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SCHOOL OF HUMANITIES AND SOCIAL SCIENCES**



**From the Complexities of Schizophrenia
to the Linguistics of Dialects and Singlish –
A Chinese Rendition of
The Sound of Sch: A Mental Breakdown, A Life Journey by Danielle Lim**

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Declaration of Authorship

Abstract

Inspired by local author Danielle Lim's English language biography of her uncle's struggle with schizophrenia and her mother's painful journey as both his and their mother's caregiver, this capstone project explores translation strategies involved in presenting the complexities of the little-known Schizophrenia, as well as in converting Singlish and dialects to the Chinese language. Taking a functionalist perspective of translation, the Chinese rendition of *The Sound of Sch: A Mental Breakdown, A Life Journey* hopes to raise public awareness about mental illnesses in its target text readers, and to reduce social stigmatisation of the mentally ill in that process. The translation process involves managing the author's intent, the function of the target text, textual coherence and fidelity, as well as achieving a balance between foreignisation and domestication. Through comparing the local version with that of a Taiwanese translator, differences in the strategies and perspectives involved will also be identified and discussed, shedding light on how best to create a target text that is both faithful to the source text and yet not without the translator's unique individuality.

Keywords: complexities of schizophrenia, public awareness, Singlish, dialects, function of the target text, coherence, fidelity, foreignisation, domestication.

Chapter 1 Translation

1.1 Chapter 1

Source Text	Target Text
<p><i>My slippers, where are my slippers?</i></p> <p>He lies on the road, his rough brown skin against the rough black tarmac, his old brown slippers that were flying in the air just a few minutes ago now out of sight. <i>My slippers, where are my slippers?</i> He tries to get up to look for his slippers, but a sharp pain pierces through like a <i>satay</i> stick skewering into the flesh, as sharp as a scream coming from someone he can hear but cannot see. He remembers himself flying in the air, but doesn't know why; he was just walking the same way he walked every day, and he waited for the green man to start beeping in the same way he waited every day. He remembers feeling hungry, and thinking that it must be time to go home for dinner. He remembers his mother's voice, telling him to come and eat.</p> <p>Now there are faces hovering over him, and unfamiliar voices asking, Are you okay? He touches his stomach to see if there really is a stick lodged there, but there is only his stomach and the pain is starting to shoot through his whole body. When he lifts his hand, it is wet and red.</p> <p>When the sounds fade away, he hears two things – a siren that sounds like a police car siren, and the distant sound of someone sweeping fallen leaves in the heat of the afternoon sun.</p> <p style="text-align: center;">*</p> <p><i>Can a life weave along through the same notes and yet come to play forth different sounds?</i></p> <p><i>When I think of my uncle, I hear the sounds:</i></p> <p>- <i>Seng, an ordinary name;</i></p>	<p>拖鞋，我的拖鞋在哪里？</p> <p>他躺卧在柏油路上，粗糙黝黑的皮肤贴在同样粗糙乌黑的地面上。他破旧的褐色拖鞋刚刚还在空中飞舞，如今已不知去向。拖鞋，我的拖鞋在哪里？他试着起身寻找拖鞋，但一阵如沙爹枝刺入肉串般的剧痛，使他动弹不得。那种痛楚如同只闻其声、不见其人的呐喊。他依稀记得自己也和拖鞋一样在空中飞舞，却不知何故；反正他当时正走在日复一日走着的路，也在等候日复一日等着的绿人，发出熟悉的哗哗声。他记得当时肚子饿，想着是时候回家吃晚饭了。他还记得听到母亲叫唤他吃饭。</p> <p>此际，他看到几张晃动的面孔，听到几把陌生的声音。“你没事吧？”他摸摸肚子，想知道是否真有沙爹枝嵌在上面，却见空无一物；而这股剧痛，正快速蔓延到全身。当他抬起手来，发现它已被鲜血沾湿。</p> <p>当人声消散后，他听到两个声响。一个听似警车警笛声，另一个则是远处传来有人在烈日下打扫落叶的声音。</p> <p style="text-align: center;">*</p> <p>通过相同音符编织的人生，是否可能恰如其反，奏出不同的声音？</p> <p>每当想起我的舅舅，就听到各种不同声音：</p> <p>- 阿成，一个平凡的名字；</p>

<ul style="list-style-type: none"> - <i>Rough brown bristles tied to one end of a wooden stick brushing against the rough brown leaves;</i> - <i>Rubber slippers brushing against the floor;</i> - <i>Voices hushed in scholarly discussion;</i> - <i>Other voices calling out “xiao lang, xiao lang”;</i> - <i>Chopped garlic and bean sprouts sizzling in a wok.</i> <p><i>Perhaps each of our lives has its own sound, meandering alone amidst other sounds, and sometimes, another sound comes along, mirroring the first, moving in tandem, nudging the first along. Music? Who cares to listen? Well, you never know.</i></p>	<ul style="list-style-type: none"> - 拴在木棍尾端的粗糙棕色刷毛，扫着粗糙棕色叶子的声音； - 橡胶拖鞋摩擦着地板的声音； - 听似学术讨论的窃窃私语； - 其他人呼叫他“疯人，疯人”（福建话）的声音； - 蒜蓉和豆芽在热镬中发出的嘶嘶声。 <p>也许每个人的生命都有一把自己的声音，独自在芸芸众“声”其间穿梭。而有时候会出现另一把声音，与之并排、对应，同时轻推着第一把声音。两把声音的合奏，会否引来知音？这很难说，且让我们拭目以待吧。</p>
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1.2 Chapter 4

Source Text	Target Text
<p>The doctors at the Woodbridge Hospital, which was set up in 1928 to house and treat patients of mental illnesses, have asked to speak to Seng’s family. So Chu accompanies her mother to the hospital, which is looked upon by the general population with a fear and aversion like no other. It is known as the ‘mad man’s hospital’.</p> <p>Mother and daughter take a bus to Yio Chu Kang in the northern part of Singapore, after which they walk down the long stretch of road towards the hospital. Chu holds her mother’s arm but they do not speak much. Both know the same unspoken fear going through the mind of the other. They enter the building and are directed to a doctor’s room very near the entrance.</p> <p>The doctor who speaks to them is a man in his fifties, with a kindly demeanour. He tries his best to speak in a mix of English and Hokkien, the only dialect Chu’s mother can speak, addressing her as ‘Ah Um’, Hokkien for ‘old auntie’.</p>	<p>板桥医院设立于 1928 年，专门收容和治疗精神病患。获知院方要求与阿成的家属面谈，阿珠便陪同母亲前去。那个让人谈之色变、闻之丧胆的医疗机构，就是大家俗称的‘疯人院’。</p> <p>母女俩搭巴士前往位于新加坡北部的杨厝港，下车后沿着一段很长的路，向医院走去。一路上阿珠紧握着母亲的手臂，彼此之间没说上几句话。两人其实深知对方承受着相同的恐惧，只是心照不宣。一踏入医院大楼，她们被指引到一间紧邻入口的诊室。</p> <p>和母女俩谈话的医生看起来五十开外，和蔼可亲。由于阿珠的母亲只会说福建话，医生竭尽所能以掺杂着英语的福建话与她们沟通。他称呼阿珠的母亲“阿姆”，那是福建话的“伯母”。</p>

Ah Um, your son has been diagnosed with a mental illness known as schizophrenia.

Har? What? she asks.

He replies, That's sch...never mind. Did you notice him being depressed? Did something happen that could make him depressed?

She shakes her head. I don't know.

He sighs. That's the problem, he says. Most people don't know until it's too late. Ah Um, your son had a mental breakdown. This illness is more common than we think, and tends to strike at a young age, often in the late teens or early twenties. What causes the illness – we don't really know. It could be genetic, it could be due to a traumatic event, or both.

Mother and daughter listen intently, trying to absorb the rational, scientific explanation being put forth to them regarding a condition that thus far could only be described as 'madness'.

The doctor's frown eases a little. The good news is, there's a good chance of recovery if the patient is treated early. The treatment we recommend for your son is electroconvulsive therapy. This is a medical procedure during which a brief electric current is passed through the brain. Don't worry, I assure you it is safe and it is not painful.

Mother sits up with terror shooting through her eyes. Being uneducated and illiterate, she had heard about and believed in the horror stories about such electric shock treatments. Also, she holds the belief – subscribed to by many Chinese at the time – that the best way to treat illness is through a 'medium' or *bomoh*.

No, doctor. I don't want my son to be treated here. Please let me take him home, she tells the doctor.

“阿姆，你儿子经诊断得了精神分裂症。”

“啊？什么？”她问。

医生回答：“是精神……呃……没关系。你有没有注意到儿子心情沮丧吗？有发生过什么让他情绪低落的事吗？”

她摇了摇头，表示不知道。

他叹了一口气，说道：“问题就在这里。多数人得知病情时已经太迟了。阿姆，你儿子精神崩溃了。这种精神病比我们所想象的还要常见，往往在年轻时发作，尤其在青少年晚期或二十岁出头的年龄段。我们不太清楚病因，可能是遗传，也可能是创伤所致，或两者都有。

母女俩全神贯注地聆听医生对阿成病情的说明，试着从其理性、科学的内容中，去理解这种到目前为止仅以“精神错乱”来形容的病。

医生稍稍松弛了紧蹙的眉头，继续说道：“好消息是，若病患及早接受治疗，康复率相当高。我们建议你让儿子接受电痉挛疗法。那是一种将短暂电流通过病人脑部的疗程。不用担心，保证安全，而且一点都不痛。”

霎时间，阿珠的母亲挺身坐直，眼神中透射着惶恐。她没受过教育、不识字，完全听信那些关于电击治疗的道听途说。当然，她也和当时的很多华人一样，相信若要治好任何病痛，就非找灵媒或巫医不可。

她告诉医生：“医生，不行。我不想让儿子在这里接受治疗，请让我带他回家。”

We cannot allow that, Ah Um. He is not well and has to undergo treatment here.

No. He is my son and I will not consent to the treatment!

They go back and forth in this manner for a long time, each having the best of intentions and each trying to persuade the other to their own point of view. A growing air of frustration begins to infuse the small room.

Ah Um, please listen to us. Your son will only get worse if you do not let him undergo treatment. As a doctor, I cannot allow my patient to go untreated when I know there is a treatment that is likely to help him!

No! This treatment will not help him. I will take him to other more powerful healers who can save him, even if I have to use all my savings. Please, I beg you, let me take him home!

At this, she goes down on her knees in front of the doctor.

Ah Um, please get up. Don't do this, please. We are just trying to help you and your son.

The doctor tries to help her up and tries to persuade her repeatedly. He looks at Chu, his eyes creased in a mixture of concern and vexation, hoping that the old woman can perhaps be talked around by her daughter.

Ma, don't be like this, listen to the doctor's advice, can? Chu holds onto her mother's arms, not knowing which side she agrees with. She knows that given her mother's stubbornness, it is nearly impossible to make her change her mind.

Ma!

