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The Translation of Public Health Communication Materials from English into Ndebele in Zimbabwe

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Abstract

Translating public health communication materials into indigenous languages facilitates equitable access to crucial health information, particularly in a multilingual country like Zimbabwe. This study thus aims to identify, describe and analyze the constraints encountered by Ndebele translators whentranslating public health communication materials and the techniques they use to translate the latter.This study adopts a corpus-based, descriptive and analytical research design.Data was collected in the form of posters, pamphlets and booklets from clinics, hospitals and non- governmental organizations in Zimbabwe. 15 English excerpts and their corresponding Ndebele translations on COVID-19, Cholera, and HIV and AIDS were analyzed using Gideon Toury's Descriptive Translation Studies (DTS) model. The study is guided by the Communication Theory, Socio-linguistic theories and the Skopos Theory. Findings reveal that Ndebele translators encounter lexical, structural, and cultural constraints, with lexical constraints being the most prevalent due to gaps in the development and standardization of medical terminology in the Ndebele language. The results also indicate that among the several techniques employed by Ndebele translators, explicitation, borrowing and omission are the most frequently used techniques. The results of the study also indicate that the translations are effective to a greater extent. However, there are instances where important information is lost in the translation process thus highlighting the need for the development of medical terminology and specialized dictionaries so as to improve public health communication in the Ndebele language.

Keywords: Translation, Translation Constraints and Techniques, Effectiveness, Cholera, COVID-19 and HIV and AIDS, Ndebele language and Zimbabwe.

1. INTRODUCTION

In a multilingual and multicultural country like Zimbabwe, translating public health communication materials into indigenous languages is crucial for ensuring equitable access to crucial health information, regardless of people's linguistic backgrounds. According to Viriri (2003), following the amendment of the constitution in 2013, 13 additional African local languages spoken in Zimbabwe were adopted and recognized as official languages worthy of use in official contexts. These include Chewa, Chibarwe, Ndau, Kalanga, Nambya, Tonga, Venda, Xhosa, Koi-san, Nyanja, Sotho, Zimbabwean Sign Language, and Tswana. However, Shona and Ndebele remain the two predominant indigenous languages. Shona is spoken by approximately 75% of the population, while Ndebele is spoken by about 16% (Viriri, 2003). As a result, medical documents such as pamphlets, brochures, booklets, posters, and flyers have been translated from English into these two languages mainly thoughthere are disparities in the availability of Ndebele materials, with some hospitals having few or even no translated materials at all. These documents usually provide information on HIV and AIDS, Cholera, COVID-19, Tuberculosis, maternal and child healthcare, Malaria, sexually transmitted infections, and contraception.

However, the lack of standardized terminology and specialized dictionaries in the Ndebele language poses significant constraints for translators. This gap prevents them from accurately translating specialized terms and medical concepts in a manner that is both simple and comprehensible for the target audience but still faithful to the source text message. Consequently, the target audience either misinterprets crucial health information or it misses out on important information which was omitted during the translation process. This article aims to address the following questions: What are the constraints encountered by Ndebele translators when translating public health communication materials and what techniques do they use to translate the latter? This article thus aims to identify, describe, and analyze the constraints encountered by Ndebele translators when translating of public health communication materials, and the techniques they use to translate the latter.

II: LITERATURE REVIEW

2.1 Conceptual Review

In thispart, key concepts relevant to the study will be defined and reviewed.

2.1.1 Translation

The definition of translation has evolved over the years. The term "translation" comes from the Latin word "translatio," which signifies to 'bring' or 'carry across.'

Vinay and Darbelnet (1958: 20) define translation as "le passage d'une langue A à une langue B, pour exprimerunemêmeréalité X," which translates to moving from language [A] to language [B] to express the same reality X. On the other hand, Catford (1965: 20) defines translation as "the replacement of textual material in one language by equivalent textual material in another." This definition takes a purely linguistic approach, which overlooks other important aspects, such as cultural context and stylistic nuances that are crucial for effective communication.

