-neutral and disability-inclusive forms, is understood and applied by professionals working in the UK translation industry and adjacent healthcare communication contexts. Drawing on three semi-structured interviews and one two-participant focus group, the discussion addresses the study's four research questions through analysis of seven themes identified in the coding process.

As outlined in Chapter 3, thematic analysis was conducted using Saldaña's (2012) two-cycle framework. Descriptive and *in vivo* codes were consolidated into categories and then into themes, with illustrative excerpts colour-coded and documented in the thematic coding table (Appendix K). The relationship between themes and research questions is summarised in Table 3.1 (Chapter 3), which provides the analytic structure for this chapter.

The chapter is organised around the four guiding research questions:

1. How do UK-based translators and language service providers perceive and approach inclusive language in professional translation, particularly for public-facing informational texts?

2. What challenges do professionals in translation and healthcare communication report when implementing gender-neutral and disability-inclusive language in their workflows, which are possible to observe in a small-scale project?

3. How do institutional and client expectations shape the adoption of inclusive language practices across the translation and healthcare communication sectors?

4. What practical strategies, guidelines, or resources can be identified that help professionals navigate inclusive language in translation and related public-facing communication, which can be identified in a small-scale study?

Each section (4.1–4.4) corresponds to one of these questions, integrating quotations from participants with insights from relevant literature. The findings are discussed in terms of four recurrent concepts: representation, visibility, empowerment, and responsibility, which emerged across the dataset and serve as the organising lens for the cross-theme synthesis (4.5). This approach ensures that the analysis not only reflects participants' lived experiences but also situates them within wider scholarly and professional debates.

4.1 Perceptions and Approaches to Inclusive Language

Participants expressed varied understandings of what inclusive language means in practice, shaped by professional role, sectoral norms, and audience expectations. Despite these differences, inclusivity was consistently described as a communicative responsibility connected to representation and visibility. Translators and LSPs tended to frame inclusivity in terms of agency and organisational positioning, while healthcare communicators foregrounded accessibility and the heterogeneity of audiences.

A1, a freelance translator, described inclusive language as a means of "making the invisible visible," linking it to broader questions of power and authorship. For them, inclusive practice was not a stylistic preference but an act of recognising and affirming identities historically marginalised in public discourse. This understanding resonates with scholarship that views translation as performative and ideological, where language choices actively shape social realities (Tymoczko, 2006).

B1, representing a mid-sized UK-based LSP, associated inclusive language more closely with client requirements and institutional positioning. They explained that their company's B Corp certification had prompted awareness-raising initiatives such as voluntary pronoun sharing and internal webinars. Yet they acknowledged that industry uptake remains uneven, often dependent on client demand, a dynamic that echoes Pym's (2017) observation that market pressures frequently limit translators' ability to innovate.

The healthcare focus group emphasised inclusivity as both representational and audience-led. C2 characterised practice as "balancing inclusivity with accessibility and clarity," noting the need to update language without alienating readers. C3 highlighted the heterogeneity of audiences and the challenge of writing for people with low health literacy, where inclusivity may conflict with brevity or clarity. They pointed to the example of "people of the global majority," recognising its ethical intent but questioning its usability in short patient-facing materials. Their preferred strategy was a "define-then-use" approach, introducing new terms with explanation before applying them consistently.

Together, these accounts present inclusive language as a reflective practice negotiated at the intersection of representation and readability. For translators and LSPs, inclusivity was linked to professional responsibility and institutional stance, while for healthcare communicators it was grounded in audience diversity and accessibility. This dual emphasis sets the stage for the next section, which explores the barriers that arise when inclusive commitments confront structural and linguistic constraints.

4.2 Challenges of Implementing Gender-Neutral and Disability-Inclusive Language

Although participants supported the principles of inclusive language, they described the step from belief to practice as fraught with obstacles. Their accounts reveal not only technical problems but also the lived difficulty of working within systems that often resist change.

One major challenge lay in the structure of language itself. A1, translating from Romance languages into English, often felt hemmed in by grammar. In Spanish or French there are few neutral options, and the masculine form continues to dominate group references. They recalled UNICEF Latin America's insistence on repeating "niños y niñas" to make girls visible, a deliberate break from convention. While powerful, it was also cumbersome, and A1 admitted that such strategies often spark debates about readability and legitimacy. In their words, "the language itself doesn't always give you an easy path."

Uncertainty around disability-related terminology posed a different kind of difficulty. C1 observed that person-first phrasing such as "person with a disability" has long been standard in healthcare communication, yet more and more communities now prefer identity-first terms such as "disabled person." The lack of consensus leaves practitioners uncertain. As C1 put it, "you want to get it right, but who decides what 'right' means when even communities don't agree?"

Audience diversity added further complexity. The focus group highlighted the risk of alienating readers with low health literacy through unfamiliar terms. C3, working on patient information, explained that "if a term isn't familiar, it can just shut people out." They pointed to "people of the global majority" as an example, ethically motivated but dense and alien to many patients. Their preferred solution again was a "define-then-use" approach, where a new term is explained carefully once and then applied consistently. Still, both C2 and C3 admitted this is a compromise rather than a perfect fix.

Participants also emphasised the additional time and effort inclusive practices demand. A1 noted how much longer it takes to edit machine-translated drafts so that they respect non-binary characters: "It's not that I don't want to do it, but it adds hours to something that already has no slack." C2 and C3 described similar pressures in patient-information workflows, where strict length limits and plain-language requirements make inclusive phrasing difficult to accommodate. From the commercial side, B1 was candid: "clients pay us for speed and accuracy, and unless they ask for inclusive language it is difficult to justify the extra time."

Technology added to these pressures. A1 described how machine translation output regularly defaulted to binary pronouns or produced awkward phrasing for non-binary references. The focus group echoed this scepticism, doubting that automated systems could meet the clarity standards required for patient materials. Their concerns mirror research showing systematic bias in MT outputs (Chen et al., 2024).

Underlying all these challenges was a sense of professional vulnerability. Both A1 and B1 admitted they sometimes hesitated to use new or contested forms, worrying how clients or editors would react. C3 extended this anxiety to the public, pointing out that inconsistent usage across charities and the NHS risks confusing patients. They wished organisations would be "singing from the same hymn sheet" so audiences were not left to make sense of conflicting terms.

In short, participants described inclusive practice as desirable but precarious. They faced limits built into grammar, disagreements around terminology, the pressure of deadlines and

budgets, and technologies that lag behind. Yet perhaps the greatest challenge was the risk of standing out, of being judged for a choice that some see as progressive, others as confusing, and many as unnecessary. Inclusive language, in their lived experience, is not only about words but about negotiating responsibility, readability, and professional credibility all at once.

4.3 Institutional and Client Expectations: Pressures and Possibilities

The challenges outlined in the previous section cannot be separated from the institutional and market environments in which translation and healthcare communication take place. Participants emphasised that their ability to apply inclusive strategies was shaped not only by personal conviction or linguistic constraints but also by the expectations of clients, managers and organisational policies.

B1, speaking from the perspective of a mid-sized LSP, described how institutional commitments can enable inclusivity while simultaneously restricting it. Their company's B Corp certification had encouraged initiatives such as pronoun sharing and awareness webinars, signalling an organisational stance on inclusion. Yet they admitted that most clients had not explicitly requested inclusive language, and some preferred not to engage with the topic at all. As B1 explained, "what the client wants is usually what they get." This highlights how market logics often privilege clarity, speed and consistency over innovation, a dynamic that tends to place translators in a reactive role rather than allowing them to lead ethical change (Pym, 2017).

A1 shared similar experiences. While some clients left inclusivity decisions to the translator, these choices were sometimes overruled by editors who considered them unfamiliar or politically charged. A1 noted that such interventions, usually justified by reference to house styles or perceived reader expectations, could erode translator agency. Their reflections resonate with scholarship describing institutional translation as collective and standardised, where individual discretion is often subordinated to organisational norms (Schäffner et al., 2014).

The healthcare communication professionals presented a more policy-led picture. C1 described inclusivity as embedded in organisational practice, with patient materials reviewed for readability, accessibility and representation. Co-production with end users was central, and feedback regularly informed revisions, although C1 acknowledged that guidance must be updated periodically to keep pace with changing preferences and norms. C2 explained that inclusive language guidance sat alongside brand guidelines and had been shaped by NHS review processes and an EDI Communications Panel. They pointed to staff training, such as anti-racism workshops, and pragmatic policies around pronoun use in signatures as signs of institutional commitment. C3 stressed the role of advisory panels and lived-experience reviewers, noting that participants were recruited through community-facing channels such as social media and the organisation's magazine. Both emphasised, however, that policy on its own was insufficient. Inclusive guidance had to be workable within the constraints of plain language and short health-information formats.

Yet inconsistencies remained. C3 noted uncertainty over what briefs or guidelines translators had been given in previous review cycles, which in their organisation occurred every three years. C2 added that forthcoming brand refresh work aimed to share protected-characteristics guidance more proactively with agencies and linguists, in an effort to reduce misalignment. Both participants raised concerns about divergence across the sector, expressing a wish for more consistency so that audiences were not confused by contradictory usages across charities and the NHS.

Several participants also described how they used persuasion and education to navigate client relationships. A1 explained that they sometimes shared existing style guides with clients who were hesitant, presenting inclusivity as part of professional quality rather than as a political stance. B1 noted that some clients became more receptive once presented with concrete examples of good practice. From the healthcare side, C2 and C3 stressed that clear, audience-tested explanations, and where possible sharing guidance with external vendors, helped secure buy-in and promote consistency across teams.

Overall, participants portrayed institutional norms and client expectations as central forces that both support and constrain inclusive language. These external pressures shaped their sense of responsibility to clients and audiences, but also revealed the importance of empowerment through co-production, representation through inclusive review processes and visibility through policy commitments. The extent to which inclusive language could be realised depended on the openness of organisations, the flexibility of workflows and the willingness of professionals to advocate for change.

4.4 Strategies and Resources for Inclusive Translation

Participants described a wide range of strategies and resources that supported inclusive practice across translation and healthcare communication. These included formal style guides, workflow adaptations, collaborative initiatives, training opportunities, and examples of inclusive communication developed by charities and advocacy organisations.

Institutional style guides were a frequent point of reference. A1 drew on the **American Medical Writers Association (AMWA) guidelines**[1] for clinical content, the **United Nations Inclusive Language Guidelines**[2] for NGO and policy projects, and the **European Commission's English Style Guide**[3] when translating from Romance languages. These documents provided structured advice on avoiding male-default phrasing or exclusionary terms, although participants noted that such resources primarily address what is most

[1] American Medical Writers Association (AMWA; 2024) *A Brief Guide to AMA Inclusive Language Guidelines*. Available at: https://blog.amwa.org/a-brief-guide-to-ama-inclusive-language-guidelines. (Accessed: 29 July 2025).
[2] United Nations (n.d.) *Editorial Manual*. Available at: https://www.un.org/dgacm/en/content/editorial-manual. (Accessed: 29 July 2025).
[3] European Union (2025) *English Style Guide: A handbook for authors and translators in the European Commission*. [PDF] Available at: https://commission.europa.eu/system/files/2023-11/styleguide_english_dgt_en.pdf (Accessed: 29 July 2025).

straightforward to resolve in English. They acknowledged that other languages pose far more complex challenges, which this study does not attempt to catalogue.