It is no use. She refuses to budge. The doctor, left with no choice, lets out a heavy sigh. Chu's mother signs a letter to absolve the hospital of any responsibility should her

“阿姆，这样是不行的。他有病在身，必须在这里接受治疗。”

“不行！他是我儿子！我不会同意让他接受治疗！”

两人就这样一来一往，僵持了很久。他们各自都出于善意，也都想说服对方接受自己的观点。一股挥之不去的挫败感，正在小小的诊室里滋长、弥漫。

“阿姆请听我们说，你不让儿子接受治疗，只会使他的病情恶化。身为医生，在知道可通过有效疗法帮助到病人的情况下，我绝不允许病人未接受治疗就离开医院！”

“不！这种疗法是救不了他的！我会带他去找其他医术更高明的治疗师，就算花光我所有的积蓄我也愿意。求求你，让我带他回家吧！”

话音刚落，阿珠的母亲当下跪在医生面前。

“阿姆，请起身！请不要这样！我们只不过想帮助你和你的儿子。”

医生试着扶她起来，并继续不厌其烦地说服她。他望着阿珠，心里因交织着关切和顾虑而愁眉锁眼，像在暗示做女儿的尝试让母亲改变初衷。

“妈，别这样，听听医生的忠告好吗？”阿珠搀扶着母亲，一时进退两难。她心里明白，母亲一向固执如牛，要她改变心意简直难如登天。

妈！

没用的。她就是不肯让步。医生发出沉重的叹息，在别无选择下安排阿珠的母亲签署一份文件，声明自己“违反医嘱”（A.M.A. - Against Medical

son's condition deteriorate. A.M.A. – Against Medical Advice – Chu hears the doctors say. Then they take Seng home.

The following months see Seng, Chu, and their mother visiting one *bomoh* after another. The visits and rituals always take place at night – the darkness of nightfall creates a sense of fear and presence of supernatural powers.

First is a medium claiming to have the powers of a Thai god. The ritual takes place in a large semi-detached house on St. Michael's Road, in the hall filled with many idol statues. The medium takes a raw egg, rolls it over Seng's chest, then breaks the egg and shows them two rusty needles inside. Someone has used black magic on your son, he says, and I have removed this, as you can see from the rusty needles. Chu's mother is impressed and gladly parts with a few hundred dollars, a mighty sum in the 1960s.

[...]

When Seng does not get better, friends recommend them to a Malay *bomoh*, who cuts a lemon that turns black when rubbed on Seng. When Seng still does not get well, they go to a Chinese medium, who says that Seng's soul has been captured by seven different spirits. Chu has to go to seven different cemeteries to gather *lalang* (long weeds) from tombs, which is then tied into a figure of a person and placed under Seng's bed. She also has to collect so-called holy water from the medium each week for her brother to drink.

Many months later, and when they are a few thousand dollars poorer, the family's hopes grow dimmer. Much of the family's savings has been paid to the *bomohs*. And still, he is not better.

Seng's condition fluctuates. On some days, he seems almost normal and will read the newspapers or sit in a corner smoking. Then, the illness will surface again, and he will do

Advice), 以免除医院在儿子病情恶化情况下需承担的责任。之后, 她们就带阿成回家。

接下来几个月, 阿成、阿珠和他们的母亲相继造访了好几名巫医, 而每次都在夜间就医和进行相关仪式。夜幕低垂, 正是恐惧感油然而生、超自然能力从天而降的时刻。

第一位灵媒自称被赋予泰国神明的超能力。他在位于圣迈克路一间摆满神像的偌大半独立式洋房中, 为阿成进行仪式。灵媒用一颗生鸡蛋在阿成胸脯上来回搓揉后, 将它打破, 向他们出示蛋里两枚生锈的针。他说: “有人对你儿子施了黑魔法, 这两枚生锈的针证明我已将魔咒除去。”阿珠的母亲觉得那灵媒很了不起, 毫不吝惜地付了他好几百元。这数目在六十年代可说是相当可观。

[.....]

当阿成的病情并未因此而好转, 朋友推荐他们向一名马来族巫医求诊。这回, 在阿成身上搓揉后的柠檬由黄变黑, 却同样无效。随之, 他们所造访的一名华族灵媒认为阿成的魂魄遭七个不同的鬼魂所俘。他吩咐阿珠到七处不同墓地采集白茅, 将之捆成人的形状后放在阿成的床底下。此外, 阿珠每周还需向灵媒取“圣水”给阿成喝。

过了好几个月、花了好几千元后, 他们除了变得更穷, 希望也越发渺茫。家里大部分的积蓄都送入巫医的口袋, 而阿成的病情, 始终未见起色。

阿成的状况时好时坏。在某些日子, 他看起来和正常人没有两样, 会看看报章, 或坐在墙角吸烟。然而过不久, 症

strange things, talking or gesturing to himself or throwing things away. But he is never violent.

Chu is walking home from the Whampoa market one Sunday when she notices a few neighbours huddled together, nudging each other and whispering loudly.

That's Seng's sister. Poor thing, her brother has gone mad.

Hai yah, chee zhor seen!

Wonder why. Their parents must have done something bad in their lives.

Must be lor. Must be retribution. Anyway, be careful, don't let your children go near him. You never know what a mad man will do.

Sshhh! Not so loud! If she hears us, her mad brother may come at us with a parang!

Chu feels her legs move at a quickening pace, her breathing becoming heavy and constricted. The words are choking her. She starts to run.

Finally reaching home, she closes the door of her house and leans against it, trickles of sweat and tears fusing into her blouse. At last, she's home, safe. Or is she?

Her parents are quarrelling again; this time it is her father admonishing her mother. You see lah, you should have let Seng get treated at the hospital, see, Ah Di's son also had the same sickness, and now he's well after the hospital treatment, you see, you see, you ruined Seng!

Her mother starts to cry. How would I know? Everyone told me don't let him stay in that hospital, how can put electricity to the brain, wait the whole brain get burn how? Everyone says the *bomohs* are powerful, sure can cure

状又会再次浮现。他会有怪异的言行举止，如喃喃自语、比手画脚，或扔掉东西。不过，他不曾有过暴力行为。

某个星期天，阿珠从黄埔湿巴刹步行回家时，见到几个邻居聚在一起，你推我挤地，彼此大声地互传耳语。

“那个是阿成的妹妹。真可怜，她哥哥发疯了。”

“係啊，痴咗线！”

(广东话：是啊，精神有问题！)

“不知道为什么会这样。他们的父母这辈子八成是做了什么坏事。”

“那是肯定的啰。不就是报应吗？不管怎样，反正就是小心为妙，别让孩子接近他。谁知道疯子会做出什么事来？”

“嘘……别太大声！给她听到的话，搞不好她哥哥拿着巴冷刀来找我们算账！”

阿珠感觉到自己的步伐在不断加速，呼吸变得沉重而紧绷。耳边的冷言冷语让她近乎窒息。她头也不回地拔腿奔跑。

一到家，阿珠关上了家门，倚靠在门上。一滴滴汗水和泪水相互交融，渗透她的衬衫。总算到家了，平安到家了。但，她真的平安了吗？

她父母又在吵架了，这次轮到父亲向母亲兴师问罪。“你看啦，为什么不让他去医院接受治疗？看阿弟的儿子，不也是精神分裂，但接受医院治疗后病就好了！你看，你看，都怪你把阿成害惨了！”

阿珠的母亲哭诉：“我怎么知道会这样？大家都劝我别让他住那间医院，说什么电疗会烧坏整个脑袋！大家都说巫医很‘厉害’，一定能医好他。也许是

him, maybe we didn't follow the *bomohs'* instructions properly that's why cannot cure.

Her father gets agitated. Everyone, everyone, why you always listen to everyone? Is everyone going to help look after him now?

Chu thinks of her god-parents, the kind couple who had looked after her when she was a baby and who had adopted her as their god-daughter, and who, unlike her mother, did not listen to 'everyone' when they let their son get treated at Woodbridge; she thinks of their younger son, her god-brother, the 'Ah Di's son' that her father had just mentioned who also had schizophrenia but later recovered after treatment. She looks at Seng, sitting in a corner smoking his tobacco. All at once, it's like someone is pouring ladle upon ladle full of hot, burning substances into her stomach. A heap of fear. Then a generous dose of anger. And then a mixture of love, sympathy, and sadness. The concoction mingles and churns till she wants to throw up.

No, she has to run away. From the world's hostility. From the reality of his brother's illness. From the thick darkness that stares at her when she tries to fathom what the future will be like.

But there is nowhere to run to. She closes her eyes, her lips quivering, unable to extricate herself from the bitter rampage of emotional chaos. No. Her parents have done nothing wrong, nothing that deserves what the neighbours call retribution. And Seng is a good man, a good son and brother. Why did all this have to happen? Why did she, Seng, and her parents have to suffer like this? Just a few months ago, everything was fine. Her brother was a normal young man with a job, a girlfriend, and a bright future. She was a normal young girl who went to school every day and came home to a normal family. How did life change so drastically and irreversibly? What did their future hold for them now?

我们没有按照巫医的指示去做，才会医不好的。”

阿珠的父亲听了气上加气。“大家，大家，为什么大家的话那么有份量？请问大家现在又会不会帮忙照顾阿成呢？”

阿珠不禁想起她的干爹和干妈。他们自阿珠出世以来就负责照顾她，并收养她为干女儿。他们让儿子在板桥医院接受治疗，不像阿珠的母亲那样听信‘大家’的话。阿珠想起他们的小儿子，即她的干哥哥，也就是她父亲刚才称呼的“阿弟的儿子”。他同样患有精神分裂症，不过经治疗后痊愈了。反观阿成，却只能呆坐在一角吸烟。刹那间，阿珠腹中涌起一阵惶恐，像是有人倒入一勺又一勺滚烫的汤水。紧接着是怒火中烧，还有交织着慈爱、怜恤和伤感的矛盾心情。五味杂陈的思绪不断在搅动，让她隐隐作呕。

不行，她必须逃离。逃离世人充满敌意的目光。逃离她哥哥患精神病的残酷现实。逃离眼前预示黯淡未来的漆黑。

然而，阿珠却无处可逃。她闭上双眼，唇角微颤，无法摆脱咄咄逼人的混乱情绪。不！错不在她父母，根本不是邻居们所说的罪有应得。阿成是好人、孝子，又是好哥哥，为何遭此不幸？他们一家为什么必须承受这样的痛苦？几个月前，一切不都好好的吗？当时她哥哥有份工作、有个女朋友，是有着大好前途的‘正常青年’。阿珠一样是每天如常上下学、来自‘正常家庭’的‘正常女孩’。他们的一生，何以遭受如此不可逆转的剧变？往后的日子，是什么样的未来？

<p>Then she hears the familiar sound of her brother's voice filtering through the internal pandemonium.</p> <p><i>Chu! Chu!</i></p> <p>She opens her eyes. Her brother is looking at her with a gentle gaze, his eyes sad and anxious. This must be one of his good days, when he seems to be almost back to his normal self again. She can see that he senses something amiss; perhaps, or probably, he too has felt the sting of stigma and gossip on occasions when he went out of the house. Maybe that's why he stays home most of the time.</p> <p>And Chu realises that this is still her brother who has loved her all her life, now stuck with illness but still caring for her nonetheless. The world has turned its back on him, but the illness has not made Seng any less of a person capable of loving her, and the world has no business meddling with their dignity.</p> <p>She looks at her old, vexed father, and at her old, weeping mother, and it dawns on her with a mighty shudder that schizophrenia, with whatever in the world it encompasses, and the world, with whatever contempt for schizophrenia it encompasses, have fallen on her shoulders no less than on her brother's. Because if she doesn't take care of him, no one will.</p> <p>She closes her eyes once again, puts her face in the cup of her hands, and cries.</p>	<p>这时，在一片杂思乱绪中，传来了她哥哥熟悉的声音。</p> <p>阿珠！阿珠！</p> <p>阿珠睁开眼睛，看到哥哥以温柔又略带伤感和不安的目光凝视着她。今天想必是他表现得较为‘正常’的一天。她看得出哥哥觉察事有蹊跷；他很可能早已在偶尔外出时感受到‘人言可畏’的杀伤力。这也许就是哥哥经常足不出户的原因。</p> <p>阿珠意识到，哥哥一直以来对她的疼爱与呵护，并未因患病而有丝毫减少。尽管世界早已将他置于不顾，阿成的病未曾夺去他疼爱妹妹的能力。再说，这个冷酷世界根本没资格践踏他们的尊严。</p> <p>她望着气急败坏的老爸，又看着泣不成声的老妈，当下猛然醒悟。与精神分裂症相关的，与世人对精神分裂症的鄙视相关的，凡此种种，不偏不倚，都已落在她和她哥哥的肩上。试问除了阿珠之外，还有谁愿意照顾她哥哥呢？</p> <p>阿珠再次闭上眼睛，不由自主地掩面哭泣。</p>
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1.3 Chapter 6