Newmark (1981: 7) states that translation is "a craft consisting in the attempt to replace a written message and/or statements in one language by the same message and/or statements in another language." According to House (2015: 1), translation is "both a cognitive procedure which occurs in a human being's, the translator's head and a social, cross-linguistic and cross-cultural practice".

2.1.2 Translation Constraints

Translating texts from a developed language like English to a low-resource language such as Ndebele entails managing translation constraints caused by the linguistic and cultural gap. Darwish (1999) holds that a translation constraint is any factor in the translation process that limits the ability to achieve an optimal translation, both at macro and micro levels. In contrast, Hasan (2016: 402–403) categorizes translation constraints into two broad groups: linguistic and cultural constraints, which are further divided into lexical, syntactic, and semantic constraints.

This work adopts Hasan's model of translation constraints.

2.1.3 Translation Techniques

Ngoran (2022) defines a translation technique as an operational mechanism that the translator employs during the translation process. The same author categorizes translation techniques into two broad categories: foreignization and domestication. Techniques classified under foreignization include literal translation, word-for-word translation, borrowing, and calque. In contrast, domestication techniques encompass expansion, explicitation, transposition,

modulation, reformulation, omission, cultural equivalence, dynamic equivalence, synonymy, local adaptation, and global adaptation.

2.1.4 Public Health Communication

Public health communication is a subset of health communication that specifically deals with raising awareness and communicating critical health information to the general population. Mwamba (2018: 74) states that, public health communication targets disease prevention, promotes health, and educates the public. It involves the strategic dissemination of information related to disease prevention, health promotion, emergency preparedness and other public health initiatives aimed at improving the overall well- being of communities.

2.1.5 Ndebele Language

The Ndebele language, also known as isiNdebele or Northern Ndebele, is a language spoken in Zimbabwe that holds significant cultural and historical importance. It belongs to the Nguni branch of the Bantu language family, which is part of the larger Niger-Congo language family. There has been an ongoing debate for many years about whether Ndebele is a dialect of Zulu or if they are sister languages. According to Khumalo (2002: 108), the two languages are mutually intelligible and share approximately 85% of their vocabulary. In contrast, Ndhlovu (2012: 33) argues that while Ndebele has close connections with the Zulu language, it has developed its own orthography that reflects its unique context in Zimbabwe.

2.2 Theoretical Review

This part focuses on the theories that guide the study. These are the Communication Theory, the SkoposTheory, and the Socio-linguistic theories.

2.2.1 Communication Theory

According to Newmark (cited in Munday, 2009:21), translation theory has progressed through four successive stages: the linguistic stage, the communicative stage, the functionalist stage, and the ethical/aesthetic stage. Newmark further explains that the communicative stage began around 1950 and focused on categorizing text registers, engaging a range of readership groups (from less-educated to expert), and identifying various procedures for translating different segments of a text. In Newmark's view (1988:39), the Communicative Theory of Translation "attempts to produce on its readers an effect as close as possible to that obtained on the readers of the original." This definition suggests that

Communicative Translation emphasizes the "force" of the message rather than its content, aiming to convey the exact contextual meaning of the original text. In this way, both the content and the language become readily acceptable and comprehensible to the target audience (Yanlan, 2019:179).

2.2.2 Skopos Theory

The Skopos Theory was developed in Germany in the late 1970s, and pioneered by Vermeer (1978).At the core of the Skopos Theory lies Vermeer's Action Theory, which posits that every action is driven by a purpose therefore the translator's actions and choices are conditioned by the intended goals of the translation. It centers on the notion that the purpose or "skopos" or "purpose" of a translation fundamentally governs the strategies and methods employed in the translation process.Nord (as cited in Wang, 2016) highlights the importance of the addressee—the intended recipient or audience of the target text—who brings their own culture-specific knowledge, expectations, and communicative needs.

