Important questions about effective communication in transcultural medical contexts inspired Rachel Bloom-Pojar to balance her full-time studies as a graduate student of rhetoric and composition (at the time of writing), with her summer volunteer work as a medical interpreter in the Dominican Republic (DR). Her book, *Translanguaging Outside of the Academy: Negotiating Rhetoric and Healthcare in the Spanish Caribbean*, is the result of her close examination of language variance within and outside of the academy and also her experience working on the ground as an advocate, interpreter, and facilitator between United States (US) and DR communities. Working, as she writes, “in the liminal spaces of these transcultural interactions,” provides insightful data that challenges the ideologies surrounding spoken Spanish in the DR, further complicating and reframing language practice in medical contexts where acts of translanguaging are useful (5). By moving away from the discussion of translanguaging in academic institutions, specifically, Bloom-Pojar provides insight into how these languaging practices can be used in other critical contexts where clear communication is imperative.

In chapters one and two, “Toward a Rhetoric of Translanguaging” and “Research Design,” Bloom-Pojar draws from important interdisciplinary work in the fields of rhetoric and linguistics to promote dispositions that “encourage an intentional approach to privileging the language use and needs of the marginalized speaker in any situation” and also sets the context and methods for her study (9). The rhetorical model used is comprised of three main actions: complicating language ideologies, building relationships, and cultivating translation spaces. While these components may function in this order—language ideologies are complicated by language variance, which leads to relationship building to move past stigmatized repertoires, possibly giving way to different acts of translation to better communicate meaning—as a table provided by Bloom-Pojar illustrates, they all play into each other interactively as needed. Analyzing data from 23 semi structured interviews of DR (10) and US (13) participants, observations, and field notes, she explains that relationship building was a component revisited in her follow-up analysis, drawing on its importance in the development of translanguaging for effective communication.

While standard medical Spanish is privileged in healthcare contexts, at the *El Centro para la Salud Rural* (CSR), it was not the dialect that was best equipped to serve the needs of the local patients. In chapter three, “Complicat-
ing Language Ideologies,” Bloom-Pojar reveals how local perceptions of the rural Dominican Spanish dialect reflect “language ideologies about correctness and class difference” (46). That said, in order to serve the needs of the patients, doctors from both the US and the DR needed to be open to different varieties of Spanish and other communication practices in order effectively understand the needs of the patients and to likewise communicate important medical information to them.

Chapter four, “Cultivating Translanguaging Spaces,” speaks to what happens when individuals try to communicate using different varieties of a language and fail to understand one another—they turn to translation (written speech) or interpretation (verbal speech). In addition, there is need to align to the language practices used by the patient. In her analysis of the Health History form used in the CSR clinic, Bloom-Pojar discusses the way the ayudantes (nurses) shorted the formalized questions on the forms in verbal speech to reflect the discursive norms of the patients’ Dominican Spanish. Developing the attention and sensitivity to react to marginalized speakers by using their language norms is a translingual disposition that is not only useful in medical environments, but in all discursive contexts where verbal communication is crucial.

Attuning to the rhetoric of translanguaging is made easier through relationship building. In chapters five and six “Contexts and Collective Resources” and “Critical Reinvention between Communal and Institutional Discourses,” Bloom-Pojar provides examples of the way the CSR brought local residents and their visitors together for community activities. These engagements were important for establishing real connections with the host families that were also patients at the clinic. Once connections are established, translanguaging only happens as long as interlocutors are open to it. For example, in her interviews with locals, Bloom Pojar illustrates how asking questions about words that come up in conversation, or, to use her words, “acting like a language teacher,” creates a space where learning to communicate across language difference is possible.

In addition to learning conjugations within the local dialect, being sensitive to the spiritual needs of the community strengthened the bond between interlocutors and also taught intercultural communication. Bloom-Pojar describes the way that after receiving treatment, locals would thank the practitioners, “but only after thanking God and establishing that the procedure was successful through God” (119). In regular conversation there was also a gesture to God as the deciding source of whether one would see the other tomorrow through the use of the phrase, “Si Dios quiere” (if God wants) (127). As Bloom-Pojar illustrates in her data, this phrase was also expected from those outside the local culture.

In part, Bloom-Pojar’s book provides a framework for how language and writing teachers might effectively serve in liminal spaces between their institu-
tions and communities. This work has never been more important than it is right now. In the current state of our education system, where funding cuts are being made to programs that could support students in their attunement to institutional discourses, models that help us answer, “what do I do when I encounter language difference?” are crucial.

*Translanguaging Outside the Academy* is additionally valuable because of Bloom-Pojar’s focus on language practice in a transnational healthcare context in general, and within and between local and “standardized” Spanish speaking communities, specifically. Her call for “patient discourses of health” (132) as agentive terminology to use along with more standardized medical terminology is forward-looking. As a language and writing professor at a community college that offers myriad healthcare, STEM, and nursing programs, and that also serves students from diverse linguistic backgrounds, I have anticipated the need for literacy training that prepares students for the speaking and writing they will be asked to demonstrate outside of the humanities, where this training typically occurs. Bloom-Pojar’s book compliments the recent work of Suresh Canagarajah, who looks at how “competence is distributed across various material and social networks” (“Materializing Competence” 279) and how “multiple verbal resources can help one in certain professional activities” (“English as a Spatial Resource” 48). Because of this work, community colleges are now better positioned to train students through their workforce development programs. Finally, Bloom-Pojar’s book is an excellent resource because of its focus on communities and the grappling itself that occurs in the liminal spaces where we, as educators and speakers, will undoubtedly be asked to attune in order to communicate effectively.

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**Works Cited**