In the healthcare context, C1 relied heavily on the Patient Information Forum's "**Beyond Words, Into Practice" guide**[4]. This resource was valued for its emphasis on user testing and health literacy principles, as well as its clear recommendations to avoid stigmatising terms such as "suffering from" or "wheelchair-bound" and to promote co-production and inclusive tone.

Workflow adaptations were also described as supporting inclusivity. B1 explained that when clients expressed a preference for gender-neutral or disability-inclusive phrasing, this could be embedded at the briefing stage and passed on to linguists through glossaries or notes in translation platforms. A1 highlighted that some organisations maintained inclusive examples in translation memories, which could then be reused and adapted. From the healthcare side, C2 and C3 stressed the importance of ensuring that updated internal guidance was actually shared with external translators during brand refreshes or policy updates, as this was not always the case.

Collaborative and user-led practices emerged as another important strategy. C1 described co-creating multilingual maternity care resources with women from underserved communities in Sussex. These sessions took place in trusted local spaces, with interpreters present and feedback actively shaping the tone and content. The presence of translators within the development process, rather than as external providers, was seen as crucial for ensuring authentic representation. Participants also discussed advisory and lived-experience panels, often recruited through social media or organisational magazines, which provided ongoing feedback on language choices.

Charity-led resources were described as particularly influential. C1 cited several organisations that had become benchmarks for inclusive communication. **CoppaFeel!**[5] was praised for developing breast cancer messaging tailored to young and queer audiences, using playful and affirming language to address a sensitive topic. **YoungMinds**[6] was highlighted for its inclusive approach to mental health communication, explicitly addressing gender identity, neurodiversity, and intersectionality in youth-focused materials. **Marie Curie**[7] was noted for publishing detailed guidance on LGBTQ+-inclusive palliative care, demonstrating how end-of-life communication can be sensitive to diverse identities and family structures. Last but not least, **Stickman Communications**[8] was recognised as a model for accessible disability-related content, using plain language and visual resources to convey complex

[4] Wallace HCL Ltd. (2025) *Your guide to inclusive health communication*. Available at: https://www.wallacehealth.co.uk/lgbt-inclusive-writing (Accessed: 29 July 2025).
[5] CoppaFeel! (2024) *Media Guidelines: Reporting on Breast Cancer*. Available at: https://coppafeel.org/wp-content/uploads/2024/03/CoppaFeel-Media-Guidelines.pdf (Accessed: 29 July 2025).
[6] YoungMinds (2025) *Gender identity*. Available at: https://www.youngminds.org.uk/parent/parents-a-z-mental-health-guide/gender-identity/ (Accessed: 29 July 2025).
[7] Marie Curie (2025) *Palliative and end of life care for LGBTQ+ people*. Available at: https://www.mariecurie.org.uk/professionals/palliative-care-knowledge-zone/lgbtq (Accessed: 29 July 2025).
[8] Stickman Communications (n.d.) *About Us*. Available at: https://www.stickmancommunications.co.uk/about (Accessed: 29 July 2025).

ideas clearly. These examples were not only valued as sources of inspiration but also as persuasive tools: A1 explained that citing respected charities or health bodies could help convince hesitant clients when formal guidance was lacking or outdated.

Finally, participants emphasised the role of training and knowledge sharing. B1 had organised internal webinars and blog posts at their LSP, while A1 incorporated inclusive translation exercises into university teaching. C1 described regular training offered through the Patient Information Forum, covering inclusivity, accessibility, and health literacy. Both A1 and B1 expressed enthusiasm for future structured training opportunities endorsed by professional associations such as the ATC or ITI.

Taken together, these strategies reveal that inclusive practice is not only a matter of reference documents or workflow adjustments but also of responsibility and relational work. Participants drew on style guides to anchor their practice, collaborated with communities to strengthen representation and visibility, and engaged in peer learning and training to build capacity. Although gaps remain in terms of consistency and application, the findings suggest that inclusive translation is best understood as a collective endeavour, sustained by shared responsibility, empowerment, and ongoing learning.

4.5 Cross-Theme Synthesis and Reflective Commentary

The preceding sections have explored how inclusive language is perceived, the barriers professionals encounter, the influence of institutional and client expectations, and some strategies currently in use across the UK translation and healthcare communication sectors. This section draws these findings together, using four recurrent concepts: representation, visibility, empowerment and responsibility, as an organising lens.

Representation and visibility were central across all accounts. A1 described inclusive practice as “making the invisible visible,” while the healthcare communicators highlighted the risks of exclusion when unfamiliar or inaccessible phrasing is used. Style guides and charity-led examples provided practical mechanisms for representing marginalised groups, yet participants acknowledged that representation is never neutral. Choices about terminology inevitably make some identities more visible than others and therefore carry ethical weight.

Empowerment emerged most strongly in healthcare communication, where co-production, plain language and iterative user testing were presented as ways of enabling audiences to exercise agency in understanding and applying health information. Translators also spoke of empowerment in terms of negotiating with clients and offering guidance and evidence to strengthen inclusive decision-making. At the same time, empowerment was always balanced against constraints of readability, length and health literacy.

Responsibility was emphasised in both commercial and healthcare settings. Translators described a duty to clients as well as to end users, often caught between conflicting expectations. B1 stressed the commercial reality that “what the client wants is usually what

they get," while C2 and C3 emphasised the organisational obligation to ensure consistency and equity in patient information. For all participants, responsibility involved navigating competing pressures while striving to maintain inclusivity.

These three concepts intersected with the structural realities of professional contexts. Translators and healthcare communicators worked within systems that prioritised efficiency, standardisation and perceived neutrality, often at the expense of innovation. Yet participants also sought to create spaces of flexibility, whether through the adaptation of style guides, the use of lived-experience panels, or the citation of respected charities to persuade hesitant stakeholders.

The analysis further underscored the importance of relational labour. By this, participants referred to the ongoing interpersonal work involved in advocating for inclusivity, building trust with clients, and negotiating between institutional guidelines and community expectations. Relational labour is not primarily about technical translation skills but about the effort of maintaining dialogue, persuading stakeholders and aligning expectations across different actors. Professionals described this work as often informal and unrewarded, yet essential in bridging the gap between ethical aspirations and deliverable outputs.

From a reflexive standpoint, the researcher's dual position as both insider and outsider to the field required sustained critical awareness. Previous professional experience in translation and healthcare communication supported rapport with participants and provided contextual sensitivity, but also carried the risk of over-identification. A reflective journal and supervisory feedback were used to document assumptions, challenge interpretations and ensure that themes remained grounded in the data.

Taken together, the synthesis demonstrates that inclusive translation is not simply a matter of technical adaptation. It is a socially embedded and structurally mediated practice that requires institutional commitment, professional judgement and sustained dialogue with the communities being represented. Inclusive strategies thrive not when they are fixed or prescriptive, but when they are iterative, participatory and responsive to the realities of practice.

4.6 Concluding Remarks on the Findings

The findings presented in this chapter reveal inclusive translation as a dynamic and contested practice shaped by the values of representation, visibility, empowerment and responsibility. They also highlight the constraints imposed by institutional norms, client expectations and language systems. These insights set the stage for the concluding chapter, which reflects on the contributions of the study, its implications for professional practice, and possible directions for future research.

5. Conclusions and Final Remarks

This dissertation set out to investigate how inclusive language, particularly with respect to gender and disability, is understood and operationalised in professional translation and healthcare communication in the United Kingdom. Drawing on three interviews and one focus group, the study examined perceptions of inclusivity, the challenges faced in implementation, the influence of institutional and client expectations, and the strategies that practitioners adopt in their work.

5.1 Summary of Findings

The findings showed that participants framed inclusive language through two interconnected but distinct responsibilities. The first was ethical responsibility, which referred to the obligation to represent marginalised groups fairly, to increase visibility and to resist linguistic practices that erase or stigmatise. The second was communicative responsibility, which referred to the need to ensure clarity, accessibility and usability for audiences, particularly those with low health literacy. These responsibilities often converged but could also conflict: terms intended to signal inclusion sometimes risked alienating or confusing readers.

Across accounts, inclusivity was described as a practice grounded in representation, visibility, empowerment and responsibility. The balance between these values was shaped by clear definitions of the target audience, which participants emphasised as decisive in determining whether inclusive forms were adopted and how far they could be taken.

The study also underscored the importance of language systems. English, the focus of this research, provides relatively flexible resources for neutrality, such as singular “they” and gender-neutral job titles. By contrast, participants noted that Romance languages and other grammatically gendered systems present structural barriers, limiting options for inclusivity. While this dissertation concentrated on English, it acknowledges that the relative capacity of languages to accommodate inclusive forms is uneven, and that inclusivity is not synonymous with neutrality: neutralisation may erase difference, while inclusivity aims to recognise and affirm diverse identities.

5.2 Contributions

The research contributes to translation studies by providing an empirically grounded account of how inclusive language is negotiated in practice and by highlighting the interplay between ethical and communicative responsibility. It draws attention to the role of relational labour, the interpersonal work of persuasion, negotiation and education, that often goes unacknowledged yet proves essential in embedding inclusive practices within workflows.

The dissertation also contributes to healthcare communication scholarship by showing how inclusivity is integrated into patient information through plain language, co-production and iterative feedback. For professional practice, the findings suggest that inclusivity cannot be achieved by prescriptive rules alone but requires flexible guidance, participatory approaches and attention to audience definition. The insights generated here have potential to inform translator training, language service provider policies and healthcare communication strategies, encouraging practitioners to frame inclusivity as both an ethical and a communicative goal.

5.3 Limitations

The study was deliberately small in scale, involving three interviews and one focus group, and its findings should therefore be read as indicative rather than generalisable. Its focus on English means that the analysis reflects contexts where inclusive solutions are relatively easier to achieve. A systematic cross-linguistic comparison, which was beyond the scope of this project, would be required to explore how structural differences in language systems shape inclusive practice in other contexts.

5.4 Future Research

Future work could build on this study in several directions. Comparative research across languages with grammatical gender would provide valuable insight into the specific constraints and innovations that arise in non-English contexts. Further studies could also examine how machine translation and post-editing workflows might be adapted to reduce bias and better accommodate inclusivity. Professional associations and training providers may be important sites for investigation, as they have the capacity to embed inclusive practices at scale. Longitudinal research could trace how inclusive strategies evolve over time and whether relational labour becomes more formally recognised and supported within translation and communication workflows.