2.2.3 Socio-linguistic Theories

The Sociolinguistic theory was propounded by Nida (1964), followed by communicative aspects of translation (Chiutsi, 2022: 38).According to Ngoran (2022: 13), the socio-linguistic theories of translation focus on the target text and prioritize the audience receiving the translation. These theories utilize the communication model, viewing translation as a communicative act in which a message encoded in the source language must be decoded by the target readers.The main tenets of sociolinguistic theories emphasize dialect and register differences, elevating linguistic structures to a higher relevance level, where they can be examined based on their communicative functions.

2.3 Empirical Review

This section discusses the constraints encountered by translators when translating these specialized documents into languages of limited diffusion. Literature underscores, among others, three main constraints in this domain, namely cultural and terminological constraints as well as limited resources.

2.3.1 Cultural Constraints

The translation of public health communication materials across different languages is fraught with cultural constraints that arise from variations in cultural norms, values and

beliefs.Kruger (2010:168) explains that "translating sensitive and cultural taboo words remains a problem in a society where a large part of the population prefers euphemisms and figurative language to direct terms for private parts and sexual intercourse." In regards to the Ndebele society, Ndhlovu (2012) argues that cultural taboos are essential to the moral framework of Ndebele society and play a crucial role in determining the acceptability or non-acceptability of translated texts in the target language. Topics such as sex, private body parts, nudity, bodily functions, illness, and death are considered taboo in Ndebele culture. Consequently, they are often discussed using euphemisms, metaphors, or colloquial expressions.

Warambo (2015), argues that translators face cultural dilemmas because they may want to respect the target culture but in medical translation there is an eminent push to be as direct as possible. Azizova (2023) points out that cultural norms, beliefs, and idiomatic expressions related to health and illness present a significant challenge in translating from English to Azerbaijani.

2.3.2 Terminological Constraints

Madzimbamuto (2012:132) asserts that many health professionals lack the appropriate terminology in their African languages for the information being communicated. This gap primarily arises because technical knowledge is often developed through formal education in English rather than in one's native African language. Additionally, translators may encounter source texts (ST) that are obscure in meaning. However, in medical contexts, where specific terms convey particular concepts, ambiguity presents a significant challenge for translators (Imad, 2013). Liebenberg (2018) emphasizes that the expert-lay person duality inherent in health communication is a challenge that translators can address by employing various text types, translation strategies, registers, and vocabularies. Svongoro et al. (2021) further highlight that translators sometimes discover that equivalent concepts do not exist in the target language. They elaborate that despite the challenges posed by lexical issues, such as polysemous words, homonyms, ambiguous terms, synonyms, and collocations, medical translation still demands accuracy and conciseness.

2.3.3 Resource Limitations

Resource limitations include financial, human, and technological factors that are essential for effectively disseminating public health communication materials. It is worthy to note that, one of the significant challenges is the shortage of qualified translators who are proficient in

both the source text (ST) and target text (TT), as well as knowledgeable about how to effectively translate specialized medical terminology for the public. Ndhlovu (2012: 1) points out that Ndebele translations are often conducted by untrained or partially trained translators, with only a few translators who have gained experience over time. Additionally, translators are affected by the limited nature of computer-assisted translation (CAT) tools and other technological resources. Abenet (2024) argues that the digital divide worsens the translation challenges in African indigenous languages, as access to technology and internet connectivity may be limited in remote or underserved areas. The same author adds that the lack of linguistic resources—such as dictionaries, glossaries, and terminology databases—hinders the translation process and increases the likelihood of errors and inaccuracies.

3. RESEARCH METHODOLOGY

This study adopts a corpus-based, descriptive and analytical research design.Data was collected from pamphlets, booklets and posters that contain information on HIV and AIDS, Cholera and COVID-19 to generate an English- Ndebele parallel corpus. This data was collected from clinics, hospitals,and non-governmental organizations in Zimbabwe. 15 English excerpts and their corresponding Ndebele translations were analyzed using Gideon Toury's Descriptive Translation Studies (DTS) model. Descriptive statistics such as frequency, percentages and total score were used to quantify the qualitative data.

