Debate papers

Language and the provision of health and social care in Wales

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ABSTRACT

This article explores the discrimination that may be experienced by Welsh-speaking individuals accessing health and social care services in Wales. The paper provides a brief outline of the current use of the Welsh language in Wales and explores the significance of being a territorially bound and historically situated linguistic group. Drawing on published works and secondary research, the paper explores the contemporary significance of the Welsh language, and the insights bilingual theory offers into the importance of providing linguistically appropriate services in Wales. The paper identifies research which suggests that the provision of services in the

Welsh language in Wales is limited or inappropriately framed. Four reasons for this state of affairs are examined: legal inadequacies, ignorance about the complexities of bilingualism, continuing prejudice, and the basis of language claims. The paper then explores whether further provision in the Welsh language needs to be made, on what basis such provision could be substantiated, and what forms further provisions might take.

Keywords: discrimination, health and social care, Welsh language

Introduction

Linguistic diversity arising from bilingualism is a relatively unexplored issue in health and social care provision in the UK. This might be considered surprising for two reasons. First, the UK contains one of Europe's largest territorially bound, historically situated linguistic minorities: Welsh speakers. Second, clear and effective communication is a prerequisite for effective health and social care practice. This article examines the gap between such practice and meeting the needs of Welsh-speaking people in Wales. It begins with a brief historical account of how the Welsh language has been marginalised in Wales during the last six centuries, to the extent that it has been one of the 5000 languages reputedly in danger of dying out during the 21st century (Krauss, 1995). Next, arguments about the importance of language are highlighted and considered with reference to two exemplar settings in Wales: mental health settings and counselling settings. The extent and current nature of international and national legal rights provided to Welsh language speakers are then considered. Following on from this, and drawing upon a range of secondary research sources, the paper then explores the scope and adequacy of Welsh language services in health and social care in Wales. Four interrelated reasons why the evidence shows that language provision across a range of such settings in Wales is inadequate are explored. It is suggested that the laws related to language rights are inadequate, that bilingualism is poorly understood and that prejudice towards the Welsh language continues to exist. However, it is also argued that the pragmatics of language choice are not especially compelling in the modern bilingual context of Wales. The paper explores whether there is the need for the health and social care sector to make further provision for the Welsh language in Wales. If further provision is to be

made, it must be based on a principle that accords indigenous languages a particular status. The paper concludes by considering the significance of accepting this principle and the implications for practice in the health and social care that would follow.

The Welsh language

Wales is the UK's largest territorially bound, historically situated linguistic minority group. In the 2001 UK population census, 20.5% of the Wales population (around 550 000 people) described themselves as able to speak Welsh (Office for Population Censuses and Surveys, 2003) Though a significant contemporary percentage of the population, this is a considerably smaller percentage than that reported as being able to speak Welsh in the 1911 census returns. At that time 43.5% of the population of Wales stated that they spoke Welsh (Commissioners of Inquiry into the State of Education in Wales, 1847). This decline can be attributed to deliberate attempts to rid Wales of the Welsh language. In 1542 Henry VIII decreed that Wales would be incorporated into England, and under the 'Statute of Wales' the Welsh language was dismissed and English became the only officially sanctioned language in Wales (Lewis, 1998).

As a result, those holding public office were not allowed to communicate in Welsh and so it became a language without official status, kept alive by Welsh language communities and chapels where the Bible was available in Welsh. Particularly destructive to the Welsh language thereafter was the exclusion of Welsh from the school curriculum from 1870 onwards. This followed from the report of the Commissioners of Inquiry into the State of Education in Wales in which it was stated 'The Welsh Language is a vast drawback to Wales and a manifold barrier to the moral progress and commercial prosperity of its people. It is not easy to over-estimate its evil effects' (Commissioners of Inquiry into the State of Education in Wales, 1847, p. 66).

The 1870 Education Act made no provision for the teaching of Welsh in Wales. In some Welsh schools, children caught speaking Welsh were required to wear a piece of wood with 'Welsh Not' inscribed upon it (Lewis, 1998). The child left wearing it at the end of the day would be punished. A state of diglossia was created in Wales whereby English came to be regarded as the language of progression and civilisation. There was, then, little benefit attached to learning and using the Welsh language and it increasingly became associated with unintelligence, immorality and barbarism.