5.5 Final Reflection

This dissertation has shown that inclusive translation is not a purely technical exercise but a practice shaped by values of representation, visibility, empowerment and responsibility. It depends on clarity about audiences, sensitivity to linguistic and cultural diversity and sustained relational work with clients, institutions and communities. Translators and communicators are not invisible intermediaries but active agents of inclusion, balancing competing pressures while striving to make communication fairer, clearer and more representative.

Ultimately, inclusive translation is not a formula to be followed or a checklist to be completed. It is a reflective and collaborative process, shaped by dialogue, context and care. At its heart lies the recognition that language has the power to shape how people see themselves and how they are seen by others. Inclusive choices affirm dignity, foster trust and open space for those historically excluded from public discourse. Rather than constraining expression, inclusive language expands the possibilities of representation. It offers a means of engaging with complexity, responding to change and building communication that truly reflects the diversity of human experience.

In closing, this dissertation affirms that inclusive language is not a finished product but an ongoing negotiation between words, systems and people. It evolves as societies evolve, and translators and communicators stand at the heart of that evolution. In the hands of thoughtful professionals, it becomes a quiet force for justice. Their work has the potential not only to transform texts but also to transform relationships, fostering more equitable ways of communicating and belonging. As language continues to change, the role of translators and communicators will remain central to shaping more inclusive futures.

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Appendix A: Favourable Ethical Opinion (FEO)

Aidan Luker
FABSS - Faculty of Arts, Business and Social Sciences
School of Literature and Languages

Assurance
4th floor Senate House
Guildford, Surrey GU2 7XH UK

E: ethics@surrey.ac.uk
W: www.surrey.ac.uk

29 May 2025

Dear Aidan

Ethics RM ref: 1865
Project Title: Inclusive Language in UK Translation Industry
Proposed Project End Date: 01/09/2025

On behalf of the University Ethics Committee (UEC), I am pleased to confirm a 'Favourable Ethical Opinion' (FEO) for the above research on the basis of the submitted protocol and final supporting documentation listed in the table below.

You may now start your research.

Date of confirmation of ethical opinion: 29 May 2025

This opinion is given on the understanding that you will comply with the relevant University policies, ethical and professional standards and any applicable regulatory requirements, and have completed all mandatory training provided by the University of Surrey.

If you wish to make any changes to the Protocol for this project, now or later, other than those permitted in the guidance provided in the above link, you must submit an Amendment Application before any changes can be implemented. Please refer to the Guidance on Amendments which can be found on the Research Integrity and Governance Office webpages. Please note that the governance approval of this project is only valid until the study end date.

Please be aware that the Committee must be notified if the following incidents and events occur:

- Protocol deviation e.g. incorrect documents used, failure to obtain/document consent, study procedures not followed;
- Serious adverse events (SAEs) (e.g. life-threatening or requires hospitalisation) or adverse events (AE) (e.g. an unexpected reaction such as skin irritation) that may potentially impact the research participants or your data integrity. This should include any unexpected event not related to the study, events related to the study and death of a participant related or unrelated to the study and;
- The study is terminated earlier than expected and the reason for this.

You should do this by contacting ethics@surrey.ac.uk. Please be advised that the University Ethics Committee and/or Assurance audit research projects to ensure that researchers are abiding by the University requirements and guidelines.

This 'Favourable Ethical Opinion' is valid only for the duration of the project. The study end date will be the date of the last visit of the participant or the completion of any data collection as stated on the EGA form listed below.

If you have any query regarding your project, please contact Assurance at ethics@surrey.ac.uk

The final list of documents reviewed by the Committee is as follows:

Document Type	File Name	Date	Version
Study Protocol	TRAM505_Dissertation_Study_Protocol	28/05/2025	1.2

Document Type	File Name	Date	Version
Recruitment materials	TRAM505_Dissertation_Recruitment_Material	19/05/2025	1.1
Participant Information Sheet	TRAM505_Dissertation_Participation_Information_Sheet	19/05/2025	1.1
Other Documents	TRAM505_Response_to_Ethics_Committee_Queries	28/05/2025	1.2
Interview/Focus Group Schedule	Dissertation_Interview_and_Focus_Group_Questions	07/04/2025	1.0
Gatekeeper Approval	TRAM505_Dissertation_Gatekeeper_Confirmation_Email	07/04/2025	1.0
Consent Form	TRAM505_Dissertation_Consent_Form	19/05/2025	1.1

Yours sincerely,

Dr Hana Hassanin
Chair of the University Ethics Committee

L03 - Application Approved Letter

Appendix B: Study Protocol

FULL/LONG TITLE OF THE STUDY

Inclusive Language in the UK Translation Industry: Attitudes, Challenges, and Best Practices

SHORT STUDY TITLE / ACRONYM

Inclusive Language in UK Translation Industry

PROTOCOL VERSION NUMBER AND DATE

Version 1.2 – 28 May 2025

Confidentiality Statement

The Information contained in this document is the property of the University of Surrey and is provided to you in confidence as an investigator, potential investigator, or consultant for review by you, your staff and applicable regulators. It is understood that this information will not be disclosed to others without authorisation from the University of Surrey except to the extent necessary to obtain written consent from those persons who will take part in the study.

List of Contents

STUDY SUMMARY

Study Title	Inclusive Language in the UK Translation Industry: Attitudes, Challenges, and Best Practices
Internal ref. no. (or short title)	Inclusive Language in UK Translation Industry
Planned Size of Sample (if applicable)	10
Planned Study Period	01/07/2025 – 01/09/2025

FUNDING AND SUPPORT IN KIND (N/A)

FUNDER(S) (Names and contact details of ALL organisations providing funding and/or support in kind for this study)	FINANCIAL AND NON FINANCIAL SUPPORT GIVEN
N/A	N/A

INVESTIGATORS

NAME	Position	Signature
Aidan Luker	Lead Researcher, MA Student in Translation and Interpreting	

STUDY PROTOCOL

1. Abstract

This research project investigates how inclusive language is approached within the UK translation industry, with particular attention to gender-neutral and disability-inclusive practices. Through semi-structured interviews and focus groups with freelance translators, language service provider (LSP) representatives, and healthcare communication professionals, the study seeks to explore current attitudes, perceived challenges, and best practices for implementing inclusive strategies in translation workflows. The combination of individual and group data collection methods is designed to capture both personal insights and cross-sectoral perspectives on inclusive language use in professional settings.

2. Background or rationale of the project

Inclusive language is central to fostering communication that is equitable, respectful, and representative of diverse identities. For professional translators, however, implementing inclusive strategies, especially those related to gender and disability, can present linguistic, cultural, and institutional challenges (Halmari, 2011; Pym, 2017; Lardelli, 2024). These challenges often arise from navigating client expectations, evolving norms, and structural constraints within translation workflows.

While inclusive language has been widely discussed in academic and policy contexts, there remains a significant gap in research that captures how UK-based translation professionals engage with these concepts in practice. This research aims to fill that gap by documenting practitioner attitudes, real-world constraints, and effective strategies in use. As this is a professionally interesting and socially impactful topic, gauging views by practising professionals has the potential to benefit the future development of professions in the field of translation.

In response to early feedback and supervisory consultation, the study design was expanded to include focus groups alongside individual interviews. Focus groups will provide a space for dialogue between professionals from related fields such as healthcare communication, who routinely engage with inclusive language in high-stakes, public-facing contexts. Their perspectives will help contextualise translation industry practices, introduce cross-sector comparisons, and enrich the qualitative data through shared discussion and reflection.

By documenting these lived experiences and professional insights, the study will contribute to a deeper understanding of how inclusive language is interpreted and negotiated in practice, with the potential to inform both industry and academic approaches to inclusive communication.

3. Patient/Participant involvement

There has been no formal pre-study patient or participant involvement (PPI) in the design of this research project. However, informal insights from professional translators shared via industry forums, webinars, and social media discussions were taken into consideration when shaping the research focus, interview and focus group questions. These insights highlighted a perceived gap in industry support for inclusive language and informed the development of the study's objectives, interview and focus group themes.

Although no direct consultation with participants was conducted during the protocol design phase, participant feedback during the interview and focus group process may be used to refine the research tools and identify areas for future investigation.

4. Aims and objectives

The aim of this study is to investigate how inclusive language, particularly gender-neutral and disability-inclusive expressions, is perceived, interpreted, and applied within the UK translation industry.

To achieve this aim, the study will explore the views and experiences of freelance translators, representatives of language service providers (LSPs), and professionals in healthcare communication. It will examine how inclusive language is understood, what challenges arise in its implementation, and how professional and market dynamics shape translation decisions. This exploration will be conducted through qualitative methods, specifically semi-structured interviews and focus groups.

The study will contribute to the final MA dissertation (TRAM505) submitted as part of the MA in Translation and Interpreting. In addition to documenting current practices, it is expected to stimulate further reflection on inclusive language strategies and support future adaptations of this research model by other MA student cohorts.

By centring the lived experiences of practitioners, the study aims to enrich our understanding of how inclusive language is negotiated in real-world professional settings and to identify practical strategies that can inform future training, policy, and professional guidance.

Research Questions

- How do UK-based translators and LSPs perceive inclusive language in professional translation?
- What challenges do translators face when implementing gender-neutral and disability-inclusive language?
- How do client expectations and market pressures shape inclusive translation practices?

- How effective are existing industry guidelines in supporting translators' use of inclusive language?
- What practical strategies can help UK translators navigate inclusive language implementation?

5. **Benefits of the study**

This study will benefit the translation industry by contributing a clearer understanding of how professionals engage with inclusive language. It may inform training, guidelines, and policymaking to better support inclusive practices.

6. **Recruitment Methods**

Participants will be recruited through a combination of purposive and snowball sampling methods. Primary recruitment will be carried out through my connection with the CEO of the Association of Translation Companies (ATC), who have agreed to support the study by sharing the participant call with their network.

No social media recruitment will be used. All recruitment will be conducted solely through the ATC mailing list.

This approach ensures voluntary participation and maintains professional relevance, targeting freelance translators and language service provider (LSP) representatives currently active in the UK.

Confirmation of Support

The following is an excerpt from the ATC CEO's response confirming their support (edited for clarity and anonymity):

> *"Thank you for your message. I would be happy to act as the gatekeeper and facilitator for your dissertation study entitled "Inclusive Language in the UK Translation Industry: Attitudes, Challenges and Best Practices", circulating the interview invitation to the people and organisation representatives that will be able to add value to your research.*

This support will assist in reaching participants currently working within the UK translation industry, particularly those affiliated with language service providers (LSPs), a key focus of this study.

The study seeks to include both freelance translators and representatives of language service providers (LSPs), particularly those with experience working into English and familiarity with inclusive language considerations in their practice.