3.1 DATA ANALYSIS

Gideon Toury's (1995) model of Descriptive Translation Studies is used to analyze the data in three phases: identification, description and explanation. In the identification phase, the ST is identified followed by the identification and definition of the element of interest. The description phase presents the context of production, possible constraints to translation, the Ndebele, linguistic and literal gloss of the element of interest and finally the target text. In the explanation phase, the macro- translation strategy and micro- translation strategy are described as well as the translation theory that was used. The results of the translation constraints and translation techniques are then quantified in a table demonstrating the frequency, percentage and total.

Table 1:

A.	**Identification**	
1.	Source Text	Wear a **mask** when leaving the house (Do not
B.	**Description**	
4.	Context of Production	Disease prevention and control
5.	Target text	Gqokani ama- **mask** nxa liphuma ezindlini(Lingabogqokelana ama- mask).
6.	Possible translation constraint	Lexical constraint: absence of equivalent term in the Ndebele language.
C.	**Explanation**	
7.	Macro-translation strategy	Foreignization
8.	Micro-translation strategy	Borrowing
9.	Translation Theory	Skopos Theory

Value judgement: The translator uses borrowing to translate the term 'mask' into the Ndebele language due to the absence of an equivalent of the term. The term 'mask' was borrowed into the Ndebele language in general hence many people understand what it means. The translation is therefore effective and acceptable.

Table 2:

A.	**Identification**		
1.	Source Text		Use an **alcohol based sanitizer** when no soap and water is available
2.	Element of interest		Alcohol based sanitizer
3.	Definition		A liquid or gel that contains alcohol and is used to kill germs and bacteria on the skin.
B.	**Description**		
4.	Context of Production		Disease prevention and control
5.	Target text		Sebenzisani **imithi yokuhlanza izandla(hand sanitizer) elenani lotshwala**.
6.	Gloss	Ndebele	Imithi/ yokuhlanza/ izandla /elenani /lotshwala
		Linguistic	Medicines/ to clean/ the hands/with some/ alcohol.
		Literal	An alcohol based hand sanitizer
7.	Possible translation constraint		Lexical constraint: absence of equivalent term in the Ndebele language.
C.	**Explanation**		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Explicitation
10.	Translation Theory		Communication theory

Value judgement: The term 'alcohol based sanitizer' is rendered by explicitation in the Ndebele language. The translator explains what is implied by the term by describing the nature and function of the term in simple words so that the message passes effectively. The translator also adds 'hand sanitizer' in the Ndebele text to add more clarity sinceit is more commonly known and used by many people. The translation is effective and acceptable.

Table 3:

A.	**Identification**		
1.	Source Text		**Practice social distancing-** maintain a 1 metre distance from people.
2.	Element of interest		Practice social distancing
3.	Definition		Act of maintaining physical distance from other people so as to prevent the spread of a disease.
B.	**Description**		
4.	Context of Production		Disease prevention and control
5.	Target text		**Lingameli duzane labanye-** tshiyani isibanga esiyimitha elilodwa.
6.	Gloss	Ndebele	Lingameli/ duzane/ labanye
		Linguistic	Do not stand/ close /to others
		Literal	Maintain distance between you and other people.
7.	Possible translation constraint		Structural constraint: complexity of the source text structure
C.	**Explanation**		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Modulation
10.	Translation Theory		Communication Theory.

Value judgement: The source text 'practice social distancing' is translated by modulation into the target text. The term is translated as 'do not stand close to others' which is a negative form of the initial expression. The use of the negative form adds more emphasis on the importance of maintaining social distance. The translation is effective and acceptable.