According to May (2000) it is a worldwide phenomenon that languages have been marginalised in the process of building political and national cohesion within state boundaries. In some instances the drive

towards national homogeneity was underpinned by the discourses of racism. For example, Aboriginal peoples in Australia and Native Americans in the United States were subjected to policies aimed at national racial congruence (Baron, 1990). In contrast, Welsh speakers in Wales, along with linguistic minorities such as Basque speakers in Spain and Sami speakers in Norway, were subjected to policies aimed at cultural congruence (Rubin, 1968; Vik and Lars, 1993; May, 2000). A common experience to almost all indigenous linguistic minorities is that of their language and culture being assigned an inferior status, subordinate to the majority language and culture. Ensuing state policies consign the minority language to the informal sphere, and aim to remove the language from the educational sphere (May, 2000).

The significance of language

In 1956, Whorf suggested that the structure of particular languages influences the way that speakers of a language know themselves and the way that they understand the world around them. In his view each language has what in German is termed Sprachgefuhl, or speech feeling, that directs its speakers towards a particular way of thinking about the world and their place within it. A number of authors have argued that Whorf overstated the relevance of language in the construction of identity (Eastman, 1984; Coulmas, 1992; Bentahila and Davies, 1993). But while Fishman (1991) argues it is unlikely that any language contains world views that are unique and inaccessible in other languages, it is still possible that languages do contain customary ways of seeing things based on the historical and cultural influences on the language and its speakers because:

Language is much more than a means of communication. Not only does it carry a view of the environment, using the word in its proper inclusive sense, but through its vocabulary and its structure, through the associations generated by its literature, through the symbol which it is and the symbols which it transmits, it creates a distinctive identity which is at once a derivative of tradition and an expression of the present (Aitchison and Carter, 1994, p. 57).

For many first-language Welsh speakers a key aspect of their self is realised through the Welsh language and its associations. Language is primarily a communicative activity. Language ability varies between individuals and can change over the life course. A bilingual person who has ability in a second language is not automatically able to engage on an equal basis with first-language speakers of that language. Pugh and Jones (1999) demonstrated that, in the case of Welsh, some people were so immersed in Welsh during

their day-to-day lives that they had poor command of formal English. Some children and young people raised bilingually in Wales are monolingual Welsh for the first years of their lives, learning English only later in life. Thus, for many individuals, the Welsh language has a very practical significance. It is their primary medium for effective communication, and they feel less competent and less able to express their views in English.

Two examples illustrate the significance of language in the health and social care context.

Language and mental health

Historically, depersonalisation has been a feature of mental health service provision that has adversely affected service users' health and recovery. The work of Goffman (1963) and Rosenhan (1973) highlighted the importance of personalisation in any approach to recovery, because it emphasised respect for identity and individuality. If language is an essential component to identity, having to use a second language might lead to a greater sense of depersonalisation, and pose a threat to an individual's ontological security (Laing, 1965).

Within prevailing biologically orientated Kraepellian psychiatric discourses (Kraepelin devised the classificatory system that informs current psychiatric diagnoses), a firm diagnosis is usually only arrived at following an interview mediated through and by language. Counter antipsychiatric perspective writers such as Laing (1965) argue that mental health problems need to be understood as strategies that the person develops to live in an otherwise unliveable situation. Therefore, mental health workers need to make an attempt to enter into the patient's world or to see the situation from their point of view. Clearly dialogue and understanding are crucial and are mediated through language. Misdiagnosis or treatment could arise in those instances where effective communication is not possible. For Welsh speakers:

any treatment for mental illness involves bringing the patient back to his or herself and restoring the normal balance of the mind, [and so] it is hard to see how that can be achieved without first understanding the nature of the norm to which one is seeking to return. For the patient whose normality is a Welsh speaking one, treatment in English will not necessarily be appropriate or helpful (Misell, 2000, p. 26).