Inclusion Criteria:

- Freelance translators or LSP representatives currently based in the UK.
- Experience with English as a target language.
- Willingness to participate in a recorded semi-structured interview and/or focus group.
- Age 18 or over.

Exclusion Criteria:

- Individuals with no professional experience in translation or LSP contexts.
- Those who are not comfortable discussing inclusive language in a professional setting.
- Individuals based outside the UK.

No prior external approvals are required for recruitment. All participants will be provided with a detailed participant information sheet and will be asked to give informed consent before taking part in the study.

7. **Adverse Publicity**

The subject of inclusive language can sometimes provoke strong opinions, particularly on social media platforms particularly in public forums or through professional discussions. There is a potential risk that the study could be misinterpreted as promoting a particular ideological stance or as prescribing specific language use, rather than objectively exploring professional attitudes and practices.

To mitigate this risk (see also section 10 below), recruitment and dissemination materials will clearly state that the study is academic in nature and aims to explore a range of professional perspectives on inclusive language within the UK translation industry. The language used in public communications will remain neutral and informative, avoiding politicised or emotionally charged terminology.

Any social media posts or external communications will be carefully worded to emphasise the exploratory and qualitative nature of the research. As recruitment will take place solely through the ATC mailing list, no social media posts will be used in connection with this study. Participants will be reminded that their contributions will be anonymised, and care will be taken to avoid publishing quotes or findings in a way that could be taken out of context.

Should any concerns arise during recruitment or following the dissemination of findings, the researcher will immediately inform their academic supervisor and contact the University's Assurance team via ethics@surrey.ac.uk. This will ensure that any public or reputational risks are addressed promptly and appropriately.

Should any concerns arise following recruitment or the writing-up of the dissertation, the researcher will consult with their supervisor and the University's communications and ethics teams to manage responses appropriately and ensure responsible handling of public engagement.

8. Informed Consent and Withdrawal of Consent

All participants will receive a Participant Information Sheet in advance of their interview or focus group. This document will outline the purpose of the study, what participation entails, how data will be used, and participants' rights, including the right to ask questions and withdraw. It will also include the researcher's contact details for any queries or concerns.

Informed consent will be obtained in writing using a consent form, which participants will be asked to sign and return electronically before their interview or focus group. Consent will cover participation in the research, audio recording of the interview or notes taken during a focus group, and the inclusion of anonymised quotations in the final dissertation and any future publications.

Participation is entirely voluntary. Participants may withdraw at any point before, during, or up to one week after their interview or focus group without providing a reason. In the event of withdrawal, all data associated with the participant, including recordings and transcripts, will be permanently deleted and excluded from the analysis.

Inclusion and exclusion criteria are detailed in Section 8 on Recruitment Methods section and apply equally here to ensure the study remains focused and ethically sound.

9. Experimental design, data collection and methods (including data analysis)

This qualitative study will use semi-structured interviews and focus groups to explore how inclusive language is understood and implemented by UK-based translators, representatives of language service providers (LSPs), and professionals working in healthcare communication. These methods have been selected to provide both individual depth and collective insight into attitudes and practices regarding gender-neutral and disability-inclusive language in professional contexts.

Data Collection

Participants will be invited to take part in either a one-to-one online interview or a small focus group. Each session will last approximately 30 minutes and will be conducted via Microsoft Teams. The total sample size will be fifteen (15) participants. The total sample size will not exceed ten (10) participants. Depending on availability and relevance to the research aims, this may include:

- Approximately 6–7 participants in individual interviews.
- One or two focus groups, each consisting of 3–4 participants. One focus group, consisting of 3-4 participants.

Focus groups will involve healthcare communication professionals whose experience with inclusive language may provide comparative insight and sectoral contrast to that of translators and LSPs.

All sessions will be audio-recorded with participants' informed consent. While it is acknowledged that audio-only recording in focus groups may limit the ability to attribute specific statements to individual speakers, steps will be taken to mitigate this. Participants will be encouraged to state their name or pseudonym before contributing, and the researcher will take supplementary notes to support transcript clarity.

Transcription and Analysis

Audio recordings will be automatically transcribed using Microsoft Teams, followed by manual post-editing to ensure accuracy and remove identifying information. Transcripts will be anonymised and stored securely on University-approved platforms.

Thematic analysis (Saldaña, 2012) will be used to analyse the data. This involves systematically coding the transcripts to identify recurring ideas, experiences, and patterns. These themes will then be grouped and compared across participant types (translators, LSP representatives, and healthcare communication professionals) to highlight both shared and divergent views. This approach supports the study's exploratory aims and facilitates meaningful qualitative insights.

As a qualitative project, no formal sample size calculation has been undertaken. The planned sample of ten participants is considered sufficient to achieve thematic saturation within the context of a Master's level dissertation.

See below for the schedule of events.

Table 1. Schedule of Events

Procedures	01-21 July 2025	22 July - 01 August 2025	02-16 August 2025
Recruitment	x		
Interview/focus groups and transcription		x	
Interview and focus groups analysis			x

10. **Risk Assessment**

Identified Risks	Likelihood	Potential Impact/ Outcome	Potential Severity of Outcome	Risk Management/Mitigating Factors	
Data Loss	Possible	Loss of audio recordings, meeting notes or transcripts due to technical failure or accidental deletion.	Medium	Data will be saved immediately after interviews and focus groups to secure University storage. Backups will be made on UoS secure systems.	UoS Data Management SOP.
Risk of not being able to recruit intended number of participants	Possible	Researcher: the study will have to be conducted on a smaller scale; as it is an exploratory study, the number of participants is not a defining factor.	Low	A lower number of participants would not negatively impact nor invalidate the study because of its qualitative nature.	N/A
Data breach	Unlikely	Unauthorised access to confidential or identifiable data.	High	Data will be stored on password-protected University systems (two-step authentication on UniS Sharepoint). Files will be anonymised during transcription.	UoS Data Protection Policy.
Adverse publicity	Possible	Misinterpretation of the research as political or ideological.	Medium	Neutral, factual language will be used in recruitment and	UoS Comms Guidelines.

Identified Risks	Likelihood	Potential Impact/ Outcome	Potential Severity of Outcome	Risk Management/Mitigating Factors	
				dissemination as well as during interviews and focus groups. Public comms will avoid value-laden or polarising terms. The findings, which will feature in the MA dissertation submission, will focus on collective attitudes on the topic under investigation and on coded segments of the interviews and focus groups; all this text will be descriptive in nature (without value-judgements), focusing on patterns. The dissertation will be interspersed with citations that will be anonymous. Should any concerns arise during recruitment or following the dissemination of findings, the researcher will immediately inform their	

Identified Risks	Likelihood	Potential Impact/ Outcome	Potential Severity of Outcome	Risk Management/Mitigating Factors	
				academic supervisor and contact the University's Assurance team via ethics@surrey.ac.uk. This will ensure that any public or reputational risks are addressed promptly and appropriately.	
Participant discomfort	Unlikely	Participants may feel uncomfortable discussing challenges or ethical concerns around inclusivity.	Low	Participants may skip any questions and can withdraw at any time. Consent forms highlight voluntary participation.	UoS Ethics SOP.
Researcher wellbeing (screen fatigue)	Possible	Fatigue from conducting and transcribing multiple online interviews and focus groups in a short period.	Low	Researcher will schedule breaks between sessions, avoid long blocks of interviews and focus groups, and allow time for transcription.	Personal work plan.
Lone working (online)	Unlikely	Researcher working alone during interviews and focus groups.	Low	Interviews and focus groups will be conducted online, which in a private, safe space. Interview	UoS Lone Working SOP.

Identified Risks	Likelihood	Potential Impact/ Outcome	Potential Severity of Outcome	Risk Management/Mitigating Factors	
				schedule will be shared with supervisor if needed.	

11. **Data Management**

All data collected during the study will be handled in accordance with the General Data Protection Regulation (GDPR) and the University of Surrey's data protection and research data management policies.

Audio recordings of interviews and notes taken during focus groups will be captured using secure University-approved platforms (e.g. Microsoft Teams). Recordings will be transferred immediately after each interview and focus group to the University's secure OneDrive or Research Data Storage system. These recordings will be used to generate automatic transcripts, which the researcher will then post-edit to ensure accuracy and anonymise any identifying content. Once this process is complete, the original audio recordings will be permanently deleted.

Anonymised transcripts will be stored securely in password-protected files within University-approved systems. These transcripts will not contain any identifiable personal data.

Participants will not be asked to provide any special category or sensitive data beyond professional background and views on translation practices. No personal data will be shared with third parties. If any data needs to be shared with the supervisory team, this will be done via Surrey DropOff (https://dropoff.surrey.ac.uk/) and appropriate data sharing agreements will be established with Research Contracts, where required.

The participants' personal data will be held and processed in the strictest confidence. When acting as the data controller, the University will retain personal data for 6 years, and anonymised research data for 10 years after the study has concluded the University will retain consent forms for 6 years. All other personal data will be securely destroyed at the end of the study. After this time, any remaining identifiers will be removed from the aggregated research data.

No incentives are offered for participation in this study.

12. **Ethical considerations**

This study involves minimal risk to participants and has been designed in line with ethical principles of voluntary participation, informed consent, confidentiality, and the right to withdraw at any stage.

All participants will receive a detailed Participant Information Sheet outlining the purpose of the study, their rights, and how their data will be handled. Written informed consent will be obtained before any data collection begins. Participants will be informed that they may withdraw from the study at any time up to one week after their interview or focus group, without having to provide a reason. If they withdraw, all associated data, including recordings and transcripts, will be permanently deleted.

Given the topic of inclusive language, there is a small possibility that participants may disclose experiences of professional or ethical tension. While these discussions are not expected to cause distress, participants will be reminded that they may skip any question they do not feel comfortable answering. The interviewer will adopt a sensitive, non-judgemental tone throughout, and is prepared to pause or terminate the interview or focus group if needed.

No incentives will be offered for participation in this study. All interviews and focus groups will be conducted online in a private space by the researcher, minimising safety concerns and ensuring participants are comfortable in their chosen environment. Interview and focus group schedules will be managed to avoid researcher fatigue and ensure participant privacy.

Ethical approval will be sought from the University of Surrey's ethics review panel before recruitment begins.

13. **Dissemination**

The findings of this study will be disseminated primarily through the MA dissertation submitted to the University of Surrey. A digital copy will be archived in the University's secure repository, accessible to staff and examiners.

To ensure the research reaches the relevant professional audience, a summary of the key findings will be shared with participants upon request and may also be distributed through professional networks such as the Association of Translation Companies (ATC), LinkedIn, and translator community forums.

Where appropriate, the researcher may present the findings at industry webinars or academic conferences focused on translation studies, language and inclusion, or applied linguistics. The research may also form the basis for a future journal article submission, subject to ethical approval and any necessary revisions.