Table 4 :

A.	**Identification**	
1.	Source Text	There is no evidence that you can get COVID-19 from your food, however, it is important to practice good hygiene and take the **necessary precautions** at all times.
2.	Element of interest	**Necessary precautions**
3.	Definition	Essential and required measures taken to prevent the transmission of infectious diseases.
B.	**Description**	
4.	Context of Production	Disease prevention and control
5.	Target text	Akula bufakazi bokuthi ungathola igcikwane leCOVID-19 ekudleni kodwa kuqakathekile ukuthi sihlale sihlanzekile ngaso sonke isikhathi.
6.	Possible translation constraint	Lexical constraint: absence of equivalent term in Ndebele
C.	**Explanation**	

7.	Macro-translation strategy	Foreignization
8.	Micro-translation strategy	Omission
9.	Translation Theory	Communication theory

Value judgement: The translator omits 'necessary precautions' due to the absence of an equivalent in the Ndebele language. However, this omission is not justified because it leaves out important information that serves to remind people to respect all sanitary measures. The translator could have used explicitation to render the term for example 'bethatheizinyatheloezidingakalayozokuzivikela' which translates to 'take the necessary steps to protect themselves'. The translation is fairly effective and adequate.

Table 5 :

A.	**Identification**		
1.	Source Text		Wash hands with soap and running water or **alcohol based hand rub at 7 critical times.**
2.	Element of interest		Wash hands with soap and running water or alcohol based hand rub at 7 critical times
3.	Definition		A sanitary measure that consists of washing your hands with soap and running water or sanitizer after 7 crucial instances of exposure to COVID-19
B.	**Description**		
4.	Context of Production		Disease prevention and control
5.	Target text		Geza izandla zakho ngamanzi alesepa ngemva koku:
6.	Gloss	Ndebele	Geza/izandla/zakho/ngamanzi/alesepa/ngemva/koku
		Linguistic	Wash/hands/your/withwater/that hassoap/after
		Literal	Wash your hands with soap and water after
7.	Possible translation constraint		Lexical and structural constraint: absence of equivalent for alcohol based hand rub and complexity of the structure of 7 critical times.
C.	**Explanation**		
8.	Macro-translation strategy		Foreignization
9.	Micro-translation strategy		Omission
10.	Translation Theory		Skopos Theory.

Value judgement: The translator chose to use omission to render this segment into the target language. However, this omission leads to the loss of very important information as the sanitary measure of 'using alcohol based hand rub' is completely left out from the target language. Not only that, the translator equally omits 'at 7 critical times'. The translator also omits the term 'running water' in the target language which is a very important sanitary measure. This translation is ineffective and unacceptable.

Table 6:

A.	Identification		
1.	Source Text		Keep food at **safe temperatures**
2.	Element of interest		Safe temperatures
3.	Definition		Temperatures in which harmful pathogens cannot grow and contaminate the food.
B.	Description		
4.	Context of Production		Disease prevention
5.	Target text		Gcina ukudla **emekweni etshisayo kumbe eqandayo okufaneleyo**
6.	Gloss	Ndebele	emekweni/etshisayo/kumbe/eqandayo/okufaneleyo
		Linguistic	Intemperatures/which arehot/or/which arecold/appropriate
		Literal	appropriate hot or cold temperatures
7.	Possible translation constraint		Lexical constraints: absence of an equivalent term in Ndebele
C.	Explanation		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Explicitation
10.	Translation Theory		Communication theory

Value judgement: Explicitation is used to render the expression 'safe temperature' in the Ndebele language. The translator adopts an explanatory approach so that the target audience can understand that both cold and hot foods must be kept and consumed at the right temperature so that they do not get sick. This translation is effective and acceptable.

Table 7 :

A.	Identification		
1.	Source Text		Treatment of Cholera: **Oral Rehydration Solution(ORS)**
2.	Element of interest		Oral Rehydration Solution(ORS)
3.	Definition		A type of fluid replacement used to prevent and treat dehydration especially due to diarrhea.
B.	Description		
4.	Context of Production		Disease treatment
5.	Target text		Ukwelatshwa kweCholera: **iOral Rehydration Solution**
6.	Gloss	Ndebele	i/OralRehydration Solution
		Linguistic	The/Oral Rehydration Solution
		Literal	Oral Rehydration Solution
7.	Possible translation constraint		Lexical constraint: absence of equivalent term in the Ndebele language.
C.	Explanation		
8.	Macro-translation strategy		Foreignization

9.	Micro-translation strategy	Borrowing
10.	Translation Theory	Skopos Theory

Value judgment: Borrowing is used to render the term 'Oral Rehydration Solution' in the Ndebele language. However, this term is very difficult to understand, particularly for Ndebele-speaking people. This translation is ineffective and unacceptable.