Source Text	Target Text
<p>As a child, I would look at my uncle Seng – my Ah Gu – and wonder why he behaved in such a strange manner, caught up in his own illusory world.</p>	<p>我舅舅阿成，像是活在自我的虚幻世界里，他异乎寻常的举止，总让小时候的我感到好奇。</p>

He is sitting on the cement floor in the kitchen, by the window, where he usually sits to smoke his cigarettes or to read the newspapers. I think he must be thinking about something happy or funny, because I see him smiling. But I am sitting on the old sofa in the hall, and Mum and Ah Ma are also sitting on the sofa in the hall, so there is no one in the kitchen for him to smile at. Anyway, he is facing the window, so maybe he is smiling at an imaginary friend outside the window, the way I imagine I am *xiao long nü* – the heroine clad in flowing white raiment in my favourite Hong Kong period drama, *The Return of the Condor Heroes* – when I play by myself at home, because you can imagine anything you want when you are draped in your mother's long white tablecloths. So maybe you can also imagine anything you want when you are an adult sitting by your kitchen window.

Now he is also making actions with his hands, moving his wrists up and down, up and down, like fishing in a miniature pond. Mum is telling Ah Ma that she has to take him to the hospital and asking Ah Ma to take me home later. Mum calls out to him, Come, Seng, we have to go to the hospital, and he gets up and goes with her.

*

Our brain. That amazing, mysterious thinking thing, the one-of-its-kind organ that baffles scientists and philosophers alike, the curious thought-processor that strives to use its thought processes to understand its thought processes. Scientifically, our brain consists of:

-One hundred billion neurons, the brain cells which 'talk' to one another and to the rest of the body;

-Dendrites, the branched, tree-like structures through which neurons receive signals, and which put together

阿成倚在窗边，坐在厨房里的水泥地板上。他经常在这里吸烟或读报。他正咧着嘴笑，八成是想到开心或好笑的事。不过，我、妈和外婆都坐在客厅里的旧沙发上，厨房里根本没人让他对着笑。话又说回来，他面向窗口，说不定在对窗外的假想朋友笑，就像我儿时把自己假想为《神雕侠侣》的女主角那样。那是我最爱看的香港古装剧。我喜欢披上妈妈买的白色长桌布，乔装成身穿飘逸白袍的小龙女，在家里天马行空地自娱一番。也许，大人坐在厨房窗边时，也可以像我儿时那样，任由思绪飞舞。

此刻他正在反复地比手画脚，像在小池边垂钓一样。妈告知外婆她要带舅舅去医院，吩咐外婆迟些时候带我回家。妈随即喊道：“来，阿成，我们得去医院一趟。”舅舅马上应声跟去。

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大脑——那个既独一无二又耐人寻味、让科学家和哲学家费解的思维器官；那个好奇得非要绞尽脑汁去理解自己如何绞尽脑汁不可的‘思想处理器’。从科学角度分析，大脑有以下四个组成部分：

一、一千亿个称为‘神经元’的脑细胞，彼此互传信息，并将之传达到人体其他部位；

二、简称枝晶的树枝状晶体，即神经元接收信号的管道，将不同来源的信息拼凑在一起；

<p>information from a bunch of different sources;</p> <p>-Axons, the long, wire-like structures which carry electrical signals from neurons and trigger chemical signals to other neurons;</p> <p>-Synapses, the chemical connections between neurons, numbering up to several hundred thousand connections per neuron.</p> <p>Schizophrenia is not 'split personality' as is commonly thought. It is a mental illness that disrupts the thought processes of victims, resulting in strange behaviour, emotional confusion, or outbursts. Some hear voices or see things that do not exist; others are suspicious of those around them, at times to the point of paranoia.</p> <p>Every day, a child is born in Singapore who will suffer from schizophrenia. In many countries, about one in a hundred people suffers from schizophrenia. Approximately a third of them recover after treatment, while the other two thirds require medication all their lives. The illness can be controlled with medication. There are, of course, patients whose conditions are severe enough to warrant long-term institutionalisation. Those whose symptoms are milder though, are in fact almost as normal as anyone else, apart from periodic episodes of relapse. In many cases, the illness may affect some of their brain functions and cognitive ability, but they are still normal people.</p> <p>Given the complexity of the brain, the search for a precise explanation of schizophrenia has proven elusive. In most cases, schizophrenia is an end result of a complex interaction between thousands of genes and multiple environmental risk factors, none of which on their own causes schizophrenia. Schizophrenia is increasingly considered a neuro-developmental disorder of brain connectivity, of how the functional circuits involving billions of neurons and their trillions of synaptic connections in our brains are wired. It may be the uniquely</p>	<p>三、轴突，即从神经元携带电信号，并触发化学信号到其他神经元的细长线状结构；</p> <p>四、突触，即神经元之间的化学连接，数量多达每个神经元几十万个连接。</p> <p>精神分裂症并非一般认为的‘人格分裂’，而是一种破坏患者思维过程，导致怪异行为、情绪混乱或情感爆发的精神病。有些患者听到不存在的声音或看到不存在的东西，有的则疑神疑鬼，有时甚至达到偏执狂的程度。</p> <p>新加坡平均每天会有一人患上精神分裂症。不少国家在每一百人中就有一人患上精神分裂症。大约三分之一患者得以治愈，而三分之二则需终生服药，以控制病情。当然，其中也有病情严重的患者需长期入住精神病院。事实上，轻度症状患者除了周期性复发外，几乎无异于常人。在许多病例中，患者的脑功能和认知能力虽受病情影响，但他们仍是正常人。</p> <p>鉴于人脑的复杂性，精神分裂症的确切病因始终遍寻未获。在多数病例中，精神分裂症是数千个基因和多重环境危险因素发生相互作用的最终结果，而其中并无任何导致精神分裂症的单一因素。精神分裂症已逐渐被视为大脑连通性的神经发育障碍，关乎大脑中包含数十亿神经元和上万亿个突触连接的功能电路之布线过程。这可能就是我们作为拥有复杂大脑的人类需付出的独特代价。遗</p>
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human price we pay as a species for the complexity of our brains; often by genetic or environmental chance, some of us get wired for psychosis.

Nevertheless, significant advances in understanding schizophrenia have been made since the mid-20th century. A study of 2.6 million children born in Sweden between 1973 and 2001 has found that children born to older fathers have a higher risk of developing mental illnesses. According to this research, the most comprehensive study to date of paternal age and offspring mental health, those born to men age 45 and older had about twice the risk of developing psychosis, the signature symptom of schizophrenia, compared with the children of young fathers aged 20 to 24. Studies by researchers at Columbia University have shown that more than 30 percent of the risk of developing schizophrenia comes from prenatal exposure to the flu virus, and young adults who had been exposed to German measles while they were less than three-month-old foetuses had five times greater the risk of developing psychosis than their peers who had not been exposed to the virus; though it is not the infection itself, but rather the reaction of the mother's immune system to the infection that affects the developing brain.

Research seems to point towards a loss of grip on reality in the phenomenology of schizophrenia, an inability to see things and people in context, a slavish following of the internal logic of the situation, a building up of the whole from the parts (virtual reality), and a hyperconsciousness that can lead to even the self being reconstructed, giving rise to a withdrawal from the external (real) world and a turning of attention inward towards a realm of fantasy. This seems to be associated with an abnormally overactive left hemisphere compared to the right in people with schizophrenia. The left hemisphere – sometimes called the 'interpreter' which is largely responsible for speech, mathematics, and other forms of

传或环境的偶然因素，往往足以引发精神病。

尽管如此，自二十世纪中叶以来对精神分裂症的研究，已取得了显著进展。一项针对 2600 万名 1973 至 2001 年出生于瑞典的儿童进行的研究显示，较年长父亲的孩子患精神病的风险较高。相较于 20 至 24 岁年轻父亲的孩子，45 岁以上父亲的孩子患精神病的风险翻倍。这项关于父龄及后代精神健康的研究是目前最全面的。另外，哥伦比亚大学研究人员发现，超过百分之三十患精神分裂症的风险来自产前暴露于流感病毒；而相较于在母腹中不曾暴露于德国麻疹的青壮年，未满三个月的胎儿暴露于德国麻疹，在青壮年时患精神病的风险高出五倍。足见，母体免疫系统对病毒感染的反应，而非病毒感染本身，才是影响大脑发育的关键。

分析精神分裂症现象的研究，似乎指向下列特性：与现实脱节、无法从特定语境中看待事物、盲从情况的内部逻辑、管中窥豹，以及因知觉过敏而重塑自我，以致从外在现实世界退离到内在幻想境界。这可能是患者左脑异常活跃所致。左脑俗称‘译员’，主要负责言语、数学和其他逻辑问题求解程序。当遇不合情理之事，其客观有序、高度集中的逻辑思维方式，往往会自创似是而非的解释，甚至自圆其说，根据事情的内在逻辑阐释和构建一个与客观现实不对应的版本。反观又称‘废话探测器’的右脑，虽被流行文学冠以‘艺术脑’的美称，却实事求是、脚踏实地。相较

logical problem solving – views things in a detached, highly focused way, and seems to have an intense need for logic and order; so intense that if something doesn't make sense, it usually responds by inventing some plausible explanation, confabulating details if necessary, 'interpreting' and building up a version of reality according to its internal logic that may not correspond to actual reality. The right hemisphere – sometimes called the 'bull-shit detector' – although portrayed in popular literature as the 'creative' side of the brain, is also more truthful, contextual, and grounded in reality. It is the mediator of social behaviour and visual-spatial perception; while the left hemisphere tends to analyse by breaking things down, the right hemisphere sees things in context, holistically. From this perspective, it seems clear why an overactive left hemisphere leads to a loss of grip on reality.

Research in schizophrenia, using neurophysiological testing, as well as Electroencephalography (EEG) and other measures, demonstrates a failure of inter-hemispheric inhibition. Incompetence of the corpus callosum, the main band of neural tissue that connects the two hemispheres at their base, has been implicated in the psychosis of schizophrenia, and a key function of the corpus callosum seems to be to allow one hemisphere to inhibit the other. In other words, in schizophrenia, the ability of the right hemisphere to inhibit the left hemisphere is compromised.

Despite the progress in brain research in recent decades and the insights that such research offers, the stigma carried by schizophrenia and other mental disorders remain as deep-seated as ever. The editor of the premier scientific journal, Nature, once commented that "schizophrenia is arguably the worst disease to afflict mankind, even Aids not excepted".

