

Translation Tendency of TCM Terminology English Translators Based on Audience Analysis

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Abstract: Due to the highly generalized, vague, historical, humanistic, and philosophical linguistic characteristics of TCM language, it is difficult to translate it into western medicine. Taking into account the acceptance of Western readers, the translators of the East and the West have different translation tendencies in the process of term translation. The acceptance of different audiences varies greatly. Based on the social relationship theory in audience analysis theory, human beings are divided into different groups, which confirms the rationality of the two translation tendencies of Eastern and Western translators. Terminology standardization should continuously reduce the differences caused by different tendencies, and eventually move closer to standards.

1. Introduction

In TCM terminology translation, there are two opposite tendencies. One side understands the terminology of TCM with the concept of TCM, while the other side understands the terminology with TCM with the concept of Western medicine. Interestingly, Chinese translators tend to prefer Westernization over Western translators. Chinese translators believe that TCM terms that are closer to Western medicine are more acceptable to Westerners than traditional Chinese medicine. Due to the current inequality of cultural status, considering the dominant position of Western medicine, Chinese translators choose to move closer to the dominant Western medicine vocabulary. They want to find similarities with Western medicine, and use modern medicine to prove the science of traditional Chinese medicine to increase the acceptance of Chinese medicine and to achieve a wider purpose of dissemination. Westerners mostly advocate source-text-oriented translation, and because of the consideration of preserving the characteristics of traditional Chinese culture, they more embody the characteristics of traditional Chinese medicine.

2. Audience Analysis

Audience analysis is an important part of communication science. The so-called audience is the receiver of information transmission. After the rise of mass communication research, many scholars believe that the audience is not only the receiver of information, but also has multiple roles. The audience is the consumer of information products, the interpreter of communication symbols, the participants of communication activities, and the effects of communication. They are still respondents, rights subjects in transmission and reception activities. The audience has the following characteristics: huge scale, strong dispersion and mobility, unorganization, anonymity, homogeneity. Therefore, in the face of the same information, different people will make different choices and understandings of it because of their psychological and personality differences, and the accompanying changes in attitudes and behaviors will also vary from person to person.

Based on the research results of Lazarsfeld, Berelson and Katz, the social classification theory of audiences was generated. According to this theory, audiences can form different social groups based on similarities in demographics such as age, gender, race, education, religious beliefs, and economic income. These groups formed because of the same or similar demographic factors have

similar personalities and psychological structures, and they also have more consistent views in terms of outlook on life and values. In this way, the audience can be divided into different groups for research. Adopting audience social taxonomy is better than individual difference theory. It does not stubbornly emphasize individual differences and unity within groups, but also notices differences between groups.

Based on the above theoretical analysis of audience analysis, the terminology translation audience can be divided into different levels to study the preferences of different groups for term selection in order to receive better feedback. In the period when terminology standards have not yet been fully formed, timely adjustments were made to create a more comprehensive TCM terminology database.

3. Two Term Translation Tendencies

3.1 Terminology of Chinese translators

3.1.1 Xie Zhufan's terminology

Professor Xie Zhufan's terminology is influenced by Porkert, such as the five elements, five evolutive phases, collaterals, reticular conduits. Organs are translated with general-purpose language equivalents, such as liver, heart and spleen,. The translation of some TCM characteristic words, using Pinyin, is limited to yin, yang, qi and meridian names. In addition, there are some words translating by borrowing translation, such as qi stagnation, running piggy, vital gate of life, etc. There are other words in paraphrasing word formation: urinary disturbance, restore yang (vital function) from collapse and so on. What is more prominent is to match the terms of traditional Chinese medicine and western medicine, such as dyspnea and tachypnea, uterine bleeding, and acute conjunctivitis. In addition, some Western medicine concepts not included in the traditional Chinese medicine system are also introduced. All in all, Professor Xie's tendency in the translation of TCM terms is to use Pinyin as little as possible, and to use more Western medicine terms and general-purpose languages.

3.1.2 Li Zhaoguo's Terminology

Professor Li Zhaoguo proposed five principles for terminology translation, which are the principle of naturalness, simplicity, nationality, back translation and prescriptive. Examples of terms translated by Professor Li are as follows: glaucoma, acute arthritis, hypovitaminosis, yangpenic hygroscopy and leukoglossopathy. However, Professor Li also has the problem of using classical derivatives to attach importance to westernized forms, thereby reducing the effective expression of Chinese concepts. For example, in the book "Chinese-English Dictionary of Common Terms in Traditional Chinese Medicine" published by Guangdong Science and Technology Press, "Jin Shi Bu Ming" is translated as "solid bell-metal can't ring". According to the meaning of the term, Professor Li translated it into "hoarseness or aphasia caused by sthenia of lung-energy", because he believes that some metaphorical terms are ambiguous in English and should not be translated directly. However, through the study of traditional Chinese medicine, native English speakers will understand the connection between the lungs and gold, and the sound is related to the lungs. Lung evidence caused by suffocation will cause this disease. All in all, Professor Li's term translation focuses on classical word-derived terms and westernized forms, but his translation principles and methods have made a breakthrough contribution to the development of English translation for traditional Chinese medicine.