Table 8:

A.	Identification		
1.	Source Text		Use safe water and **raw materials**
2.	Element of interest		Raw materials
3.	Definition		These are basic ingredients and components used to make food including vegetables
B.	Description		
4.	Context of Production		Disease prevention
5.	Target text		Sebenzisa amanzi ahlanzekileyo
6.	Gloss	Ndebele	Sebenzisa/amanzi/ahlanzekileyo
		Linguistic	Use/water/clean
		Literal	Use clean water
7.	Possible translation constraint		Lexical constraint: absence of equivalent term in the Ndebele language
C.	Explanation		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Omission
10.	Translation Theory		Skopos theory

Value judgement: The translator omits the term 'raw materials' in the target text. This particular segment is a heading on the poster hence trying to explicitate the meaning of the term would have violated the style of the text. The meaning of the term is compensated by the explanations that follow under the heading though this might not cater for people who don't have enough time to read everything. The translation is fairly effective and adequate.

Table 9:

A.	Identification		
1.	Source Text		How Cholera is spread: **Stool**
2.	Element of interest		**Stool**
3.	Definition		Waste matter in bowel movement.
B.	Description		
4.	Context of Production		Spread of the disease
5.	Target text		Ukumemetheka kweCholera: **ingaphandle**
6.	Gloss	Ndebele	i/ngaphandle
		Linguistic	The/outside
		Literal	The stool
7.	Possible translation constraint		Cultural constraint: it is a taboo to use a word that directly and explicitly describes waste matter.

C.	Explanation	
8.	Macro-translation strategy	Domestication
9.	Micro-translation strategy	Modulation
10.	Translation Theory	Sociolinguistique theories

Value judgement: Modulation is used to render the source text into the Ndebele language. The term 'ingaphandle' derives mostly from the expression 'ngisayangaphandle which means 'lm going to the toilet'. However, when the term is used as a noun it is ambiguous and might confuse some people. The term is used alongside a picture demonstrating what the term is describing. This translation is fairly effective and adequate.

Table 10 :

A.	Identification		
1.	Source Text		**Contaminated** food, fruits, vegetables and drinking water.
2.	Element of interest		Contaminated
3.	Definition		Containing harmful substances or pathogens that can make people sick.
B.	Description		
4.	Context of Production		Spread of the disease
5.	Target text		Ukudla, izithelo, imibhida lamanzi **alamagciwane.**
6.	Gloss	Ndebele	Ala/magciwane
		Linguistic	Thathave/viruses
		Literal	Infected with viruses
7.	Possible translation constraint		Lexical constraint: absence of equivalent in Ndebele.
C.	Explanation		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Explicitation
10.	Translation Theory		Communication Theory

Value judgement: Explicitation is used to render the term 'contaminated' in the Ndebele text . The translator explicitates the meaning of contaminated by explaining that the food or water will be infected with viruses. However, there is a typographical error in the translation as the correct orthography of 'alamagciwane' is 'alamagcikwane'. The translation is fairly effective and adequate.

Table 11:

A.	Identification		
1.	Source Text		When l started to have sex, we didn't use **condoms.**
2.	Element of interest		**Condoms**
3.	Definition		Thin fitted tube worn on private parts to prevent pregnancy and the spread of STIs.
B.	Description		
4.	Context of Production		Disease prevention and control
5.	Target text		Ngiqala ukuya emacansini asizange sisebenzise **amacondomu.**
6.	Gloss	Ndebele	Ama/condomu
		Linguistic	The/condoms
		Literal	condoms
7.	Possible translation constraint		Cultural constraint: taboo of directly using explicit words
C.	Explanation		
8.	Macro-translation strategy		Foreignization
9.	Micro-translation strategy		Calque
10.	Translation Theory		Skopos Theory

Value judgement: The translator calques the term 'condom' into the target language. However, this calque violates Ndebele language culture and values that prefer the use of euphemism. This term could have been translated as 'ijazilomkhwenyana' which is a much

more respectful way of referring to condoms in the Ndebele language. This translation is fairly effective and adequate because people will understand what it means.