In all dissemination, participant confidentiality will be strictly maintained, and any quotes used will be fully anonymised.

14. **References**

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Amendment History

Amendment No.	Protocol version no.	Date issued	Author(s) of changes	Details of changes made
1	Version 1.1	19/05/2025	Aidan Luker	Participant number clarified as 10 throughout; social media recruitment removed; updated adverse publicity steps; consent form and PIS updated to reflect 1-week withdrawal window; ethical approval reference added to recruitment email.
2	Version 1.2	28/05/2025	Aidan Luker	Data Management section updated for clarity: consent forms to be retained for 6 years; personal data to be securely destroyed at end of study. Aligned with

				consent form and ethics feedback dated 21 May 2025.

Appendix C: Participant Information Sheet

INFORMED CONSENT FORM

Thank you for considering taking part in this research.

Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research.

Title of Study: Inclusive Language in the UK Translation Industry: Attitudes, Challenges, and Best Practices

University of Surrey Ref: ERM ID 1865

The person asking for your consent must explain the project to you before you agree to take part. If you have any questions about the Information Sheet or their explanation, please ask the researcher before you make your decision. You will be given a copy of this Consent Form and the Information Sheet to keep and refer to at any time.

By **initialling** each box, you are consenting to this part of the study. Any un-initialled boxes will mean that you DO NOT agree to that part of the study, and this may mean you are ineligible for the study.

Taking part in the study		
	Statement	Please initial each box
1	I confirm that I have read and understood the information sheet dated 07/04/2025, Version 1.0, for the above study. I have had the opportunity to consider the information and asked questions which have been answered satisfactorily.	
2	I understand that my participation is voluntary and that I am free to withdraw at any time during the study without giving any reason. Furthermore, I understand that data already collected can only be withdrawn up to one week after the interview.	
3	I understand that information I provide may be subject to review by responsible individuals from the University of Surrey and/or regulators for monitoring and audit purposes.	
4	I understand that information I provide will be used in various anonymised outputs, including publication and presentations.	
5	I understand that my personal data, including this consent form, which link me to the research data, will be kept securely in accordance with data protection guidelines, and only be accessible to the immediate research team or responsible persons at the University.	
6	I understand any personal contact details collected about me, such as my phone number and address, will not be shared beyond the study team.	
7	I consent to my audio and video recording to be used for the purposes stated in the information sheet.	

8	OPTIONAL. I understand that my anonymity cannot be guaranteed in the focus group, but participants will be asked to keep the discussions confidential, and the research team will treat all information collected as confidential.	
9	OPTIONAL. I agree to keep the discussions in the focus group confidential.	
10	I agree to take part in this study.	

Future use of the information in the study		
	Statement	Please initial each box
11	I give permission for my anonymised data to be archived in our University of Surrey Repository, or in an external data archive (e.g. UK Data Archive) but with a record in our University of Surrey Repository containing a link to the externally held data and shared anonymously with other researchers, in order to carry out future research for non-commercial use.	
12	I understand that this consent form will be securely stored for 6 years after the end of the study, and that any personal data will be securely destroyed at the end of the project.	

Signatures		
Name of Participant	**Signature**	**Date**
Name of Researcher **Aidan Luker**	**Signature** 	**Date** 19/05/2025

Appendix D: Recruitment Material

Participants will be recruited through my existing professional connection with the Association of Translation Companies (ATC), specifically via the CEO, with whom I am in direct contact. With their support, I will identify and reach out to potential participants who meet the inclusion criteria for the study. Initial contact will be made via email (see below), and all potential participants will receive the Participant Information Sheet to ensure they are fully informed before providing consent. This recruitment method ensures voluntary participation and maintains ethical standards of transparency and confidentiality.

Subject: Invitation to Participate in a Research Interview on Inclusive Translation

Dear [Name],

I hope this message finds you well. My name is Aidan Luker, and I am currently undertaking a Master's dissertation in Translation and Interpreting at the University of Surrey. As part of my research, I am conducting interviews and focus groups to explore how translators and institutions engage with inclusive language, particularly with regard to gender and disability.

I would like to invite you to take part in this study, which involves a single session lasting approximately thirty (30) minutes. The interview can be scheduled at your convenience and conducted via Microsoft Teams.

Please find attached a copy of the **Participant Information Sheet**, which outlines the study's purpose, what your participation involves, and how your data will be handled. Your insights would make a valuable contribution to this research, and your participation would be greatly appreciated.

If you are willing to participate or would like more information, please do not hesitate to get in touch by replying to this email.

This study has received a Favourable Ethical Opinion from the University of Surrey Ethics Committee (reference number ERM1865).

Thank you very much for your time and consideration.

Best wishes,
Aidan Luker
MA Translation and Interpreting
University of Surrey
al01915@surrey.ac.uk

Appendix E: Interview Questions – A1 (Translator/LSP)

Section A: Perceptions of Inclusive Language

How would you define inclusive language in the context of your translation work?

What are the main factors affecting your choices regarding inclusive language?

Section B: Practical Challenges

Have you encountered difficulties when trying to implement inclusive language? Can you give an example?

Are there particular language pairs, directions or text types where inclusive strategies are more difficult to apply?

Section C: Market & Client Expectations

How do your clients typically respond to inclusive language choices in your translations?

Have you ever had to compromise on inclusive language due to client requirements or target audience preferences?

Section D: Institutional Guidance

Are you aware of any industry guidelines or glossaries on inclusive language? If so, do you use them?

How useful do you find these resources in your day-to-day work?

Section E: Navigating Practice

What strategies do you use to deal with ambiguity in gendered or ableist source text language?

Are there particular translation techniques or tools (e.g. CAT tools, terminology management) that help you maintain inclusivity?

Section F: Wrap-up

What changes would you like to see in the industry to better support inclusive translation?

Is there anything else you'd like to share about your experience with inclusive translation?

Appendix F: Interview Questions – Participant B1 (LSP Representative)

Section A: Organisational Positioning

How does your organisation define or approach inclusive language in translation?

Do you have internal policies or preferences regarding gender-neutral or disability-inclusive language?

Section B: Challenges and Constraints

What are the main challenges your organisation faces when commissioning or delivering translations that use inclusive language?

How do you balance inclusive language practices with client demands or expectations?

Section C: Training & Guidelines

Do you provide training or resources to translators on inclusive language?

Are there industry guidelines or frameworks you refer to, and how effective are they?

Section D: Market Trends

Have you noticed a growing demand for inclusive translation from clients or institutions?

How do you perceive the UK market's receptiveness to inclusive language practices?

Section E: Future Practices

What practical steps could LSPs take to promote and implement inclusive language more effectively?

How do you see inclusive translation evolving over the next 5 to 10 years?

Section F: Wrap-up

Is there anything you'd like to add about the role of LSPs in promoting inclusive translation?

Appendix G: Interview Questions – C1 (Healthcare Communication Expert)

Section A: Patient-Centered Communication

What are the main considerations when ensuring that patient information is inclusive and accessible for all readers?

How do you ensure that patient information materials are clear and understandable for people with diverse needs, including those with disabilities?

Section B: Role of Language and Translation

How does language play a role in promoting inclusivity within healthcare materials, especially for patients with different gender identities or disabilities?

What challenges do you encounter when reviewing translated patient information for inclusivity and accessibility?

Section C: Collaboration with Language Service Providers

How can healthcare communication experts collaborate with translation service providers to improve the accessibility and inclusivity of translated healthcare materials?

What guidelines or best practices would you like to see implemented in healthcare translation to ensure patient information is both accurate and inclusive?

Section D: Inclusivity in Patient Information

Are there any specific examples of best practices in patient information materials that effectively address gender-neutral and disability-inclusive language?

How can the language used in patient information be made more inclusive while ensuring it remains medically accurate?

Section E: Future Directions

What changes do you think need to happen in the healthcare sector to promote more inclusive language in patient materials?

How do you see the role of healthcare communication experts evolving to promote inclusivity in both communication and translation in the future?

Appendix H: Interview Questions – C2, C3 (Healthcare Communication Experts)

Section A: Inclusive Language in Patient Information

What are the main challenges or considerations when applying inclusive language to patient-facing materials?

How does your team approach gender-neutral or disability-inclusive language when producing content?

Section B: Working with Guidelines

How do you work with your internal language guidelines or policies?

Have you found any gaps or tensions between these guidelines and the lived experiences of your audience?

Section C: Balancing Inclusivity and Clarity

Are there instances where inclusivity and clarity have come into tension?

How do you ensure that information is both medically accurate and inclusive?

Section D: Collaboration and Translation

Have you worked with translators or external agencies to adapt materials for multilingual audiences?

What support or guidance do you provide to ensure linguistic and cultural appropriateness?

Section E: Sector Influence and Best Practice

Are there any organisations or examples that have influenced your approach to inclusive communication?

How do you keep internal guidance up to date with changing language and user expectations?

Section F: Wrap-Up

What would help your team better implement inclusive communication in future?

Is there anything else you'd like to share about producing inclusive health information?

Appendix I: Fieldwork Log

Record ID	Participant ID	Participant Type	Activity Type	Mode	Date	Start Time	End Time	Duration	PIS Sent Date
001	A1	Translator / Academic	Interview	MS Teams	2025-07-22	10:54	11:29	33:47	2025-07-08
002	B1	LSP Representative	Interview	MS Teams	2025-07-21	13:56	14:36	39:21	2025-07-07
003	C1	Healthcare Communication Expert	Interview	MS Teams	2025-07-23	13:57	14:28	31:17	2025-07-16
004	C2	Healthcare Communication Expert (Applies Guidelines)	Interview	MS Teams	2025-07-30	13:56	14:25	29:27	2025-07-28
005	C3	Healthcare Communication Expert	Interview	MS Teams	2025-07-31	13:56	14:25	29:27	2025-07-29

Consent Received?	Consent Date	Audio Recorded?	Transcript Status	Anonymisation Status	Audio Deleted?	Withdrawal Deadline (auto)	Withdrawal Requested?	Researcher Initials
Yes	2025-07-08	Yes	Complete	Complete	Yes	2025-07-28	No	AL
Yes	2025-07-09	Yes	Complete	Complete	Yes	2025-07-29	No	AL
Yes	2025-07-23	Yes	Complete	Complete	Yes	2025-07-30	No	AL
Yes	2025-07-30	Yes	Complete	Complete	Yes	2025-08-06	No	AL
Yes	2025-07-29	Yes	Complete	Complete	Yes	2025-08-07	No	AL

Appendix J: Interview Transcript: Participant B1 (LSP Representative)

Interview length – 39:21

Interviewer
So, how does your organisation define or approach inclusive language in translation?

Participant B1
That's an interesting question. Our approach actually started about three years ago when a client first requested that their language be gender neutral.

To give you some background, the client is a company that deals with things like personality tests — you know, like Myers-Briggs and similar assessments.