How difficult it must have been for my uncle, and how difficult it must still be for others

于左脑以分解方式分析事物，右脑以语境为切入点，看事全面，调解社会行为和视觉空间感知能力之间的关系。左脑过度活跃使人脱离现实的原因，由此清晰可见。

再者，通过神经生理学测试及脑电图(EEG)进行的研究显示，精神分裂症患者大脑两半球间的抑制功能失常。在底部连接两半球的主要神经组织——胼胝体，本应具备抑制功能，然而在精神分裂症患者中却无法正常运作。换言之，患者的右脑，无法抑制其较之活跃的左脑。

尽管人脑研究在近几十年来颇有进展与见地，精神分裂症及其他精神病所背负的耻辱依然根深蒂固。最具权威《自然》科学期刊的主编曾表示，精神分裂症称得上是给人类带来最大痛苦的疾病，甚至胜于爱滋病。

可想而知，舅舅和其他像他一样的患者所承受的是何等煎熬。若不是妈扛起了

<i>like him. And what would have happened to my uncle, had my mum not taken up the arduous task of taking care of him?</i>	照顾舅舅的艰巨任务，他的一生会是什么光景？
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1.4 Chapter 19

Source Text	Target Text
<p>Mum is telling me about the new Woodbridge Hospital, the new Institute of Mental Health or IMH it's called, as we have dinner. It's just me and Mum; Dad has gone out and Chae has gone to England, to the University of Oxford, on a scholarship.</p> <p>Ah Gu was discharged from IMH just a few days ago, after spending a week there. Mum says it's much bigger and brighter than the old Woodbridge Hospital, with better facilities and more pleasant surroundings. So much better than the cage-like atmosphere of Woodbridge, she says.</p> <p>I tell Mum about the temporary job I just started on at the marketing company. I'm waiting for my 'A' level results and everyone waiting for their 'A' level results gets a temporary job. Quite <i>senang</i> lah, I tell Mum. Just do data entry and other brainless stuff, at five o'clock can go home.</p> <p>The phone rings and Mum goes to pick it up.</p> <p>Hello? she says. Yes, yes, I'm his sister.</p> <p>Her face starts to turn pale. What? Is he okay or not? Uh-huh, uh-huh, okay, how did it happen? How bad are his injuries? Uh-huh, uh-huh, okay okay, I'll be right there.</p> <p>She is almost panting as she tells me, Ah Gu had an accident. We got to go to Toa Payoh Hospital. Hurry up!</p> <p>We leave our food on the table, get changed in a daze and hurry towards the road to catch a taxi to Toa Payoh Hospital.</p>	<p>吃晚饭时，妈跟我谈起刚落成的一间‘新板桥医院’——心理卫生学院。爸出门去了，姐获颁奖学金已负笈英国深造，现在家里只剩我们母女俩。</p> <p>舅舅在心理卫生学院住了一周，几天前出院。妈说那儿设备更齐全、环境更清幽，比旧的板桥医院敞亮很多，不会让人有置身“牢笼”之感。</p> <p>我告知妈我刚加入一间营销公司担任临时员工。我正等着高级水准会考成绩放榜，和其他也在等成绩的人一样，迫不及待地找了份临时工。我跟妈说，临时工很轻松的，只需输入数据、做些不必动脑的杂务，下午五点钟就可以下班。</p> <p>这时传来电话铃声，妈马上接听。</p> <p>“喂？是的，我是他妹妹。”</p> <p>妈顿时脸色苍白。“什么？他没事吧？嗯嗯，事情怎么发生？他的伤势怎样？嗯嗯，好的，我马上去医院。”</p> <p>妈边喘气边说：“你舅舅出事了。我们得尽快赶去大巴窑医院！”</p> <p>我们把食物搁在饭桌上，迷迷糊糊地换好衣服，匆忙地跑到大路口召德士前往大巴窑医院。</p>

The doctor tells us that a car hit Ah Gu. Not to worry, he says. His injuries don't seem too bad. Cuts and bruises, surface injuries. Nothing serious.

A police officer comes up to us, holding Ah Gu's brown rubber slippers and black wallet in a transparent plastic bag, the kind that looks like ziplock, which the police use to keep items as evidence. He says that someone who witnessed the accident called the police. Apparently, the car tried to beat the red light, hitting Ah Gu as he stepped off the pavement at the traffic light junction along Toa Payoh Lorong 1. The police officer hands Mum the slippers and wallet in the bag. One of the slippers is so badly run over it's become as flat as a flipper. Here you go, he says. These belong to your brother. One slipper was lying a few metres from him, the other flew all the way across the road divider to the other side of the road. Anyway, good to hear from the doctor that his injuries are not serious.

Mum thanks the police officer and holds on to the slippers as we go to the ward to see Ah Gu. His eyes are closed, he is breathing heavily, there are some tubes attached to him and the doctor was right, scrapes and cuts and bruises of all shapes and sizes, some raw red and some blue-black, are all over him.

Mum sits on the chair beside him. Seng, she says softly, still clutching his slippers.

He opens his eyes drowsily, his head turning slowly towards her voice. He looks at her. For a long while he just looks, his chest heaving up and down. And then, a tear rolls down onto the pillow. He opens his mouth, like he wants to say something and I wonder what he wants to say, maybe tell Mum what happened or ask her what happened, or tell her that the wounds hurt or ask her for a glass of water, or maybe a glass of milk?

Chu, why didn't they let me die?

医生说舅舅被车撞了。“不过别担心，他的伤势并不重，都是皮外伤。”

一名警员向我们走来，说是意外目击者报的警。他手里拿着塑料袋，里头装着舅舅的褐色橡皮拖鞋和黑色皮夹。警方使用这种看似自封袋的塑料袋来储存物证。警员说，舅舅在大巴窑一巷红绿灯路口过马路时，被一辆闯红灯的汽车撞个正着。警员把塑料袋交给妈。其中一只被汽车碾过的拖鞋，压得扁如潜水用的鳍状肢。警员说：“这些东西是你哥哥的。一只拖鞋在他躺着的几米以外被发现，另一只则飞过道路分隔栏，到了对面去；所幸医生证实他的伤势并不严重。”

妈向警员道谢，手拿着舅舅的拖鞋，和我一同到病房去看舅舅。他双眼紧闭，呼吸沉重，身上插了管。如医生所说，舅舅满身是大大小小、要么鲜红，要么青一块紫一块的刮痕和瘀伤。

妈坐在舅舅床边的椅子上，手里仍拿着他的拖鞋，轻声唤道：“阿成。”

舅舅睁开惺忪睡眼，循声望去。他目不转睛地看着妈，继续深深地吸气呼气。接着，只见舅舅眼角的一滴泪落在枕上。他张嘴想要说话。我在旁揣测，他是不是想问妈或告诉妈事发经过，还是跟妈说他的伤口疼，又或是向她要杯水或牛奶？

“阿珠，他们为什么不让我死？”

And that's all he wants to say, as he closes his eyes again. Now Mum closes her eyes and drops of water drip from her face onto the plastic bag in her hands, the plastic bag with his slippers in it. As his chest heaves, so too does her body as she tries to withhold the sound of her crying. I start to cry too, as I wonder what's the meaning of it all, what's the purpose of a life like Ah Gu's. I don't know, I really don't know, why there's schizophrenia, if there's a reason at all, and why Mum has to walk alongside him for 30 years. Is there a reason at all in all of this? Why do those six words of his, nothing more than a string of syllables, fly like knives into my heart, into Mum's heart?

Mum wipes her tears with her hands, dries them on her pants, then puts her hand on Ah Gu's forehead. He doesn't open his eyes. She strokes his grey hair like she used to stroke my hair when I was little. As I watch the two of them, I wonder at how intertwined their lives have been, and yet, how lonely each of them must have felt. It's as if they're connected in a place deep within, and it's so deep that the connection between them can only be ethereal; but what's this connection, is it the brother-sister bond? Is it the human bond of suffering? Is it the bond of helplessness at what life throws at you? And yet, ethereal as it may be, is it not this connection that has made all the difference in his life, for what would his life have been without it, however difficult it has been even with it?

Mum suddenly says to me, Is it just me, or do you think his stomach seems to be growing bigger? When we first saw him it looked slightly bloated, but now, it's like it's swelling up even more.

I dunno, I can't really tell, I say.

She touches his stomach – he doesn't open his eyes, in fact it seems like he's fallen asleep. She presses the button to call for help. When a nurse comes, she tells her about the

舅舅一说完又合上双眼。原来他要说的就这一句话。妈也合上双眼，泪水簌簌落在她还拿在手里、装着拖鞋的塑料袋。她按捺着哭声，也像舅舅那样一起一伏地喘气。我想着这百思不解的一切，想着舅舅活着的意义，也不禁哭了。我不知道，也实在想不通，为何有精神分裂症这样的疾病，而妈又为何必须陪他如此走过三十年？这一切究竟有何道理？舅舅那句漫不经心的话，为何对我和妈而言却如万箭穿心一般痛？

妈用手拭泪并在裤子上擦干手后，摸了摸舅舅的额头。舅舅没有睁开眼睛。妈轻抚他灰白的头发，就如她在我儿时轻抚我头发一样。看着他们俩，我不禁感叹，尽管他们的生命交织在一起，但各自却活在何等孤独的世界里。他们仿佛在心灵深处相互联系，然而其深不可测也意味着相互间只能保持一种虚无缥缈、似有还无的关系。使他们彼此相连的，是兄妹之情，是患难之情，还是在造化弄人之下的同病相怜之情？虽然扑朔迷离，尽管走来不易，恰恰是这样的关系改变了舅舅的一生，使他不至于前路堪虞。

妈突然对我说：“我有没有看错，你觉不觉得你舅舅的肚子越来越大？第一次探望他时，他肚子有些微肿胀，不过现在看起来更大了。”

我答道：“不知道。真的看不出来。”

妈摸了摸舅舅的肚子。他双眼仍然闭着，看来已经睡着了。妈按动按钮呼叫护士，告知她舅舅肚子肿胀的事。护士

<p>stomach bloating up. The nurse looks at his stomach and says, I'll call the doctor.</p>	<p>见状说道：“好的，让我通知医生。”</p>
<p>When the doctor gets here, he checks Ah Gu, then tells us it shouldn't be anything serious.</p>	<p>医生来到病房为舅舅做了检查，表示他的肚子没什么大碍。</p>
<p>It is almost 11 p.m. so Mum and I make our way home.</p>	<p>眼看就快十一点钟了，我们母女俩便动身回家。</p>
<p>In the middle of the night the phone rings again. I hear Mum going, What? And my heart jumps so I walk groggily to her room. Dad is up too.</p>	<p>半夜时分，又响起电话铃声。妈喊了一声“什么”把我吓醒，我一摇一摆地走到她睡房。爸也起床了。</p>
<p>Mum is saying on the phone, How come it wasn't detected before? We were told his injuries were superficial!</p>	<p>妈在电话上质问对方：“为什么之前没有检测到？医生不是说皮外伤吗？”</p>
<p>She listens to whatever it is that whoever it is has to say, and then replies, Okay, I'll come down. Then she puts down the phone.</p>	<p>她听着电话那头的某某人说完他该说的话，回了一句“好的，我马上来”，便挂断电话。</p>
<p>His bladder was punctured, she says.</p>	<p>“阿成的膀胱戳穿了。”妈说道。</p>
<p>Dad say, <i>Alamak</i>, why like that?</p>	<p>爸喊道：“天啊！怎么会这样？”</p>
<p>Then how? Is his life in danger? I ask.</p>	<p>我忙问道：“那怎么办？有没有生命危险？”</p>
<p>They're going to do an emergency surgery, Mum says. And that doctor insisted nothing was wrong, when I told them his stomach was swelling up!</p>	<p>妈回答：“医院会为他动紧急手术。我刚才通知他们阿成的肚子肿胀，那名医生还一口咬定他没事！”</p>
<p>Was it internal bleeding? I ask.</p>	<p>“是内出血吗？”我问道。</p>
<p>Mm, internal bleeding, because his bladder was punctured. I got to go down again.</p>	<p>“是的，因为他的膀胱戳穿了。我必须再去一趟医院。”</p>
<p>Dad and I go back to bed. Mum gets dressed and goes again to the hospital.</p>	<p>爸和我回房睡觉，而妈换好衣服后，便独自前往医院。</p>
<p>The surgery goes well. They manage to stop the internal bleeding. Ah Gu starts to recover.</p>	<p>医生成功地为舅舅止血，顺利完成了手术。</p>
<p>And then, MRSA strikes.</p>	<p>就在舅舅康复的当儿，却受到耐甲氧西林金黄色葡萄球菌（MRSA）的感染。</p>
<p>The doctors tell us that MRSA is a bacterial infection highly resistant to some antibiotics.</p>	<p>医生说由于这种细菌感染对一些抗生素具有高抗性，因此必须让舅舅服用药性</p>

They say they have to give Ah Gu very strong antibiotics and the dosage keeps increasing until finally, a very potent dose is given by intravenous drip.