3.2 Terminology of Western Translators

3.2.1 Nigel Wiseman's terminology

Wiseman's term is widely used. He believes that "translating classic ancient books, Western medical translation cannot be used because it is easy to project modern medical concepts into ancient times and cover up the original ideas of ancient authors"(Wiseman 2001: 53). Most of the terms he created are relatively simple and accurate expressions of his Chinese equivalents, such as

"lungs govern diffusion", "phlegm heat obstructing the lungs". But his terminology is too idealistic, which can cause associations not found in Chinese, or hinder communication. In general, many of Wiseman's terms are a tendency to compromise.

3.2.2 Unschuld's terminology

Unschuld's term translation tends to be source-oriented translation. For example, the general translation of organ names in general-purpose language, brain, blood, etc. can directly correspond to brain and blood, because this is a part common to all human beings and easy to understand. The translations of viscera, meridians and stroke should reflect the characteristics of the original features, and translate directly into depots, palaces and hit by wind. His borrowing was limited to yin, yang and qi, but he used the borrowed words more widely and avoided the use of specialized western medical vocabulary. He proposed a term for applying semantic equivalence to translate things that humans can experience in all cultures, such as water, which are consistent with all human cognition.

4. Comparison of Two Tendencies based on Audience Analysis

Based on the audience analysis theory, people in different countries and regions have different acceptance of information due to various factors such as cultural background and education. The cultural differences between the East and the West are already huge. In addition, the formation of traditional Chinese medicine and western medicine comes from two completely different philosophical ideas. It is bound to be impossible to find a completely equivalent translation like natural science. The formation of the theory of traditional Chinese medicine is deeply influenced by the ancient Chinese traditional philosophical thoughts in the pre-Qin period. It is highly historical, humanistic, and blends medical and philosophical while Western medicine attaches more importance to evidence. There is no such view in western medicine that kidney storing essence, so simply translating it into kidney will lose the function of the kidney in Chinese medicine, but simply correspond to the anatomical organs, which will cause the lack of Chinese medicine culture. However, as western medicine occupies a dominant position, and traditional Chinese medicine is used as complementary medicine or alternative therapy in many areas, Chinese translators are bound to produce westernization in the process of term translation considering the acceptance of Western audiences. Western translators who translate traditional Chinese medicine are more interested in Chinese culture and understand traditional Chinese medicine. Naturally, their translation tends to be source-oriented.

5. Summary

The emergence of different tendencies in the translation of Chinese medical terms is mainly due to the differences between Chinese and Western cultures. However, as the term standardization progresses, this tendency will gradually come closer. After recognizing their limitations, Western medicine increasingly turned to complementary medicine. Traditional Chinese medicine has always regarded the patient as a whole related to nature and the universe, and it has been gradually respected in the West. As the spread of Chinese medicine continues, foreigners who are willing to learn about Chinese culture and Chinese medicine will continue to increase. The translation of traditional Chinese medicine terms should retain the characteristics of traditional Chinese medicine as much as possible.

The translation of TCM terms will inevitably lead to various differences. As the use time increases, such differences will decrease, and eventually stable and standardized terms will be formed. For example, there are two translations of the word "wind fire eye". One is acute conjunctivitis, which is the name of the disease in Western medicine, and the other is wind-fire eye. At first glance I think the second translation is a bit ridiculous, but at least it conveys the thought of Chinese medicine, because wind and fire are two of the six pathogenic factors of TCM, and this is related to the cause of this disease. If it is directly translated into the name of Western medicine, it will cut off this connection with Chinese medicine. Therefore, the acceptance of wind-fire eye has

been increasing in recent years. Due to the complexity of the terminology of traditional Chinese medicine, which is different from that of general natural sciences, in some cases, the only unity of terminology cannot be forced. Different audiences have different acceptance of the same term. If the audience is a TCM learner, they should be biased towards the source language and retain the traditional theoretical concepts of TCM. If they are facing the public to make TCM culture popular, they can use amplification method or add more Western medicine concepts and even explanatory notes to assist in understanding TCM culture.

At present, the translation of traditional Chinese medicine terms is more inclined to source-oriented translation (borrowing words and borrowing translation), which shows that this method is expected in practice. There is a Chinese proverb that if the name is wrong, then the thing will not be done. A rational analysis of whether term translation should focus on Westernization or preserve the characteristics of traditional Chinese Medicine is one of the key points of TCM term standardization. Reducing the misunderstanding caused by the confusion of term concepts is more conducive to the in-depth spread of Chinese medicine.

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