Language, rehabilitation and counselling

Language is the primary tool for addressing developmental and emotional problems through counselling. However, its potential may be undermined when a second language is used, and especially when the individual is experiencing feelings of anger, confusion, shame or despair. While such feelings can have a significant impact on first-language abilities, they may have a greater impact on second-language abilities (Davies, 1994).

Cognitive behavioural counselling is used in the field of drug misuse, offending and personal development in a range of settings. Cognitive behavioural approaches themselves are heavily dependent on the careful and appropriate use of language. From the cognitive behavioural perspective, the content of cognitions, that is the thoughts people have, becomes the primary focus for intervention. The ability to access and analyse, and consider alternatives to the self-instructional talk that underpins mental health problems might require considerable skills to access a person's primary language and language of thought.

The legal context

Indigenous minorities worldwide have experienced oppression. For a short while, assimilationist objectives towards linguistic minorities were endorsed at international level. The International Labour Organisations' 1957 Convention concerning the protection of indigenous and other tribal and semi-tribal populations in independent countries, for example, had an assimilationist tone (International Labour Organisation, 1957). However, since that time, a significant number of other United Nation declarations and instruments have addressed the issue of language and linguistic rights. The Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights, the Rights of Persons Belonging to National, Ethnic, Religious and Linguistic Minorities all, in some way, address the issue of respecting linguistic choices (www.un.org). In addition to this, within the European Union, the European Convention for the Protection of Human Rights and Fundamental Freedoms, the European Charter for Regional or Minority Languages, the Framework Convention for the Protection of National Minorities and the European Convention on Nationality place further expectations on member states in relation to respecting language minorities within their territorial borders (www. conventions.coe.int).

These declarations have been made in the context of the breakdown of old world orders and the activism about identity arising from this, from the development of a rights consciousness, and fears about the spread of the same ethno-linguistic conflicts as have occurred in the former Yugoslavia and Soviet Union (Kymlicka, 2002). In addition to this there has been the growing recognition that assimilationist policies have not worked and indeed, in some cases, have

exacerbated ethnic and linguistic tensions, and that societies have become increasingly multicultural. Democracies have therefore felt the need to 'search for a model of citizenship that can build common civic identities while simultaneously affirming cultural diversity' (Kymlicka, 2002, p. 13). As a result many linguistic minorities worldwide have been able to secure some national recognition of their linguistic needs, either in written constitutions or in laws, e.g. Mirandese in Portugal, Frisian in the Netherlands, Basque in Spain, Quechua in Peru and Welsh speakers in Wales (Kymlicka, 2002).

However, there was no significant legislation directly applicable in Wales until the Welsh Language Act of 1993. Under this Act the Welsh language ban of the 16th century was repealed and some concrete duties were placed upon public bodies to provide for Welsh speakers. Public bodies were required to draw up language plans to give effect to the key principles contained within the 1993 Welsh Language Act that in public administration in Wales, the English and the Welsh languages should be treated on the basis of equality. The 1993 Welsh Language Act forms the centrepiece of the UK Government's five-yearly reports to the Council of Europe on its action in respect of the Framework Convention for the Protection of National Minorities. For this reason, and because of the asserted significance of language, the nature of the provision made for Welsh speakers in the health and social care sector in Wales warrants further study.

Health and social care in Wales

Since the advent of the Welsh Language Act, the range of Welsh public bodies that have sought to provide services in Welsh has increased, but the lack of opportunities to use the Welsh language continues to be reported in a range of health and social care contexts. Several authors have explored Welsh language provision in the health services. For example, Dobson (1996) argued that Welsh language provision within general practitioner (GP) services was inadequate, because there was a significant lack of Welsh-speaking GPs in Wales. Roberts et al (2004), in a study of awareness of Welsh language among healthcare workers in Wales, also found that Welsh speakers were few in number and Welsh language services were restricted. This research also found that a culture of indifference prevailed towards the Welsh language among a significant proportion of service providers. Misell (2000) explored the scope, nature and adequacy of Welsh language provision in the NHS in Wales. This study included 29 key institutions, one-to-one interviews with service providers, and a larger survey with NHS users. The research concluded that the provision of services in the Welsh language was inadequate and that in the areas of mental health, services for people with learning disabilities, services for elderly people and services for young children, Welsh language services seemed particularly poorly developed.