Mum visits him every day or every other day, bringing his favourite *kopi-o*. She says that each time he drinks the coffee however, he throws up and there are traces of dried blood in the vomit. But the doctors insist that nothing is wrong although he cannot be discharged as his bladder is still not functioning well.

One day, I go with Mum to visit him. As we enter the ward, a nurse complains to Mum that Ah Gu's bed is always wet.

She says, I think your brother has been pulling out the needles for the drip. Each time we find his bed all wet and the needles on the bed. Naughty lah!

Oh, he's been doing that? So now I know why he can't get well! So sorry, sister. I will scold him.

I think she's angry. Her face tightens and her breathing is heavier. She strides to his bed, bangs the *kopi-o* onto the side table and raises her voice at him.

What's wrong with you! Why you pull out the needles? No wonder you cannot get well! Six weeks! Six weeks already, you know! Here we are trying so hard to get you well and there you are pulling out the needles!

In a loud voice, he retorts, It makes me want to throw up lah!

The nurses are stealing smiles at the amusing sight of a woman in her forties scolding her older brother like a mother scolds her child and the brother, with a mat of grey hair, trying to defend himself in such earnest, child-like simplicity.

Mum is about to continue, her mouth open wide where the angry words are ready to

强的抗生素，并且逐步增加剂量，直到最后通过静脉滴注给予最强一剂。

妈每天或每隔一天为舅舅买来他最爱的‘咖啡乌’。不过，妈说他每次喝咖啡总会呕吐，而吐沫带有血丝，对此医生却坚称并无大碍。尽管如此，舅舅因膀胱失常，仍需留院。

一日，我和妈一同去探望舅舅。我们一到病房，护士马上向妈抱怨舅舅总是把床弄湿。

她说：“你哥哥真不听话，把滴注注射针强拉出来！我们经常在他湿透的床上发现注射针。”

“哦，有这回事？我终于明白他为什么迟迟不康复！对不起，护士小姐，我会训他一顿的！”

从妈紧绷的脸和越发沉重的呼吸，看得出她很生气。她大步走到舅舅床前，将买来的咖啡乌使劲地放在茶几上，对舅舅喝问。

“你这人怎么回事？为什么把针拉出来？难怪你好不起来！六个星期了！足足六个星期了，你知道吗？我们在这头想方设法让你痊愈，你却在那头把注射针拉掉！”

舅舅马上厉声反驳：“谁叫这东西弄得我想吐！”

四十多岁的妹妹，以妈妈教训孩子的口吻责备她哥哥；头发灰白的哥哥，则以赤子般诚恳单纯的性情为自己抗辩。眼前这滑稽的一幕，惹得护士们都在旁偷笑。

正当气话要继续脱口而出时，妈欲言又止。她思忖片刻，告诉护士说：“我哥

tumble out. Then she stops. She thinks for a while and tells the nurse, It's true he keeps throwing up and the doctors cannot explain it. Maybe, I don't know, but maybe, the antibiotics are really making him sick?

Later Mum speaks to the surgeon, since the ward doctors have repeatedly dismissed this possibility. True enough, the day the antibiotics are taken off, Ah Gu's bladder starts to work and he doesn't throw up anymore.

一直在呕吐，医生又一直找不出病因，我在猜想，你说有没有可能，真的是那些抗生素使他惹出病来？”

妈见病房的医生们一再排除她提出的可能性，不得不找外科医生谈。果然不出妈所料，舅舅一停止服用抗生素，膀胱便恢复正常，他就不再呕吐了。

Chapter 2 Commentary

2.1 Introduction

The Sound of Sch: A Mental Breakdown, A Life Journey first caught my eye with its unusual title. While it was not too difficult to infer from the title of the book that ‘sch’ was an abbreviation of ‘schizophrenia’, I was intrigued by the author’s reference to the sound of its first syllable, which immediately got me thinking about how ‘sch’ should be pronounced and how it would relate to the plot, be it explicitly or subtly.

Written by Danielle Lim, a curator and educator who has penned over a hundred short stories featured at the MOE Heritage Centre, *The Sound of Sch* is a true story of her uncle’s struggle with schizophrenia and her mother’s painful journey as both his and their mother’s caregiver. As a supporter of local literature, fiction and non-fiction alike, I find myself instantly drawn to Danielle’s compelling account of sacrifice and human resiliency in the face of brokenness and uncertainty. Particularly, as spelled out aptly by its title, the story offers an interesting combination and orchestration of serious terminology, intense emotionality, complex interpersonal relationships and localised linguistics, all of which lend the word *sch* its intricate sound and meandering plot. In 165 pages, the author takes us through an array of separate yet interlinked themes such as the futility of life for someone diagnosed with schizophrenia, the painful dilemma between escaping and embracing the responsibilities of a schizophrenic’s caregiver, and the guilt of not having done enough for your loved ones even while struggling to cope. This is unlike many of the non-fiction that I have read, which tend to be more objective and rational, even impersonal and stoical at times when touching on topics such as mental illness and human suffering.

With the above in mind, the primary focus of my capstone paper is therefore the challenges of translating content and terminology involving a complex mental and social disease such as schizophrenia, one of which is bringing into effect the social functions of translation in mental health literature. Secondly, I will also explore and analyse strategies involved in the translation of Singlish and dialects used extensively in local literature.

2.2 Objectives & Literature Review

2.2.1 Social Awareness about Mental Illness: Translation as a Tool

Mental illness has been a ‘taboo’ topic receiving much concern and attention, yet not openly and readily discussed. While we do not actively engage in dialogue with mental health professionals unless we are ‘directly involved parties’, we do come across both biographical and fictional accounts of the mentally ill in books, documentaries and movies. Increasingly, we also have easy access to social media, an open platform where sensitive or controversial topics are being shared and discussed in either the first or the third person, in the course of which public awareness about mental illness is created and enhanced.

Such is the power of social media, of literature and of story-telling. In a bid to raise awareness and reduce stigma, Chinese photographer Liu Yuyang captures six families struggling with mental illness, which is “often ignored by society” and “kind of invisible in our lives.” The same online article sheds light on findings cited by National Public Radio that 158 out of 173 million people living with some sort of diagnosable mental disorder have never received treatment (Castillo, 2015). In *Lianhe Zaobao*, the writer of “The Journey of the Mentally Ill” metaphorically describes mental illness and the stigma that comes with it as “scourge”, “leprosy” and “venereal disease”, shunned and despised by all (Nian Bin, 2016). Faced with public discrimination, Ruby Wax (2012) poses a thought-provoking question in her TED talk that points to the need for raising social awareness about mental illness. “How come every other organ in your body can get sick and you get sympathy, except the brain?” Another TED talk presenter shares that “even with all that — excellent treatment, wonderful family and friends, supportive work environment — I did not make my illness public until relatively late in life, and that's because the stigma against mental illness is so powerful that I didn't feel safe with people knowing.” (Elyn Saks, 2012)

A positive cycle of change ensues. More openness in sharing mental health concerns sheds more light on the extent of the damage that social stigmatisation and discrimination have on the mentally ill and their loved ones, and this increase in public awareness in turn catalyses the process of engaging in meaningful dialogue that would culminate in a collective and concerted effort towards changing attitudes and mindsets. Yet in another TED talk, Thu-Huong Ha (2013) quotes journalist Andrew Solomon that because self-inflicted stigma that equates mental illness with personal weakness or failure hinders people from sharing their own mental health problems, banishing the stigma attached to mental health issues can go a long way to facilitating genuinely useful conversations. She goes on to impress upon her audience that self-

advocacy can be very powerful as it reaches people who are going through similar experiences as well as the general public who do not hear enough of first-hand ordeals by the mentally afflicted.

It suffices to say that the power of the media, once unleashed, reaches out far and wide to a bigger audience, possibly even to regions where ‘taboo’ issues find no dwelling place. In the same way, translation of these topics for the benefit of another group of audience is instrumental in heightening social awareness and promoting understanding of the human condition. As depicted in *The Sound of Sch* itself, the author’s maternal grandmother represents the older generation of Chinese people who have been entrenched in the belief that mental illness is the result of being possessed by evil spirits and is only curable through exorcism. Then, there are the gossipy neighbours who are quick to conclude that the parents of the mentally ill must have “done something bad in their lives” to have caused retribution to befall their offspring. The unspoken yet strong stigma of mental illness in the Chinese world would probably take decades or generations to uproot, but the positive influence of the western media could play its role in raising awareness with the help of translation. From a functionalist perspective, as posited by Vermeer in his skopos theory, translation as a tool in various forms of media is an action that serves an aim or purpose, leading to a *translatum* which is determined by its skopos (Venuti ed., 2000: 221). In the case of *The Sound of Sch*, its translation to the Chinese language would serve to “make visible” to the Chinese-speaking target audience struggles of a Singaporean family faced with mental illness, raising public awareness about mental illness and reducing its social stigma.

2.2.2 Schizophrenia: Self-Advocacy from Other True Stories

This being a capstone paper, literature review on schizophrenia (i.e. the mental illness in focus) would mainly revolve around biographical or autobiographical accounts of the long and winding road journeyed by the schizophrenic and his caregivers.

Further to what has been mentioned in 2.2.1, self-advocacy not only opens the door to greater public awareness but also acts as a catharsis for the ‘advocate’, his caregivers and all others who are in the same boat. In search of his own dignity and that of others as psychotic patients, Peter Chadwick (1997) shares in his book that “working from within the person’s worldview, as many psychological professionals now do, is an acknowledgement of the vitality of that personal truth. The more we know of the frame of reference of a person’s behaviour the less

‘crazy’ does it seem. It is only by listening to and telling the story from within that one can really come to Know – with a capital K. The outside perspective necessarily partakes of norms, standards and categories against which to assess and evaluate people, and the uniqueness, intensity and the true meaning of what they are doing or trying to do with their lives is largely ignored.” He stresses the need to look for answers from ‘within’ the mentally ill per se, because “behavioural and social criteria of ‘strangeness’ are not always informative”.