Interviewer
Yeah, oh yes.

Participant B1
It's one of those brands, but they do much more than just personality tests. They offer training based on something called "colour energies." Each of us has a mix of red, yellow, blue, and green energies, and the training is built around this theory.

The training explores how your energies show up at work and in your personal life. We each received a 30-page profile detailing who we are, how we operate, how others should communicate with us, and how we can communicate with people who have opposite types. Essentially, it's workplace-focused.

Interviewer
OK.

Participant B1
The training is designed to help teams work together more effectively. They do a lot of work in the US. At the time — though sadly I don't think this is still the case based on recent news — there were directives to ensure all language was gender neutral.

Interviewer
OK.

Participant B1
I think some of the recent news from America shows that this is probably no longer the case. But three years ago, under the previous administration, it was very much a focus — they were mandated to ensure language was gender neutral.

Interviewer
Yeah. Mm-hmm.

Participant B1
A lot of the content used to include personal pronouns like “he acts like this” or “she is that.” In the British version of the translation, all those personal pronouns were removed, which was fantastic.

Interviewer
Yep. Mm-hmm.

Participant B1
Not every language has the right vernacular to discuss these topics. Obviously, some languages have neutral forms of gendered pronouns, but others don’t.

Interviewer
Yeah.

Participant B1
I can’t speak every language, but I know that in some cases, the neutral pronoun translates as “it” rather than “them,” which obviously isn’t appropriate when referring to people with non-binary identities. So we created a whole piece on how to handle this properly.

Interviewer
Yep, yep — yeah, exactly.

Participant B1

We focused on how to avoid this as much as possible in the translations, aiming to make the texts much less gendered. I can't go into too many specifics because of an NDA — I worked on the project myself, but we collaborated extensively with linguists.

Our company offers a lot of cultural awareness solutions. We have linguists based in markets who help with transcreation, localisation, and providing cultural insights to clients. So, we coordinate those efforts closely.

Interviewer
Yep. Mm-hmm.

Participant B1
This was essentially to help us kind of like define the framework for that client of what that look, what gendered sorry non gendered language in their columns looks like when it comes to translation. So that's how it kind of came about.

Interviewer
OK.

Participant B1
To get started, we created some articles and webinars to promote this approach to clients. So far, no one else has really adopted it, but we've tried and had to push quite a bit to promote it.

Interviewer
That's amazing — wow, thank you. It's incredible how so much can come from just one project. Did the client provide you with a style guide or a document outlining their requirements? Was there anything in particular they wanted to have removed?

Participant B1
No, they had no idea how to do it. They had to call on us for support. Our freelance linguists did a lot of the heavy lifting, providing guidance throughout the process.

Interviewer
Wow, OK.

Mm-hmm.
Yep.

Participant B1
In some cases — I'm not sure which ones — it was agreed that we couldn't use inclusive language simply because it didn't exist yet. This was about two or three years ago; I don't know if things have changed since then.

Interviewer
Yep.
Mm-hmm.

Participant B1
I believe we created guidelines on how best to translate inclusively, even if specific UK or US wording isn't available in the target language. Working closely with linguists and leveraging their expertise was crucial, as was getting client approval.

Interviewer
Yeah.

Participant B1
It was also really important to address any areas the client was unhappy with.

Interviewer
OK. Does your company have any internal policies or preferences regarding gender-neutral language, or is this something that's developed more recently?

Participant B1
Yes. We became a B Corp three years ago, and since then we've introduced a lot of new policies as part of that journey. We've always been ethical and transparent — a charitable company — but becoming a B Corp gave us a framework to improve and do better.

Interviewer
Mm-hmm.

Participant B1

We always strive for improvement. As part of that, we reviewed our diversity and inclusion policies and updated them. We also invited our team members to share their pronouns — where and when they felt comfortable — on our website.

Interviewer
Yeah.

Participant B1
On LinkedIn and other platforms, we encourage people to be open about their pronouns, though it's not something we mandate. Some people might not know their pronouns or might prefer not to disclose them. But we encourage it as much as possible. So yes, we have many policies in place around this.

Interviewer
Yeah.

Participant B1
We have policies covering discrimination, diversity, inclusion, ethics — all that important stuff. I've had the chance to work on and help develop these policies over the past few years. But with this kind of work, there's always more to do and more ways to improve.

Interviewer
Yeah, absolutely.

Participant B1
It's a work in progress. We've made a good start and are probably ahead of some others, which is encouraging.

Interviewer
Yeah, that's fascinating. It's often small things that can make a big impact. For example, having "he/him" in one's bio helps me know how to address someone.

Participant B1
Yeah.

Interviewer

I’m not non-binary myself but just having that option helps avoid awkward conversations where someone says, “That’s not how you should address me.” It really facilitates communication.

Participant B1
Yeah.
Absolutely.

Interviewer
It’s just nice to be able to enter a conversation without worrying — to feel completely at ease knowing everyone’s on the same page.

Participant B1
I agree. It’s not always clear. I think it helps create an inclusive atmosphere and avoids awkwardness. Although I don’t identify as non-binary myself, I imagine it must feel awkward for those who have to constantly explain their pronouns or identity. Having pronouns visible helps eliminate that discomfort.

Interviewer
Yeah.

Participant B1
Yes, if we can all be more visible about how we identify, that’s an easy step to take. It was really quick and simple — I just mentioned it in a meeting, saying, “If anyone wants to share their pronouns, please feel free.” Immediately, everyone did it. It showed that if you promote inclusivity like that, people will get involved.

Interviewer
Exactly. Right, let’s move on to the next section. I wasn’t sure if you’d be able to answer these questions depending on your role in the company, but are you aware of any projects where you’ve faced...

Participant B1
Yes.

Interviewer

Challenges like the ones you described, or any you've encountered commissioning or delivering translations?

Participant B1
That's a good question. The client I mentioned was an easy case because it was very much client-led.

Interviewer
Yeah.

Participant B1
To my knowledge, that's the only client who has specifically requested this from us. We've done some promotion to other clients through marketing materials, but I can say the uptake was zero beyond that customer. I can only assume — and this is a big assumption — that brands and clients we work with are probably prioritising other things over inclusive language at the moment.

Interviewer
Yeah.

Participant B1
It's a shame, but I'm not surprised. Given government directives and economic challenges, from my experience, people seem to be prioritising AI over everything else right now.

Interviewer
Yeah.

Participant B1
And what AI can do for them in terms of speed and automating processes.

Interviewer
Mm-hmm.

Participant B1
For speed and cost reasons — especially cost, which often comes at the expense of quality. So I don't think inclusive language is even on their radar right now.

Interviewer
Yeah, that's true. I assume that for LSPs, where the priority is to make a profit and complete projects in as few rounds as possible to save time, adding this element can prolong the process — especially if you have to educate your linguists.

Participant B1
Yeah.

Interviewer
Or even educating yourselves from the start — it's just extra time and money that you might not have.

Participant B1
Yeah, I think a lot of the issue comes from the client side of things.

Interviewer
Mm-hmm.

Participant B1
There are definitely logistical challenges. I imagine this will be an even bigger issue for smaller LSPs. We're technically a small-to-medium-sized business, but most LSPs in the UK are probably smaller than us.

I've been in the business for 14 years, and we've grown from doing one million to much more. When I joined, there were only eight of us — I know how much time pressure there is. I'm also not sure if linguists are fully up to speed, since language is constantly evolving.

Interviewer
Mm-hmm.
Yeah.

Participant B1
I think there's a big unknown, and more guidelines on inclusive language are needed. You see resources in English, and I imagine other countries have resources for their own languages.

But when it comes to translating from one language to another, I don't think there are many resources available. So, there's definitely a gap there.

Interviewer
Yeah.

Participant B1
I'm not sure if individual companies are addressing this, since it feels like a very macro-level issue. Linguists and companies might struggle to tackle it on their own. So, it's definitely something that needs much more consideration.

Interviewer
Yeah.

Participant B1
I think clients don't have the headspace for this right now. Many small LSPs are still in survival mode because of the threat of AI. But I do believe everyone understands the importance of inclusive language, if that makes sense.

Interviewer
Yeah, that makes sense. That's the promising aspect, I think. If we can figure out where these guidelines should come from — or from whom — that's really the key question.

Participant B1
Yeah.
Absolutely.

Interviewer
Who decides what is inclusive, and how is that idea spread — and through what lens? Because deciding who is included is a very powerful thing.

Participant B1
Absolutely.
Yeah.

Interviewer

In these discussions, it'll be interesting to see how things evolve over the next decade — hopefully.

Participant B1
Yeah.

Interviewer
I don't want to call it an issue, but AI is a big topic, and we'll probably have more answers in the next few years about its impact on our work.

Participant B1
Yes, I agree. We're already moving in that direction, but I think once people's headspace clears, this will naturally become more prominent. That's why your study is so well-timed, in my opinion.

Interviewer
Absolutely. Thank you. One good argument in discussions about AI is that humans ultimately have the power to decide — we have the final say.

Participant B1
Yes.

Interviewer
In translation, this is where human input becomes crucial. Once we understand AI's role and groundwork, we can intervene and potentially retrain some of our AI programs.

Participant B1
Yeah.

Interviewer
Yes, we'll use those tools. But then again, how do we do that, and who decides when it happens? You mentioned providing training or raising awareness about inclusive language in your company?

Participant B1
Yes, I'd say we focus on raising awareness rather than formal training. We don't feel

confident enough to deliver strict training yet because we're not 100% sure we'd get it right or wrong. But we have tried to raise awareness and shared resources like blogs.

Interviewer
Yeah. I know what you mean.

Participant B1
We also did a webinar where we interviewed some translators as part of it. So we've done some work in this area, but I think there's still a lot more to do.

Interviewer
OK, so we've kind of established that there aren't really any solid guidelines out there — just some articles covering the topic, but no definitive groundwork.

Interviewer
There's nothing comprehensive to compare against, and if there are guidelines, they tend to be industry-specific or very niche. For example, I found one on inclusive language in tourism, which is a huge industry. But in terms of translation, not many translators are working in that area.

Participant B1
No, exactly. It's how to educate them all.

Interviewer
Yeah. That leads into the next section. You mentioned that was the only client you could identify with that demand. Do you expect that to increase in the coming years?

Participant B1
Yes.

Interviewer
Have you had any communication with other LSPs? Do you have any sense of what your competitors are doing in this area?

Participant B1
Yes, I think many of us are in the same position right now with the AI transformation and the

shifting market. I speak to a lot of my competitors since I'm on the Board of Directors of the ATC, so I'm in regular contact with colleagues, and we all face similar challenges.

One thing is that demand will likely grow because of a recent amendment to the European Accessibility Act — the EA Accessibility Act — which requires that all content be produced in an accessible manner.

Interviewer
Mm-hmm.