Table 12 :

A.	Identification		
1.	Source Text		Once a child receives a positive HIV test result, the child will be prepared by the clinic to start **Antiretroviral medicines or ARVs**
2.	Element of interest		Antiretroviral medicines or ARVs
3.	Definition		Medication used to treat people with HIV which stops HIV from reproducing itself
B.	Description		
4.	Context of Production		Disease treatment
5.	Target text		Lapho umntwana etholakala elegcikwane leHIV, uzalungiselelwa ngabemtholampilo ukuqalisa ukunatha **amaphilisiaweAntiretrovial kumbe amaARV.**
6.	Gloss	Ndebele	Ama/philisi/ awe/Antiretrovial /kumbe ama/ARV
		Linguistic	The/pills/of/Antiretrovial/or/the/ARVs
		Literal	Antiretrovial or ARV pills
7.	Possible translation constraint		Lexical constraint: absence of equivalent term in the target language.
C.	Explanation		
8.	Macro-translation strategy		Foreignization
9.	Micro-translation strategy		Borrowing
10.	Translation Theory		Skopos theory

Value judgement: The term 'Antiretrovial medicines or ARVs' is borrowed into the target language. This term was borrowed into the Ndebele language and is widely used by both healthcare providers and the general population although there is higher frequency of usage of the acronym than the full term. Taking into consideration that the target text includes the acronym that is well understood by the population, the translation is effective and acceptable.

Table 13 :

A.	Identification		
1.	Source Text		I thought HIV can only be contracted by having **multiple sexual partners.**
2.	Element of interest		Multiple sexual partners.
3.	Definition		Engaging in sexual activities with two or more individuals.
B.	Description		
4.	Context of Production		Spread of the disease
5.	Target text		Ngangicabanga ukuthi igcikwane leHIV lithelelwana kuphela **ngokuqhuba ezocansi labantu abatshiyeneyo**
6.	Gloss	Ndebele	Ngokuqhuba/ezocansi/labantu/abatshiyeneyo
		Linguistic	Bypartaking/inmat activities/withpeople/who aredifferent
		Literal	Having sexual intercourse with many people
7.	Possible translation constraint		Cultural constraint: it is taboo in the Ndebele language to directly talk about sex.
C.	Explanation		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Adaptation
10.	Translation Theory		Sociolinguistique Theories

Value judgement: Adaptation has been used to convey the message accurately and in the most natural and acceptable way in the Ndebele language. The source text element 'multiple sexual partners' is conveyed through euphemism to tone down the explicit nature of the ST which is considered as a cultural taboo in the Ndebele language. The translation is effective and acceptable.

Table 14:

A.	Identification		
1.	Source Text		**How Cholera is prevented:**
2.	Element of interest		How Cholera is prevented
3.	Definition		Ways in which the spread of Cholera is reduced
B.	Description		
4.	Context of Production		Disease prevention
5.	Target text		**Ukuvikelwa kwesihudo seCholera**
6.	Gloss	Ndebele	Ukuvikelwa/kwesihudo/seCholera
		Linguistic	Theprevention/ofthediarrhea/of Cholera
		Literal	The prevention of Cholera
7.	Possible translation constraint		Structural constraint: complexity of the ST structure makes it difficult to render in the Ndebele language.
C.	Explanation		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Transposition
10.	Translation Theory		Communication theory

Value judgement: Transposition is used to render the source text 'how Cholera is prevented' into the target language. The way the ST is formulated makes it difficult for the translator to try and replicate the same structure in the Ndebele language. The verb 'prevented' becomes a noun 'prevention' in the target language which adheres to the Ndebele language syntax. The translation is effective and acceptable.