In another book, *Henry’s Demons: Living with Schizophrenia, A Father and Son’s Story*, Henry opens our eyes to the inner thoughts of a schizophrenic, down to the minute details. About being diagnosed with schizophrenia, he writes that “I just see the world differently from other people, and maybe if psychiatrists understood this, I would not have been in the hospital.” He describes vividly how he hears a voice in his head speaking to him in rhyme, telling him to run away from where he is incarcerated: “It told me to remove my clothes and go into the forest, and when I did so, the forest would come alive and speak to me. The tree roots would move at the touch of my finger, and I would see images in my mind as if I were watching television.” (Cockburn, 2011: 217-218). He recognises the existence of his illness and finds ways to combat it. He sums up his journey on a hopeful note: “It has been a very long road for me, but I think I’m entering the final straight. There is a tree I sit under in the garden which speaks to me and gives me hope.” (Cockburn, 2011: 221) Henry’s father Patrick, through writing about his struggles as his son’s caregiver, gains valuable insights about schizophrenia: “I have learned a lot about schizophrenia...and I am no longer as ignorant and frightened of it as I once was. Even at his most insane, Henry never entirely lost his grip on reality, so I no longer think of people going on a one-way journey from complete sanity to total madness.” (Cockburn, 2011: 214) Patrick learns to embrace his son’s condition as being “difficult to eliminate but can perhaps be confined to a corner of Henry’s mind and will no longer be the driving force in his personality and his actions that it once was.” (Cockburn, 2011: 215)

Yet another writer Sarah Rae, whose brother Pat is diagnosed with schizophrenia, finds strength in facing the giants as a family and in being forthcoming about the illness. “As a family, we own schizophrenia. We bust stigma, avoid falling into stereotypical thinking, and remain hopeful. We are brave in the face of flare-ups. When talking about Pat, we use the term ‘schizophrenic’ rather than a broader term like “mentally ill”. It is important to us that people know the illness. Obscuring his diagnosis leads people to believe that schizophrenia is too rare to affect anyone they know.” (Rae, 2013: 187)

2.3 Methodology

After establishing the objectives of this paper and identifying focal points of interest, I began to embark on translating the source text. Having a total of 22 mostly lengthy chapters, selecting from *The Sound of Sch* those that would best reflect my chosen focal points has proven to be a challenging task, made tougher by the imposed word limit.

To capture as much as possible the complexities of schizophrenia reflected through various intertwined themes, and to minimise incoherence of the selected chapters, I have picked the following 4 chapters for translation. Chapter 1 depicts the post-accident scene where the author's uncle Seng lies on the tarmac after being hit by a car. Chapter 19 is its continuation where the scene is shifted to the author's house, where her mother Chu receives a call from the hospital about Seng being injured and warded. Chapter 4 tells of how Chu and her mother (the author's grandma) go about seeking remedies for Seng from *bomohs* to *bomohs* after the doctor at Woodbridge informs them about Seng's diagnosis of schizophrenia. By casting the spotlight on the older generation's refusal to give consent to using western modern therapy for mental patients and on the negative stereotypes of schizophrenia, this chapter sheds light on the social stigma of mental illness. Fourthly and lastly comes Chapter 6, an etiological summary of schizophrenia that is comprehensive yet reader-friendly, especially for laypersons who are unfamiliar with the what's and what not's about schizophrenia.

In the next section, I will be providing a detailed analysis of the strategies and theories involved in my translation of the selected text. In addition to the primary and secondary foci mentioned in the introductory chapter of this paper, a separate section will be set aside for a comparative analysis between my translation and another done by a Taiwanese translator. I learnt from the publisher of *The Sound of Sch* when I sought the approval to translate portions of the book that its inaugural translation by a Taiwanese writer had been published for circulation in Taiwan not too long ago. While I was aware that an untranslated source text would be preferred for this paper, my keenness to come up with my personal Chinese rendition of *The Sound of Sch* proved too strong to resist. After much consultation and deliberation, I decided to stick to my original intent by first translating the source text strictly without prior reference to the published translation, followed by doing a comparative analysis between the two versions of translation, from which differing perspectives and strategies may be drawn. The sheer fact that one is a Singaporean and the other a Taiwanese lends to the likely disparity between the two of us in

terms of the perception of equivalence and the choice of words for the target text, allowing each to draw on the other's strong points in making up one's deficiencies.

2.4 Analysis

2.4.1 Complexities of Schizophrenia: Managing Text Types, *Skopos*, Coherence and Fidelity

Every translating endeavour entails repeated deliberations and fine-tuning, in which the translator oscillates between learned theories or strategies and subjective preferences shaped and influenced by culture and experience.

Being one who is inclined to taking a balanced approach to translation and who does not adhere to any one theory, I have embarked on the task at hand exploring how best to achieve an equilibrium between being faithful to the source text and knowing the function of the target text, eventually fulfilling its purpose for the target text readers. I am inclined to adopting the functionalist perspectives held by Reiss's Text Type (1971/89) and Vermeer's Skopos Theory (1989/2000), though I beg to differ with some of the underlying principles.

Reiss's Text Type Model categorises 'informative', 'expressive', 'operative' and 'audio-medial' text types separately. While Chapters 1, 4 and 19 of *The Sound of Sch* belong to the 'expressive text type', largely using the aesthetic dimension of language, the bulk of Chapter 6 belongs to the 'informative text type', where etiological facts are being plainly communicated and where the language dimension is logical and referential. Adopting this categorical approach in the 'decision-making' process of translation does help to ensure congruence between the source and target texts in terms of style of language and choice of words.

For instance, the lyrical prose that is presented in Chapter 1 is essentially 'expressive' and retrospective in nature, hence calling for its target text to be aesthetic and artistic, even decorated with stylistic niceties whenever appropriate. Also, given its minimal dialogue (in fact just one to be exact: "Are you okay?") which makes for less colloquialism, I have deliberately adopted a more literary style of writing for this chapter to enhance its emotivity, thereby eliciting the readers' empathy for the protagonist and raising their awareness about the thought processes of a schizophrenic. For example, italicised phrases in the following sentences “他破旧的褐色拖鞋刚刚还在空中飞舞，如今已不知去向”，“那种痛楚如同只闻其声、不见其

人的呐喊”，“他依稀记得自己也和拖鞋一样”，“他当时正走在日复一日走着的路，也在等候日复一日等着的绿人”，“使他动弹不得”，“却见空无一物”，“人声消散”，“是否可能恰如其反” and “听似学术讨论的窃窃私语”，are just some of the many attempts to poeticise and beautify the target text. I have even used a homophonic pun to translate “other sounds” as “芸芸众‘声’” in the closing paragraph. In seeking to adhere to ‘specific translation methods according to text type’ as suggested by Reiss (1976: 20), I have ensured the accuracy of the source text by translating “sometimes, another sound comes along, mirroring the first, moving in tandem, nudging the first along” as “有时候会出现另一把声音，与之并排、对应，同时轻推着第一把声音”，capturing its lyrical essence in both meaning and style.

As more dialogue appears in Chapter 4, where most of the ‘dramatic tension’ lies, the target text then alternates between colloquial and literary Chinese, whichever is appropriate for the given context. That said, even conversations with different people differ in terms of formality. Chu’s and her mother’s emotional exchange with the doctor at Woodbridge would be more formal, while gossips about Seng around the neighbourhood would be colloquial. For instance, “医生，不行。我不想让儿子在这里接受治疗，请让我带他回家。” and “阿姆，这样是不行的。他有病在身，必须在这里接受治疗。”，as compared to “那是肯定的啰。不就是报应吗？不管怎样，反正就是小心为妙，别让孩子接近他。谁知道疯子会做出什么事来？”。As soon as dialogues end, the target text would ‘resume’ its literary style that is being adopted in most other chapters: “那个让人谈之色变、闻之丧胆的医疗机构”，“夜幕低垂，正是恐惧感油然而生、超自然能力从天而降的时刻”，“她望着气急败坏的老爸，又看着泣不成声的老妈，当下猛然醒悟”。

Similarly, the target text for Chapter 19 shifts back and forth between different styles based on its context. While the author and her mother Chu’s dialogues are casual, and the exchanges revolving around Seng’s bloated stomach slightly comical, the remaining portions are highly emotive and expressive. When Seng who is hospitalised after being hit by a car finds himself still alive, he pops a heartrending question “阿珠，他们为什么不让我死？” that leads to poignant silence between the ‘fateful’ siblings. Once again, I have exercised a deliberate choice of strong words and idiomatic expressions, as seen in descriptions such as “妈也合上双眼，泪水簌簌落在她还拿在手里、装着拖鞋的塑料袋”，“我想着这百思不解的一切”，“舅舅那句漫不经心的话，为何对我和妈而言却如万箭穿心一般痛？”，“使他们彼此相连的，

是兄妹之情，是患难之情，还是在造化弄人之下的同病相怜之情？” and “虽然扑朔迷离，尽管走来不易，恰恰是这样的关系改变了舅舅的一生，使他不至于前路堪虞”。

Lastly, in Chapter 6, the author departs from cathartic story-telling to plain ‘fact-reporting’ by switching to the ‘informative-type’ etiology of schizophrenia, but not before starting off with an ‘expressive-type’ prologue that puts the reader in a pensive mode. The author’s analogy between her uncle’s mannerisms and her own childhood escapades as narrated in “他面向窗口，说不定在对窗外的假想朋友笑，就像我儿时把自己假想为《神雕侠侣》的女主角那样” and “也许，大人坐在厨房窗边时，也可以像我儿时那样，任由思绪飞舞” elicits our curiosity about the etiology of schizophrenia. As soon as the switch is made, the language dimension of the text becomes logical and referential, which is an important prerequisite for putting across complex terminologies in medical and scientific translations. For example, when comparing the left and right hemispheres, getting the facts right through ensuring intertextual equivalence is of utmost importance. “左脑 [……] 当遇不合情理之事，其客观有序、高度集中的逻辑思维方式，往往会自创似是而非的解释，甚至自圆其说，根据事情的内在逻辑阐释和构建一个与客观现实不对应的版本。反观 [……] 右脑，虽被流行文学冠以‘艺术脑’的美称，却实事求是、脚踏实地。[……] 左脑过度活跃使人脱离现实的原因，由此清晰可见。” Notably, the use of idiomatic expressions in the informative text type does not affect its formal and no-nonsense style of writing. In fact, it helps to create a target text that is concise and that caters to the linguistic preferences of Chinese readers. This will be further elaborated in the following paragraphs.

As mentioned in 2.2.1, the key skopos of translating *The Sound of Sch* is to present to Chinese readers the complexities of schizophrenia, a mental illness not widely known and understood. While agreeing with Vermeer that the purpose of translation is of paramount importance, I have placed equal emphasis on the internal coherence of the target text (i.e. coherence rule), as well as the coherence between the source and target texts (i.e. fidelity rule). The former states that the target text must be translated in such a way that it makes sense for its receivers, given their circumstances, knowledge and needs, while the latter stresses on intertextual consistency (Reiss & Vermeer, 2013: 101-102). While Reiss and Vermeer have ranked both rules to be hierarchically less important than the skopos of the target text, coherence and fidelity have nonetheless been crucial considerations for me in the translation of *The Sound of Sch*. This is also very much in sync with Reiss’s text type approach to translation.

In trying to achieve a balance between fulfilling the purpose of the target text in raising awareness and ensuring both intratextual consistency and intertextual faithfulness in conveying complex emotions and terminologies, translating *The Sound of Sch* has undoubtedly been a process of constant perspective-taking, be it from the author's point of view or that of the reader.