Participant B1
I'm not sure of all the ins and outs, and I don't know if there are specific guidelines yet. But the guidance for translation is that all content should be made available in the languages spoken by the workforce or target audience.

Interviewer
Yep.

Participant B1
As a requirement, this also includes directives for audiovisual content for people who are deaf, hard of hearing, or blind, including Braille.

Interviewer
OK.

Participant B1
This will take the form of subtitling or voice-over work for videos. So, there is definitely an EU and EA requirement for this. Whether clients comply and whether the EA provides clear instructions on what it should look like is another question.

Interviewer
Mm-hmm.

Participant B1
I don't know the full details, but I've already seen other LSPs posting about this topic.

Translation companies are definitely making their clients aware. We're also about to launch a campaign in August.

Interviewer
OK.

Participant B1
For e-learning clients who produce a lot of content for their internal workforce — training or internal communications — localisation is essential. And honestly, with AI and its benefits, there's really no excuse not to do it.

Interviewer
Yeah.

Participant B1
There's no excuse not to translate anymore because you can do some work fully human and polished, or use AI or hybrid approaches. Inclusivity should always be part of that, and accessibility options are available — clients just need to use them. It'll be interesting to see how this evolves.

Interviewer
Yeah.

Participant B1
I think it'll come as a result of acts like these making clients more aware. I'm not sure it's really on their minds right now.

Interviewer
Mm-hmm. That's really interesting because with the Act, there's something concrete — a baseline that tells you what you should be doing.

Participant B1
Yes.

Interviewer
Whether that makes people more receptive to the ideas is another question. There are many

factors at play, like cost and time. It'll be interesting to see how we manage to balance those in the coming years.

I'd also like to ask: how do you perceive the UK market's receptiveness to inclusive language practices? Obviously, that depends heavily on the context and the client.

Participant B1
Absolutely.

Interviewer
Mainly because clients dictate our work. What the client wants is usually what they get, and there's little room to negotiate or budget for changes.

Have you had any experience where you've had to...

...handle a situation involving inclusive language? For example, has a client come to you, and you've suggested changes to the source text to make it easier to translate?

Participant B1
Yes, that has happened occasionally. For example, with transportation projects focused on the UK market, some concepts don't translate or don't exist in the target market.

Last year, we had a client — I can't disclose the details — where a lot of legal content referred to UK laws that had no equivalent in the target market. So we had to say, "You can't include this whole section; it means nothing," because there's no translation for that law.

Interviewer
Yeah, of course.

Participant B1
Or it's simply not applicable at all. But I always like to say that language itself is inclusive — providing translation for different markets is a form of inclusivity.

At Comtec, much of our work focuses on e-learning for internal audiences and marketing for external audiences. Because of who we work with, I think there's definitely more emphasis on inclusiveness, especially since marketers want to sell their products and understand the importance of reaching diverse audiences.

Interviewer
Mm-hmm.

Participant B1
It's more cost-effective if clients provide translations of copy in target languages, whether they use AI or fully human translation — that's a separate question. But at least they're thinking about it.

The same applies to e-learning. Translation itself is an act of inclusivity, or at least I like to think so.

Interviewer
Yeah.

Participant B1
I think people are generally aware, at a basic level, that they need to cater for different languages. It gets more complicated when they start thinking about how to translate and the nuances of language use — and that's where people seem less informed at the moment.

Interviewer
Yeah.

Participant B1
Yeah, it's hard one to answer.

Interviewer
The most promising aspect is that we're talking about it — because if we don't, nothing will change. This should have a real impact on the future of the industry as a whole. I think it aligns perfectly with the idea that humans...

Participant B1
Absolutely. Yeah.

Interviewer
Human translators are not just post-editors — they have the final say, which is where we can intervene. This means we can embrace AI, but we need to either train it better from the start or train people to work with it effectively.

Participant B1
Yes, absolutely.

Interviewer
So we can focus on areas that might be problematic in the final product.

Participant B1
Yes, that's right. One thing we've done with training AI — and this may not fully cover non-binary identities yet — is that in customised AI projects for clients, we ask whether they want inclusive language.

For example, do they want masculine and feminine forms of certain terms included? That's part of the AI brief and instructions for linguists to ensure. So, there is that level of control. There are definitely things we can do now.

Interviewer
Mm-hmm.

Participant B1
We make sure that's implemented at a minimum.

Interviewer
Absolutely. OK, that brings us to our final question — which we've touched on already — but what practical steps could LSPs take to promote and implement inclusive language more effectively?

Participant B1

Absolutely. A few things come to mind. First, leaning on associations like the ATC or the ITI — which is the association for freelance linguists. There's definitely more guidance that can be provided at the association level. I say this as an association leader myself.

Interviewer
Mm-hmm.

Participant B1
There's more we can do in this area, and associations can provide much-needed guidance and leadership. So, I'd encourage LSPs to reach out to their associations for support.

I'd also say: educate yourselves. There are many simple steps you can take that don't require hiring consultants or spending thousands of pounds just to be inclusive. You can find articles online on how to foster inclusivity internally. There are lots of quick wins that really help, like...

Interviewer
Mm-hmm.

Participant B1
For example, asking people if they'd like to share their pronouns, so everyone knows how to address each other respectfully. That's part of internal inclusivity. And I think just talking about these issues openly helps as well.

Interviewer
Yeah.

Participant B1
We do a lot of posts around culture and inclusive language on our social media. Creating an environment focused on inclusion is really important. Promoting internal inclusion helps people feel comfortable sharing their opinions, feeling heard, and feeling valued. That's really where it starts. If you create that internal environment of inclusion, everything else evolves from there — including implementation.

Interviewer
Mm-hmm.

Participant B1
On the client side, I think it's important to look at the guidance available from your linguists. Speak with your clients and ask if inclusive language is a concern for them. Find out what their internal rules are — they might not have communicated them or might not even be aware. For example, they may have an internal style guide for English that uses non-gendered language.

Interviewer
Yeah.

Participant B1
We might not know about these internal rules because we're so focused on the target language, culture, and nuance that we miss this part. So going back to clients and checking with them would be really useful. Also, leveraging linguists based in the market is important — they understand these issues much better than we do.

Interviewer
Yeah. Mm-hmm.

Participant B1
Yeah.

Interviewer
Absolutely. Something that has come up a lot in my dissertation research is the importance of active collaboration with the communities themselves. Because if you're not talking to the people who...

Participant B1
Yeah.

Interviewer
...this will have an impact on, then you won't get very far. You might try something that's wrong, and the only way to learn is by collaborating directly with those communities.

Participant B1
No, absolutely not. Yeah.

Interviewer
Definitely. If we're collaborating with those communities, it needs to include similar communities worldwide — not just in the UK or America — so we can get a more representative and comprehensive understanding.

Participant B1
Yes.

Interviewer
Yeah, it'll be interesting to see how inclusive translation evolves over the next decade, especially with the rise of AI.

I'm curious about how human post-editing will fit into this. I'm excited and intrigued to see how it all pans out.

Participant B1
Yes, I think inclusive translation will definitely develop and become more important, especially with AI in the mix. Clients seem more aware now because AI can be unpredictable at the best of times.

Having glossaries and style guides is crucial, and clients are actively ensuring we check them. A few years ago, when translation was all human, freelancers often struggled to get clients to provide style guides — clients would say, "No, you don't need it," or simply weren't willing.

Interviewer
Mm-hmm.

Participant B1
Clients weren't willing to engage before because they assumed human translation guaranteed perfect quality. But now, with AI involved, it's ironically helped secure more reference materials and resources for linguists. It's funny how it's happened that way. I think we'll see the same thing happen with inclusive language.

Interviewer
Yeah.

Participant B1
Things that clients worry AI might get wrong are now becoming priorities to ensure they're properly included in translations. So, in a roundabout way, AI will actually help — the fear of AI making mistakes may encourage more careful attention.

Interviewer
Yeah, mm-hmm, absolutely.

Participant B1
The fear of getting it wrong with AI will help, I think.

Interviewer
Yeah, I think so. I've seen some absolutely insane mistakes in my short time in the industry that could cause serious reputational damage if they ever got released. So yes, I agree.

Participant B1
Yeah.

Interviewer
Yeah, that fear stemming from AI use will be important — it forces us to watch out for specific issues and problematic areas. If we don't, where do we fit in the process? Identifying these areas is crucial; it not only justifies our jobs but also makes us feel valued.

Participant B1
Yeah. Absolutely.

Interviewer
You can make a difference and have an impact on people's lives with just a few words. It's special. I hope we can continue working on this and eventually develop a set of guidelines.

Participant B1
Absolutely — you really can't underestimate it. Yes, absolutely.

Interviewer
Obviously, the guidelines would need to be pretty comprehensive and constantly evolving, but I agree completely.

Participant B1
Yes, language is always changing — new words appear every single day.

Interviewer
Exactly. And that's the fun part about this industry — about language itself.

Participant B1
Yes, absolutely. I think it's a special industry — undervalued but very important.

Interviewer
Oh yes, definitely. That brings me to the end of my questions. Thank you very much.

Appendix K: Thematic Coding Table

Participant	Quote / Summary	Code Type	Initial Code	Research Question	Emerging Theme
B1	Internal inclusive practices (pronouns, policies)	Descriptive	Internal inclusive policies	RQ1	Diverse Understandings Across Sectors
C1	Main principle is health literacy, not just readability	Descriptive	Health literacy as foundation	RQ1	Diverse Understandings Across Sectors
A1	Inclusive language is incredibly important because it makes the invisible visible.	In Vivo	“Makes the invisible visible”	RQ1	Inclusive Language as Visibility and Representation
B1	Translation itself is an act of inclusivity	Descriptive	Translation as inclusivity	RQ1	Inclusive Language as Visibility and Representation
C1	If someone doesn’t see themselves represented in a resource... they disengage	Descriptive	Representation matters in health info	RQ1	Inclusive Language as Visibility and Representation
C2	Challenges include addressing gender identity and disability, aligning with policies and charity regulations, and updating language across patient-facing materials.	Descriptive; In Vivo	align with policy	RQ1	Perceptions & approaches to inclusive language

C2	Avoid alienating users with unfamiliar terms; balance inclusivity with accessibility and clarity.	Descriptive; In Vivo	avoid alienation	RQ1	Perceptions & approaches to inclusive language
C3	Audience isn't homogeneous; aim for language that best represents diverse readers.	In Vivo	audience isn't homogeneous	RQ1	Perceptions & approaches to inclusive language
C3	We write for people with low health literacy; there is a trade-off between inclusivity and clarity or brevity.	Descriptive; In Vivo	low health literacy	RQ1	Perceptions & approaches to inclusive language
C3	Feedback on LGBTQ+ health language comes from opposite ends of the spectrum; you are never going to please everyone.	In Vivo	opposite ends of the spectrum	RQ2	Challenges implementing inclusive language
C3	Unsure what briefs or guidelines were sent to translators; translations are reviewed every three years so guidance may lag.	Descriptive	uncertainty of translation brief	RQ2	Challenges implementing inclusive language
C3	Terms like 'people of the global majority' are inclusive but unfamiliar and long when text must be concise.	Descriptive	unfamiliar inclusive term	RQ2	Challenges implementing inclusive language