In the social care context, a case study of Welsh language facilities in care homes for the elderly found provision to be very variable across the country (Cwmni Iaith, 2002). Drawing on evidence obtained from studies in a range of social care contexts, Davies (1999) hypothesised that psychological services provided in the English language to Welsh language speakers were inadequate. In a study of speech and language therapy services in education in England and Wales, bilingual service provision, as measured by staff to child ratio in Wales, was found to be limited (Lindsay et al, 2002). A survey of Welsh language provision within the guardian ad litum service in Wales suggested that the present capacity to match Welsh-speaking children with Welshspeaking guardians was inadequate (Pugh and Jones, 1999).

There is evidence that, in a range of care settings, there is a lack of staff who are trained or proficient in the Welsh language. A qualitative ethnographic study of the use of minority languages within midwifery education in North Wales (Welsh), Barcelona (Catalan) and Western Ireland (Irish) indicates that use of minority languages within education varies considerably and is dependent upon supportive organisational policies, teaching and learning resources and IT software (Roberts and Paden, 2000). Drakeford and Lynn (1999) and Davies (1994) highlighted the need for upgrading of language teaching on social work courses in Wales and, in the probation service, Madoc-Jones and Buchanan (2003) discovered that few probation staff are Welsh speaking, and that services in Welsh for those interacting with criminal justice services are very limited (Madoc-Jones and Buchanan, 2004).

Explaining service levels

Four factors may explain the current low level of service provision for Welsh speakers: legal inadequacies, ignorance about the complexities of bilingualism, continuing prejudice, and the basis of language claims. Each of these factors is discussed below with a view to developing some scope for understanding the current situation and considering what, if anything, might be done to effect any changes.

Legal inadequacies

The numerous international human rights declarations follow the Western philosophical convention

Inadequacies in linguistic provision may also arise

of promoting negative freedoms. Rights are primarily conceived in passive terms, as freedom from interference, as opposed to proactive provision of resources. Although some international declarations do refer to a positive obligation to promote language rights, there has always been what Alston (1999, p. 10) describes as 'a powerful presumption that community political activity in the field of human rights should be largely confined to negative prohibitions rather than positive initiatives'. This passive approach to rights becomes problematic in relation to language above all other rights, because as Kymlicka and Patten (2003) note, when a government tries to govern it must of necessity do so in one language or another. The state therefore implicitly and positively promotes the status and rights of one language over others. According other language groups some passive freedoms to use their language will not then address the diglossia that is created. More positive promotion of that language and rights of use would be required to equalise the status of all the national languages.

In the UK context, the Welsh Language Act 1993 required public bodies to make provision for Welsh speakers. To this extent it is positive in its orientation. However, a clause in the Act stated that the provision of Welsh language resources was only necessary as far as this was 'appropriate under the circumstances and is reasonably practicable' (Welsh Language Act 1993, section 5(2)). Significantly the Act placed a duty on institutions to provide services in Welsh when it was requested, rather than granting rights to Welsh speakers to such services. To that extent, therefore, it followed the traditional, inadequate and negative approach to promoting equal opportunities.

Ignorance regarding the complexity of bilingualism

The law allows for Welsh language services to be more positively promoted in Wales. However, many services are available to Welsh speakers only on request. Demanding a service in the Welsh language may require a service user to assert an identity that Welsh people have for centuries been under pressure to relinquish. In the context of poor service provision and prejudice, it may require them to 'make a nuisance of themselves' in circumstances in the health and social care context where they are likely to want to create a favourable impression in order to access or receive services. In some instances language rights exist in principle in Wales (*de jure* rights), but because of the context in which rights have to be asserted, they might be said not to exist in fact (*de facto* rights).