In Chapter 4, for instance, as mother Chu and daughter make their way to the Woodbridge Hospital in anticipation of bad news, “both know the same unspoken fear going through the mind of the other” has been translated as “两人其实深知对方承受着相同的恐惧，只是心照不宣”，in which “心照不宣” is typically used in Chinese to refer to what is unspoken between two parties having already reached mutual understanding. It also aptly captures the nameless fear and plight faced by caregivers of the mentally ill. In the doctor's room where both Chu's mother and the doctor go back and forth trying to convince each other, my rendition of “a growing air of frustration begins to infuse the small room” is “一股挥之不去的挫败感，正在小小的诊室里滋长、弥漫”，where the amplification “挥之不去” has been deliberately added to accentuate the futility of the situation. “Infuse” has been ‘doubly’ translated as “滋长” and “弥漫” to create the same effect as well, without adulterating its meaning in the source text. Then, Chu becomes overwhelmed with emotions, described in “[...] Then a generous dose of anger. And then a mixture of love, sympathy, and sadness. The concoction mingles and churns till she wants to throw up”, and translated as “紧接着是怒火中烧，还有交织着慈爱、怜恤和伤感的矛盾心情。五味杂陈的思绪不断在搅动，让她隐隐作呕”。Here, “a general dose of anger” has been converted idiomatically to “怒火中烧”，“a mixture” is being amplified with the addition of a verb to become “交织着……矛盾心情”，while “the concoction” is being elaborated as “五味杂陈的思绪”，followed by “隐隐作呕” which captures nausea and vomiting spells vividly. Nearing the end of the chapter, Chu's sudden realisation of the weight on her shoulder as Seng's caregiver is summed up in “与精神分裂症相关的，与世人对精神分裂症的鄙视相关的，凡此种种，不偏不倚，都已落在她和她哥哥的肩上”。Instead of translating “[...] have fallen on her shoulders no less than on her brother's” word-for-word, I have chosen “不偏不倚” to imply that the totality of schizophrenia and its weight have unequivocally fallen on both the mentally ill and their caregivers. In Chapter 19, Seng's “six words” that are “nothing more than a string of syllables” have been translated sense-for-sense rather than literally as “那句漫不经心的话” to be in stark contrast with “却如万箭穿心一般痛”，shedding light on the excruciating pain that caregivers have to bear for as long as their

lives remain intertwined with their needful loved ones. Again, in deciding between a formally equivalent “心如刀割” and a dynamically equivalent “万箭穿心” for the source phrase “fly like knives into [...] heart”, the latter has been picked to resonate with the target text readers without compromising the fidelity between the source and target texts.

As for the highly informative Chapter 6, with its technical jargon that requires accuracy and clarity when being translated, it is even more so that intertextual fidelity be accorded equal weightage as the skopos of the target text. While terminologies such as “neurons”, “dendrites”, “axons”, “synapses”, “paranoia”, “hemisphere” and “electroencephalography” have fixed and undisputed corresponding phrases in Chinese, less specific references used by the author have been translated from the target text reader’s perspective, while making sure that meanings are not being misconstrued. For instance, “thinking thing” to “思维器官”, “amazing, mysterious” to “耐人寻味”, “one-of-its-kind” to “独一无二”, “talk to one another” to “彼此互传信息”, “building up of the whole from the parts” to “管中窥豹”, “hyperconsciousness” to “知觉过敏”, “inventing some plausible explanation” to “自创似是而非的解释”, “confabulating details” to “自圆其说”, and “truthful, contextual and grounded in reality” to “实事求是、脚踏实地”.

While there have been criticisms for Reiss’s oversimplification of text type differentiation, in that an informative text can also show a strongly expressive side (Munday, 2016), or *vice versa*, the case for *The Sound of Sch* is less fuzzy because the co-existence of the informative and expressive functions within the same source text occurs in fixed and obvious segments. Furthermore, adopting combined perspectives of text types and skopos when translating complexities of schizophrenia acknowledges the fact that other than text types, the role of the translator and the purpose of the target text also affect the choice of translation strategies.

2.4.2 Translating Singlish and Dialects: Balancing Foreignisation and Domestication

As with translating complexities that encapsulate schizophrenia by managing purpose, coherence and fidelity, translating Singlish and dialects comes with the challenging task of ‘a balancing act’. On the role of the translator and on taking appropriate strategies, I agree with Lawrence Venuti (2008) that the target text should maintain the translator’s visibility and

individuality, be receptive to foreign influences of source texts (Durin, 1995), while ensuring that the author's intended messages are being not being misconstrued by readers of the translated text. The choices between foreignisation and domestication of translation, therefore, are more often arbitrary and contextual rather than prescriptive and formulaic.

While it seems reasonable to presume that Chinese readers born and bred in Singapore are able to comprehend a foreignised translation of Singlish and dialects in books like *The Sound of Sch* written by local authors, there are many more target text readers who non-Singaporeans and are therefore nowhere close to being well-versed in our local lingo. I will dwell on the details when I discuss in the section 2.4.3 differences in the strategies involved when translating for Chinese-speaking readers internationally and regionally. In this section, I will be looking at how I have attempted to adopt a balanced approach between foreignisation and domestication when translating Singlish and dialects in *The Sound of Sch*.

In Chapter 1, “xiao lang” which is the hokkien equivalent for “mad man” has been straightforwardly converted to written Chinese “疯人”. In order to benefit readers who do not know the hokkien dialect, I have also indicated “福建话” in parenthesis. While I could have foreignised “xiao lang” by using homophonic characters to represent them, domesticating it to Mandarin which is more widely known and indicating its original dialect would offer more clarity to the target text readers.

However, in Chapter 4, ‘Ah Um’ which the author indicates in the source text as hokkien for ‘old auntie’ for her readers, has been foreignised as “阿姆” (as pronounced in hokkien but not used in Mandarin and in the written form) instead of formally used terms like “阿婶” or “阿嫂” that are universally understood. Reason being, “阿婶” and “阿嫂” also have their hokkien equivalents ‘Ah Sim’ and ‘Ah Soh’ respectively. Hence, domestication of ‘Ah Um’ will not render the translation accurate and meaningful to the target text readers. On the other hand, ‘old auntie’ has been translated as “伯母” instead of its literal meaning “老阿姨”, as the doctor is clearly addressing Chu’s mother as an elderly lady in a polite manner (“伯母”) rather than in derogatory terms. Similarly, when gossipy neighbours make slighting comments in Cantonese about Seng being crazy and mentally unsound, I have deliberately converted “Hai yah, chee zhor seen” to Chinese characters “係啊，痴咗线” and have added a parenthesis to explain its meaning so that target text readers know that the source language is in fact Cantonese and could choose either to read it in Cantonese or in Mandarin.

In the same chapter, instead of domesticating “Whampoa market” as “黄埔市场”, it has been translated as “黄埔湿巴刹”, known to the older generation of Singaporeans. The fact that it was a wet market locally translated as “湿巴刹”¹ in the olden days should be made known to non-local readers, for *The Sound of Sch* is in essence a true story that takes place in local history and on local landmarks. On this note, the use of Malay words in English and Chinese has also contributed to the uniqueness of Singlish or Singdarin². Throughout *The Sound of Sch*, Malay words are being used to inject local flavour and to depict the authentic speaking habits of many Singaporeans.³ Other than “pasar”, the name of the Malayan machete “parang” is also customarily used in its original language in local literature, and instead of translating it semantically as “大砍刀”, the locally used phonetic equivalent “巴冷刀” would give the target text readers a sense of indigenouness and authenticity. Another instance in which I have chosen to use Singdarin is Chu’s mother’s reference to the *bomohs* being “powerful”, translating it to the ‘dialect’ version “厉害” instead of the formally used “了不起” or “医术高明”. The foreignisation strategy has been intentionally used to match the use of Singlish in the source text that is itself a translation from the hokkien dialect used by the author’s grandparents, as used in their colloquial dialogue: “你看啦……看阿弟的儿子……”, “你看, 你看……你把阿成害惨了” and “我怎么知道会这样”.

In Chapter 19 where colloquialism is prevalent, I have again had to decide between foreignisation and domestication when translating dialogues between the author and her mother Chu, between Chu and the nurses, and between Chu and Seng. For example, “quite senang lah” has been changed to indirect speech and translated as “临时工很轻松的”, repetitive “uh-huh, uh-huh” by Chu over the phone have been domesticated as the typical Chinese response “嗯嗯”, while “Alamak”⁴ as exclaimed by the author’s father, which literally means “mother of God” in Malay, has been translated and shortened as “天啊” to express exasperation succinctly. Although “我的妈呀” would have done the job with its intended pun, I have decided against it because this is usually used in a comical sense, and would not be an appropriate response to

¹ “巴刹” is derived from the Malay word “pasar”, which means “market”.

² Singdarin is a coined term for Singapore Mandarin. Some regions use ‘Singnese’ (Singapore Chinese) instead.

³ In another chapter (not chosen for translation), the author shares that her mother would chide her father for eating up all the oranges meant for everyone in the family: “I bought so many for the family and you go and gasak all!” The Malay word “gasak” aptly captures the act of grabbing greedily. In Chinese, it could be translated as “扫个精光”.

⁴ “Ala” stands for Allah while “mak” stands for mother, hence “alamak” means “mother of God”.

bad news about Seng having a punctured bladder. As for dialogues in the ward when the author and her mother visit Seng, I have also decided against the predictable and prescriptive use of direct equivalents for “lah” (“啦”) in the target text. Hence, “[...] your brother has been pulling out the needles for the drip [...] Naughty lah” has been translated as “你哥哥真不听话，把滴注注射针强拉出来”，while Seng’s “it makes me want to throw up lah” has been translated as “谁叫这东西弄得我想吐”. Applying foreignisation wholesale and indiscriminately, as I see it, would be akin to “calling too much attention to the translation itself”, as posited by Norman Shapiro (Venuti, 2008:1). While I do not imagine a good translation to be “transparent” and to seem “untranslated” like Shapiro does, and much as I am agreeable in principle to establishing the translator’s visibility and to injecting foreign elements into the target text, the translation of Singlish to Chinese requires careful deliberation because the “lahs” and “lors” used in Singlish may not be contextually appropriate or even as widely used in Singdarin. A nurse complaining that Seng is “naughty lah” would be a true reflection of Singlish pragmatics, while the same nurse saying “你哥哥很坏啦/哦/嘞……” would sound awkward and perhaps even unbecoming. The same goes to a forty-year-old complaining childishly about the medication that makes him want to throw up: “这东西弄到我想吐啦/啊/嘛”.

As shown by the examples above, translating Singlish and dialects to Chinese requires flexible strategisation that is as much dependent on the context as it is on the translator’s subjective preference, if not more. In the next section, I will be doing a comparative analysis on two translations of *The Sound of Sch* meant for different target reader groups. One by me for Chinese-speaking international readers, and the other by a Taiwanese translator for Taiwanese readers.

2.4.3 Comparative Analysis: Differing Perspectives

I have mentioned in section 2.3 that the prior existence of a Taiwanese translation⁵ has not dampened my keenness to come up with my own Chinese rendition of *The Sound of Sch* from the perspective of a fellow Singaporean. A comparative analysis of both versions would shed light on the differences in our translation styles and strategies.

⁵ Published in March 2016, 《住在三十年的寂寞里——爱，让我们学会勇气和奉献》 is the work of professional Taiwanese translator Huang Yiran (黄意然), an inaugural translation of *The Sound of Sch*.