A1	Spanish/Portuguese gendered language issues	Descriptive	Gendered language challenges	RQ2	Linguistic Constraints and Lack of Terminology
C1	No direct translation for ‘mammogram’	Descriptive	Missing concepts across languages	RQ2	Linguistic Constraints and Lack of Terminology
A1	Generational and cultural resistance	Descriptive	Resistance to change	RQ2	Resistance, Cost, and Time Pressures
B1	Inclusive language not a priority due to AI/cost	Descriptive	Market prioritises speed/cost	RQ2	Resistance, Cost, and Time Pressures
C1	Worrying about perfection paralyses action	In Vivo	“Better something than nothing”	RQ2	Resistance, Cost, and Time Pressures
A1	Client has final say in language use	Descriptive	Client control of translation choices	RQ3	Client Power and Professional Negotiation
B1	Client had no idea how to implement inclusive language	Descriptive	Client relies on linguist	RQ3	Client Power and Professional Negotiation
B1	Only one client demanded inclusive language	Descriptive	Low client demand	RQ3	Client Power and Professional Negotiation
C2	Internal staff training (including anti-racism); published accessibility and inclusivity policy; pronouns in signatures are optional within policy.	Descriptive	anti-racism training	RQ3	Institutional & client expectations

C2	Inclusive language guidelines extend from brand guidelines; developed via NHS review and an EDI Communications Panel, covering protected characteristics.	Descriptive	internal guide	RQ3	Institutional & client expectations
C2	Active advisory panels (Young People's Advisory; EDI Comms) recruited via social media and the charity magazine.	Descriptive	panel recruitment channels	RQ3	Institutional & client expectations
C3	All information is reviewed by people with lived experience; feedback informs ongoing revisions.	Descriptive	lived-experience review	RQ3	Institutional & client expectations
B1	EU Accessibility Act driving awareness	Descriptive	Legal/institutional pressures	RQ3	Institutional Shifts and Sectoral Pressures
C1	Worked with ATC for translation quality	Descriptive	Institutional partnerships	RQ3	Institutional Shifts and Sectoral Pressures
A1	Guidelines must evolve with usage	Descriptive	Style guides need regular review	RQ4	Evolving Resources and Community-Led Guidance
C1	Charities like Marie Curie and Stickman as good models	Descriptive	Charity-driven innovation	RQ4	Evolving Resources and Community-Led Guidance

C2	Used the Welsh government translation service; translators suggested alternative phrasing where direct translation lacked clarity.	Descriptive	Welsh translation	RQ4	Strategies & resources for inclusive translation
C3	Future wish: everyone 'singing from the same hymn sheet' so audiences are not confused across NHS and charities.	In Vivo	same hymn sheet	RQ4	Strategies & resources for inclusive translation
C3	Going forward, updated protected-characteristic guidelines will be shared with agencies and linguists on request.	Descriptive	share guidelines externally	RQ4	Strategies & resources for inclusive translation
C3	Some patient information is provided in six languages; limited scoping comparing MT and human translation.	Descriptive	six languages	RQ4	Strategies & resources for inclusive translation
C3	Start with definitions and explain chosen language upfront, then use it consistently throughout.	In Vivo	start with a lot of definitions	RQ4	Strategies & resources for inclusive translation
A1	Using style guides as shared reference	Descriptive	Guidelines support inclusive language	RQ4	Strategies for Inclusive Translation

B1	AI brief includes inclusive language instructions	Descriptive	Embedding inclusive rules in AI config	RQ4	Strategies for Inclusive Translation
C1	Co-production with users, particularly marginalised groups	Descriptive	Working with communities	RQ4	Strategies for Inclusive Translation

Appendix L: Thematically Coded Transcript Excerpt (Participant B1)

Context: Online interview via Microsoft Teams, late July 2025. Excerpt selected to illustrate overlapping codes for client-driven initiatives, resource development, and resistance/cost pressures. See Appendix M for the full codebook and definitions.

	Visibility & Representation
	Cross-sector Understandings
	Terminology Gaps
	Resistance / Cost & Time
	Client Power & Negotiation
	Institutional Shifts
	Strategies
	Evolving Resources

Interviewer
So, how does your organisation define or approach inclusive language in translation?

Participant B1
That's an interesting question. Our approach actually started about three years ago when a client first requested that their language be gender neutral.

To give you some background, the client is a company that deals with things like personality tests — you know, like Myers-Briggs and similar assessments.

Interviewer
Yeah, oh yes.

Participant B1
It's one of those brands, but they do much more than just personality tests. They offer training based on something called "colour energies." Each of us has a mix of red, yellow, blue, and green energies, and the training is built around this theory.

The training explores how your energies show up at work and in your personal life. We each received a 30-page profile detailing who we are, how we operate, how others should communicate with us, and how we can communicate with people who have opposite types. Essentially, it's workplace-focused.

Interviewer
OK.

Participant B1
The training is designed to help teams work together more effectively. They do a lot of work in the US. At the time — though sadly I don't think this is still the case based on recent news — there were directives to ensure all language was gender neutral.

Interviewer
OK.

Participant B1
I think some of the recent news from America shows that this is probably no longer the case. But three years ago, under the previous administration, it was very much a focus — they were mandated to ensure language was gender neutral.

Interviewer
Yeah. Mm-hmm.

Participant B1
A lot of the content used to include personal pronouns like "he acts like this" or "she is that." In the British version of the translation, all those personal pronouns were removed, which was fantastic.

Interviewer
Yep. Mm-hmm.

Participant B1
Not every language has the right vernacular to discuss these topics. Obviously, some languages have neutral forms of gendered pronouns, but others don't.

Interviewer
Yeah.

Participant B1
I can't speak every language, but I know that in some cases, the neutral pronoun translates as "it" rather than "them," which obviously isn't appropriate when referring to people with non-binary identities. So we created a whole piece on how to handle this properly.

Interviewer
Yep, yep — yeah, exactly.

Participant B1
We focused on how to avoid this as much as possible in the translations, aiming to make the texts much less gendered. I can't go into too many specifics because of an NDA — I worked on the project myself, but we collaborated extensively with linguists.

Our company offers a lot of cultural awareness solutions. We have linguists based in markets who help with transcreation, localisation, and providing cultural insights to clients. So, we coordinate those efforts closely.

Interviewer
Yep. Mm-hmm.

Participant B1
This was essentially to help us kind of like define the framework for that client of what that look, what gendered sorry non gendered language in their columns looks like when it comes to translation. So that's how it kind of came about.

Interviewer
OK.

Participant B1
To get started, we created some articles and webinars to promote this approach to clients. So far, no one else has really adopted it, but we've tried and had to push quite a bit to promote it.

Interviewer
That's amazing — wow, thank you. It's incredible how so much can come from just one project. Did the client provide you with a style guide or a document outlining their requirements? Was there anything in particular they wanted to have removed?

Participant B1
No, they had no idea how to do it. They had to call on us for support. Our freelance linguists did a lot of the heavy lifting, providing guidance throughout the process.

Interviewer
Wow, OK.
Mm-hmm.
Yep.

Participant B1
In some cases — I'm not sure which ones — it was agreed that we couldn't use inclusive language simply because it didn't exist yet. This was about two or three years ago; I don't know if things have changed since then.

Interviewer
Yep.
Mm-hmm.

Participant B1
I believe we created guidelines on how best to translate inclusively, even if specific UK or US wording isn't available in the target language. Working closely with linguists and leveraging their expertise was crucial, as was getting client approval.

Interviewer
Yeah.

Participant B1
It was also really important to address any areas the client was unhappy with.

Interviewer
OK. Does your company have any internal policies or preferences regarding gender-neutral language, or is this something that's developed more recently?

Participant B1
Yes. We became a B Corp three years ago, and since then we've introduced a lot of new policies as part of that journey. We've always been ethical and transparent — a charitable company — but becoming a B Corp gave us a framework to improve and do better.

Interviewer
Mm-hmm.

Participant B1
We always strive for improvement. As part of that, we reviewed our diversity and inclusion policies and updated them. We also invited our team members to share their pronouns — where and when they felt comfortable — on our website.

Interviewer
Yeah.

Participant B1
On LinkedIn and other platforms, we encourage people to be open about their pronouns, though it's not something we mandate. Some people might not know their pronouns or might prefer not to disclose them. But we encourage it as much as possible. So yes, we have many policies in place around this.

Interviewer
Yeah.

Participant B1
We have policies covering discrimination, diversity, inclusion, ethics — all that important stuff. I've had the chance to work on and help develop these policies over the past few years. But with this kind of work, there's always more to do and more ways to improve.

Interviewer
Yeah, absolutely.

Participant B1
It's a work in progress. We've made a good start and are probably ahead of some others, which is encouraging.

Interviewer
Yeah, that's fascinating. It's often small things that can make a big impact. For example, having "he/him" in one's bio helps me know how to address someone.

Participant B1
Yeah.

Interviewer
I'm not non-binary myself but just having that option helps avoid awkward conversations where someone says, "That's not how you should address me." It really facilitates communication.

Participant B1
Yeah.
Absolutely.

Interviewer
It's just nice to be able to enter a conversation without worrying — to feel completely at ease knowing everyone's on the same page.

Participant B1
I agree. It's not always clear. I think it helps create an inclusive atmosphere and avoids awkwardness. Although I don't identify as non-binary myself, I imagine it must feel awkward for those who have to constantly explain their pronouns or identity. Having pronouns visible helps eliminate that discomfort.

Interviewer
Yeah.

Participant B1
Yes, if we can all be more visible about how we identify, that's an easy step to take. It was really quick and simple — I just mentioned it in a meeting, saying, "If anyone wants to share

their pronouns, please feel free." Immediately, everyone did it. It showed that if you promote inclusivity like that, people will get involved.

Interviewer
Exactly. Right, let's move on to the next section. I wasn't sure if you'd be able to answer these questions depending on your role in the company, but are you aware of any projects where you've faced...

Participant B1
Yes.

Interviewer
Challenges like the ones you described, or any you've encountered commissioning or delivering translations?

Participant B1
That's a good question. The client I mentioned was an easy case because it was very much client-led.

Interviewer
Yeah.

Participant B1
To my knowledge, that's the only client who has specifically requested this from us. We've done some promotion to other clients through marketing materials, but I can say the uptake was zero beyond that customer. I can only assume — and this is a big assumption — that brands and clients we work with are probably prioritising other things over inclusive language at the moment.