Continuing prejudice

from prejudice. There is evidence in the press and the media of continuing denigration of Welsh people, their language and culture. For example, AA Gill commented in the Sunday Times 'We all know the Welsh are loquacious dissemblers, immoral liars, stunted, bigoted, dark, ugly, pugnacious little trolls' (Sunday Times, 14 September 1997). Similarly, Polly Toynbee, a respected journalist, described Welsh as 'that useless language' (Radio Times 23-29 September 1995) and then had her Reporter of the Year (emeritus) status confirmed. In 2000 Jeremy Clarkson microwaved a map of Wales on his televised talk show Clarkson, arguing the country and its people were backward and of no value (BBC2, 26 and 29 October 2000). In 2001 Anne Robinson, a popular television quiz show host referring to the Welsh people, asked 'What are they for?' before proceeding to question the nature and purpose of the Welsh language (BBC2, Room 101, 5 March 2001). As a result of her comments there was some media debate as to whether derogatory comments towards the Welsh language constituted a significant form of oppression. Blackledge (2002), commenting on this debate, observed that it was conducted in demeaning and derogatory terms within the UK mass media. The literature on equality and discrimination argues against constructing hierarchies of oppression, yet it is possible, in light of these media examples, that such oppression exists and is directed towards Welsh language and culture. In an age where overt racist comments, for example, would be heavily censured, oppressive comments towards the Welsh language were tolerated even in the face of negative reaction to them. One reason that might explain this is that language is seen as a disembodied entity outside of the speaker and not a key part of the person. In essence this would amount to a refutation of the language and identity argument. Anne Robinson's comments, for example, attracted some critical commentary, yet the BBC has repeated the programme unedited on several occasions. While there are numerous examples of positive attitudes towards language diversity, such as teletext services, subtitled productions and the financing of Welsh language programmes such as Pobol y cwm, the negative comments and the limited response to them may represent contemporary outward expression of the institutionalised oppressive ideologies that have been part of the systematic demise of the Welsh language, culture and identity. Redress for oppression and discrimination in the

Redress for oppression and discrimination in the UK can only be sought under the Sex Discrimination Act of 1975 or the Race Relations Act 1976. However, this Act has left unclear the extent to which peoples of the different national entities – England, Wales and Scotland – constitute a protected ethnic group and

therefore what protections language communities might enjoy under the Act. This lack of clarity was not addressed by the 2000 Race Relations (Amendment) Act which has left unclear the extent to which peoples of the different national entities - England, Wales and Scotland constitute protected ethnic groups, and therefore what protections language communities might enjoy under the Act. In Gwynedd County Council v. Jones [1986] ICR 833, the Employment Appeal Tribunal refused to recognise any distinction between Welsh-speaking Welsh people and English-monoglot Welsh people under the Race Relations Act. Recent publications from the Human Rights and Equality Commission to replace the existing Commission for Racial Equality do not refer to linguistic discrimination as being within the new agency's concerns.

The basis of language claims

A further reason for inadequate health and social care provision for Welsh speakers is that the pragmatics of making language choices more widely available have never been especially compelling to service providers or majority language speakers. Language has been associated with identity, but Wales and England have shared similar cultural paths over the last few centuries. Given this common history it is difficult to sustain an argument that the Welsh language contains a separate understanding of reality than the English language and a separate identity for Welsh speakers that cannot be accessed by them in the English language. Added to this, Welsh speakers are also a diverse group, and an individual's identity will be shaped by many additional factors such as class, race, sexuality, gender and religious affiliation. It is therefore not at all clear what practical relevance having to use the English language might have to most Welsh speakers in the health and social care context.

The significance of language in a 21st century bilingual context may be questioned further, given that many staff in health and social care contexts are now non-British nationals who do not have English as their first language. Communication difficulties can arise routinely in such circumstances, but they are unlikely to be insurmountable if additional attention is paid to the issue of understanding.