On fidelity and accuracy between the source and target texts, I have observed that the Taiwanese version has discrepancies from what is being understood in our local context, possibly due to a lack of familiarity with Singaporean culture. For example, the sharp pain that pierces through Seng like “a satay stick” at the scene of the accident has been translated by Huang as “一阵剧痛穿透身体，宛如沙爹串的棍子插进肉里”，describing the fine, thin and sharp satay stick (沙爹枝) we know as a thick and blunt rod or pole. This is ensued by a subsequent misinterpretation in “他摸一摸腹部，看看是否真有棍子插在那里”. There are two other similar examples. Firstly, “Whampoa market” was being translated not from the Singaporean but from the Taiwanese perspective as “黄埔市场”，overlooking the importance of using authentic names for landmarks (in this case “黄埔湿巴刹”) in translations. Secondly, “parang” which is locally and formally translated as “巴冷刀”，has been translated to “帕兰砍刀”. It seems that the local context has not been taken into consideration in some of Huang’s translations.

In many instances, Huang also prefers a word-for-word approach to translation, practising Nida’s formal equivalence which is concerned with matching both source and target texts closely. At the end of Chapter 1, “Music? Who cares to listen? Well, you never know” has been literally and awkwardly translated as “音乐？谁用心聆听呢？嗯，你永远不知道。” I would like to think that these rhetorical questions are not meant to be interpreted literally. I have chosen a sense-for-sense approach, seeking dynamic equivalence instead, in the hope of eliciting an empathic response from the target text readers: “两把声音的合奏，会否引来知音？这很难说，且让我们拭目以待吧”. As compared to Huang’s “fateful” way of translating “you never know”, “这很难说” and “让我们拭目以待” are hopeful answers to a seemingly bleak question.

In Chapter 4, “Mother and daughter [...] trying to absorb the rational, scientific explanation being put forth to them regarding a condition that thus far could only be described as ‘madness’” is being faithfully translated as “母女两人 [……] 设法理解医师对她们陈述的理性、科学的说明，解释迄今只能被形容成‘发疯’的状况”，using “陈述 [……] 的说明” redundantly and confusing the subject of “解释 [……] 状况”. To ensure clarity of translation, I have used “母女俩” as the subject to avoid confusion: “母女俩试着从其理性、科学的内容中，去理解这种到目前为止仅以“精神错乱”来形容的病”. And when the source text describes that Chu “can see that he (Seng) senses something amiss; perhaps, or probably, he too has felt the

sting of stigma and gossip on occasions when he went out of the house”, the Taiwanese translator delivers her target text word-for-word: “[……] 也许，或者大概，在他偶尔出门的时候也感受到污名和流言的刺痛”. I have instead summed up “perhaps” and “probably” collectively as “很可能”，and have translated “the sting of stigma and gossip” as “人言可畏的杀伤力”. Next, in trying to achieve an emphatic effect, especially for emotive phrases like “[...] now stuck with illness but still caring for her nonetheless”, “the world has turned its back on him” and “the illness has not made Seng any less of a person capable of loving her”, I have used strong impactful descriptions like “哥哥 [……] 的疼爱与呵护并未因患病而有丝毫减少 ” and “尽管世界早已将他置于不顾，阿成的病未曾夺去他疼爱妹妹的能力”. Huang, on the contrary, has used relatively milder expressions that evoke less intense feelings: “这仍是 [……] 她的哥哥，现在虽然生了病，但依旧关心她” and “这世界背弃了他，可是阿成并没有因为生病而不再关爱她”.

Huang’s preference for “safe translation” is also reflected even in simple phrases like “That’s the problem”, literally translated as “这就是问题了”，although “问题就在这里” immediately occurs to me as a more contextually appropriate equivalent. “Blue-black” is translated word-for-word as “蓝黑”，although a clearly better option would be “青一块紫一块”. In Chapter 19, when Chu asks about Seng’s bloated belly in “Is it just me, or do you think his stomach seems to be growing bigger”, Huang translates it literally as “是只有我这么认为，还是你也觉得他的肚子似乎变大了？”. My rendition is “我有没有看错，你觉不觉得你舅舅的肚子越来越大？” Later on, Huang opts again for formal equivalence when translating a series of three consecutive questions posed by the author: “[...] what’s this connection, is it the brother-sister bond? Is it the human bond of suffering? Is it the bond of helplessness at what life throws at you?” Compared to her safe and literal rendition of “是兄妹关系吗？是苦难人之间的牵绊？或是对人生投来的一切感到无可奈何而产生的连结？”，my version “使他们彼此相连的，是兄妹之情，是患难之情，还是在造化弄人之下的同病相怜之情？” is a deliberate attempt to inject dynamism through the use of parallelism. Then, Huang translates the next series of ‘tricky questions’ with a seemingly inadvertent yet awkward repetition of “这联系”： “[...] ethereal as it may be, is it not this connection that has made all the difference in his life, for what would his life have been without it, however difficult it has been even with it?” becomes “尽管这联系难以捉摸，但这联系岂不是对阿舅的人生影响重大吗？虽说他的人生就算有此联系仍十分艰苦，但是倘若没有这联系将会如何？” To avoid lack of

clarity and fluency, I have opted to convert these questions into a statement instead: “虽然扑朔迷离，尽管走来不易，恰恰是这样的关系改变了舅舅的一生，使他不至于前路堪虞”。

In another instance when the doctor desperately tries to persuade Chu’s mother to allow Seng to receive treatment, Huang takes a similar approach by translating “He looks at Chu, [...], hoping that the old woman can perhaps be talked around by her daughter” as “他望着阿珠，[……] 期盼老妇人或许能听进女儿的话”。On the other hand, I have instead shifted the focus to the doctor’s hope that Chu could play a part in convincing her mother, with “像在暗示做女儿的尝试让母亲改变初衷” mirroring “他望着阿珠”。

There are also several examples where Huang’s word-for-word translations may come across as “translationese”. When the neighbours engage in small talk about Seng, “whispering loudly”, the Taiwanese translator’s version “吵闹地窃窃私语” appears to be oxymoronic. I have instead decided on “彼此大声地互传耳语”, which does not sound contradictory. Next, Huang splits a lengthy source text sentence - “From the thick darkness that stares at her when she tries to fathom what the future will be like”- into two: “逃离浓得化不开的黑暗。当她试图揣想未来的前景时，这片阒黑直盯着她”，giving it a literal and fragmented rendition. To ensure the flow of the “from the...” (“逃离”) parallelism, I have instead translated the same lengthy sentence to a shorter target text: “逃离眼前预示暗淡未来的漆黑”，replacing “when she tries to fathom what the future will be like” with “the thick glaring darkness that seems to foretell a bleak future”. In addition, Huang’s concern with formal equivalence has even led to some apparent mistranslations that render the target text awkward and inelegant. In Chapter 6, “logical problem solving” is being literally translated to “逻辑问题解决”，although I would think that “问题求解程序” makes more sense. Next, “a slavish following of the internal logic of the situation” seems to have been misinterpreted as “难以跟上周遭状况的内部逻辑”，where “slavish” should rightfully be “following blindly” (and not “having difficulty in following”), as reflected in my translation of “盲从情况的内部逻辑”。When comparing the detriment of schizophrenia to humankind with that of Aids, “even Aids not excepted”, which should mean “甚至胜于爱滋病”，has been mistranslated as “就连爱滋病也不例外”。

Lastly, the Taiwanese translator seems to be more inclined towards domesticating the target text for its Taiwanese readers. For instance, in Chapter 1, “xiao lang” has been phonetically translated as “肖狼”，which is exactly how it would be pronounced in the hokkien dialect.

While the phrase would ring a bell for Taiwanese readers, it is unlikely to make sense to international readers, which explains my choice of the widely understood term “疯人” together with a parenthesised explanation. Other examples include Huang’s “阿舅” (Ah Gu) and “阿迪” (Ah Di) as pronounced in hokkien, as compared to my versions of “舅舅” and “阿弟”, which would strike a chord in international readers of the target text. Next, Huang domesticates Seng’s badly run over slipper (that is “as flat as a flipper”) to being “变得像块烤饼似的扁平”, while I have faithfully translated as “压得扁如潜水用的鳍状肢”. In addition, since Huang’s translation has been meant for the Taiwanese market, some of its terminologies are therefore peculiar to the Taiwanese, the most obvious one being “思觉失调症”, the Taiwanese equivalent for Schizophrenia that has replaced the internationally used “精神分裂症” since 2014. While I have no qualms with Taiwan’s move in reducing social stigmatisation that may arise from the originally used “精神分裂症”, I have chosen the more widely used international version over the ‘Taiwan-only’ version for the fact that I have not intended for my translation of *The Sound of Sch* to only cater to readers from a particular region.

Lest this comparative analysis comes across as a one-sided attempt to elevate my translation strategies, I have found some of Huang’s approaches refreshing and noteworthy. For one, Huang has handled translation of dialogues well and has not injected her Taiwanese influence at the expense of the ‘local flavour’ of *The Sound of Sch*. There are also descriptions quite unlike her usual ‘safe and literal’ style. For instance, in Chapter 4, “阿成的母亲坐直身子, 眼底闪过一抹惊骇” (“Mother sits up with terror shooting through her eyes”), where “shooting through” is replaced by “闪过”. In Chapter 6, “也许等我长大成人, 坐在家中厨房床边时, 也能随意想象出任何东西” (“So maybe you can also imagine anything you want when you are an adult sitting by your kitchen window”), where Huang amplifies the target text with “等我长大成人”. Then in Chapter 19, “我看着他们两个人, 惊讶于他们的人生连结得多么深” (“As I watch the two of them, I wonder at how intertwined their lives have been”), where “惊讶于” is used as a conjunction that enhances sentential coherence.

2.5 Conclusion

Local Chinese-to-English translator Jeremy Tiang says, “To be a good literary translator, you need to look at the original language and unpack the deeper purpose of what the writer is doing

and go beyond meaning and style to uncover his mindset and attitude." (Lee, 2016) My translation of *The Sound of Sch* has indeed been an ‘unpacking’ of the author’s intent in sharing her family’s journey with schizophrenia, albeit with equal and interrelated emphases on the social functions of the target text, as well as textual coherence and fidelity through the use of appropriate strategies.

Many cultures in Asia value “conformity to norms, emotional self-control, [and] family recognition through achievement”. (Abdullah & Brown, 2011: 934) Through Seng in *The Sound of Sch*, we see up close and personal how mental illnesses are often stigmatised and seen as a source of shame. Even his loved ones lament at how schizophrenia and its stigma have crippled him, who would have otherwise thrived, given his prospects of a bright future.

Grace Tan, a local blogger who shares her views about the book on *Working with Grace* (2016), sums up how *The Sound of Sch* has first struck a chord in me, raised my awareness about mental illness, and subsequently prompted me to impress upon Chinese language readers through my translation the schizophrenic’s need for empathy and acceptance.

[...] This book has helped achieve the author’s aims. I do agree with her now that not all mentally ill patients are violent. [...] I do constantly bump into one weird man at Hougang Mall who talks to himself a lot. People generally let him be as he doesn’t cause any trouble. [...] Perhaps he’s just like Seng. Perhaps something bad happened in his life, just like something bad will happen in all of our lives. [...] There’s no real need to be afraid of him. He’s likely someone’s son or brother or uncle who’s just out for a walk. If our society is to be truly accepting of all peoples, then let’s start at home with the sons and daughters of Singapore.

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