Table 15:

A.	Identification		
1.	Source Text		Accepting an **HIV positive diagnosis** will not be something that will happen quickly but it is important that you find the right support.
2.	Element of interest		HIV positive diagnosis
3.	Definition		This is a confirmation that an individual has been infected with HIV.
B.	Description		
4.	Context of Production		Disease
5.	Target text		Ukwamukela **impumela yokuba legcikwane leHIV** akusoze kwenzakale masinyane kodwa kumqoka ukuthi uthole usekelo olufaneleyo.
6.	Gloss	Ndebele	Impumela/ yokuba/ legcikwane/ leHIV
		Linguistic	The/result/of having/the/virus/of/HIV
		Literal	Infected with HIV
7.	Possible translation constraint		Lexical constraint: absence of equivalent terms in the Ndebele language
C.	Explanation		
8.	Macro-translation strategy		Domestication
9.	Micro-translation strategy		Explicitation
10.	Translation Theory		Communication Theory

Value judgement: The translator chooses to use explicitation to render the source text element 'HIV positive diagnosis' in the Ndebele language. The constraint the translator encountered was the absence of a direct equivalent for the term 'diagnosis' hence they proceeded by explaining what is implied by the term so that the target language can easily understand what it means. This translation is effective and acceptable.

3.2 Data Interpretation

The study's results indicate that most translations are effective and acceptable. However, there are instances where important information is lost during the translation process, and the register of some borrowed terms is too high to be understood by people with low linguistic proficiency. The quantitative analysis of the translation constraints and techniques is presented in the tables below.

Table 4.4.1.1 :Results of Frequency of Types of Constraints Encountered

Type of constraint	Frequency	Percentage
Lexical constraints	10	62.5%
Structural constraints	3	18.75%
Cultural constraints	3	18.75%
Total	16	100%

The resultsindicate that lexical constraints are the most prevalent constraints encountered by Ndebele translators. This high prevalence suggests that the Ndebele language is lagging behind in terms of the development and standardization of medical and technical terminology. This gap stems from the fact that most scientific discoveries and medical terminology are developed in Western languages. Not only that, Ndebele translators also encounter structural constraints due to the complex syntax of some of the source text segments that make it difficult to render them with ease, hence obliging them to be creative in their renditions. Additionally, Ndebele translators equally encounter cultural constraints due to cultural taboos linked to body parts, bodily functions, and sexual activities, just to mention these.

Table 4.4.1.2 : Results of Frequency of Translation Techniques

Translation technique	Frequency	Percentage
Explicitation	4	26.67%
Borrowing	3	20%
Omission	3	20%
Modulation	2	13.33%
Calque	1	6.67%
Adaptation	1	6.67%
Transposition	1	6.67%
Total	15	100%

The above table indicates that explicitation, borrowing and omission are the most frequently used translation techniques. This shows that translators often feel the need toborrow, omit or explaincertain conceptsthat do not have direct equivalents in the target language in order to render them in a way that could easily be understood by the target audience. The results equally reveal that translators also resort to modulation, calque, adaptation and transposition to successfully convey source text messages in a way that respects theNdebele language culture, grammar and syntax.

4. Conclusion

In conclusion, the study has revealed that lexical constraints are the most prevalent constraint encountered by Ndebele translators when translating public health communication materials. These constraints often arise from the limited availability of equivalent terminology in the target language, particularly in the context of a specialized and technical domain like public health communication. To overcome these challenges, translators frequently resort to techniques such as explicitation, borrowing and omission. The results indicate that most of the segments that were rendered through explicitation were effective while some of those that were rendered through borrowing and omission were moderately effective with some even being ineffective. These findings underscore the critical need to standardize and further develop Ndebele language terminology in order to enhance public health communication. A

standardized and developed terminology will not only expand the lexical repertoire of the Ndebele language, allowing it to keep up with new medical discoveries, but it will also promote the consistent use of terms across various contexts, ensuring that public health messages are both linguistically and culturally appropriate.

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