Wales is a bilingual country. The very definition of bilingualism involves the ability to speak two languages above a basic level. Apart perhaps from the very old or very young, those who lose capacity or have not learned speak English, it is likely that most Welsh speakers could discuss their affairs well enough in the English language, even if not as well as they might in Welsh. The 2001 census in Wales identified approximately 576 000 Welsh speakers aged three years or over (Office for Population Censuses and Surveys, 2003). The 447 000

people who could speak, read and write Welsh were very likely to be Welsh first-language speakers, but it is difficult to ascertain how many of these individuals would state, on a pragmatic level, that they would be significantly disadvantaged if they could not communicate with service providers using the Welsh language. Some may truly be disadvantaged but it is difficult to quantify the significance of this disadvantage when what is really being asserted is that they might be less advantaged than they would have been in the Welsh language. It is important to note that a Welsh speaker using their second language may still, perhaps as a virtue of the additional cognitive and linguistic abilities that are increasingly said to be associated with bilingualism, be speaking their second language at a more proficient level than many first-language speakers of that language (Giles and St Clair, 1979).

Even with the most sensitive of service provision, the take-up of services in the Welsh language might always be low. Given the historical marginalisation of the Welsh language, many Welsh language users may feel they lack the proficiency in formal settings to conduct their affairs in Welsh. The low take-up of court services in the Welsh language, for example, (Lewis, 1998), may reflect the lack of formal legal language that Welsh speakers possess, as a result of reduced opportunities to develop such proficiency, as opposed to any real disablement of choice.

Individuals may very well agree with the goals of language revitalisation, but the extent to which they see this as being a concern of health and social care service providers may vary. It is possible that for several reasons the case for extended language provision has not been made to service providers. Services may be restricted and practices piecemeal, because of the cultural similarities between Welsh and English speakers, because most Welsh speakers speak English well enough, because providing bilingual services is expensive and because there is unlikely to be high demand for Welsh language services. For those wishing to promote the use of minority languages this should be a matter of concern. As May has pointed out (2000), supporters of minority languages must address the issue of how a language can gain sufficient support from majority language speakers for it to be promoted.

Implications for developing service provision

In light of the preceding comments, the first question that arises in relation to the future direction of health and social care service provision in respect of language in Wales is whether, despite the research, language provision is indeed inadequate. Given that the authors have argued that the pragmatics of providing Welsh language services are not that compelling, it might be concluded there is no need.

However, it is important to identify that a certain principle, as well as pragmatics is integral to and underlying any debate about minority language. The recognition now afforded indigenous minority languages has largely been secured within a discourse that has stressed a particular significance to indigenous languages. In many respects, this principle is irreducible and founded on the particular significance inherently accorded to indigeny and inherently accorded to linguistic heterogeneity, in much the same way as biodiversity is valued and attempts are made to save endangered species. Indigenous languages claim a status that is different from the status claimed by linguistic minorities that exist as a result of migration. It derives from the fact that indigenous languages can claim a heritage within a nation that predates or coincides with the formation of the modern state and its majority language. In the case of migrated languages, a language will be in the minority due to the relative numbers of speakers that happen to migrate into a country. In the case of indigenous languages, however, the language is often in the minority as a result of a long-standing systematic and institutionalised campaign of oppression accompanying colonisation. Migrating peoples often embrace language change as a necessary or even positive developmental aspect of their migration to identify with their adopted nations. Indigenous peoples worldwide, on the other hand, experience the loss of opportunities to use their language as a continuing act of strategic and deliberate linguicide. If the principle of privileging indigeny, in the same way as the majority language and above other migrated languages, is accepted, it is necessary to consider what actions should follow. Below the authors outline what four of these might be:

- actions to protect and institutionalise the heritage of the minority language by embedding its use within the indigenous country and its institutions
- the need to make language choice a practical (*de facto*) reality
- the need to establish linguistic rights
- the need to effectively legislate against prejudice.

Conclusions

In 1998, the Government of Wales Act was passed allowing secondary legislative powers to be formally transferred from the UK Government to the devolved administration in Wales on 1 July 1999. A number of policies have followed that have sought to strengthen the Welsh language and rights of access to Welsh

language resources. The Welsh Assembly Government for example launched a National Action Plan for a Bilingual Wales called Iaith Pawb (everybody's language) in 2003, with the wide-reaching aim of supporting and building upon language use among businesses, communities and individuals (Welsh Assembly Government, 2003). No firm evidence is available after so short a period to evaluate the impact of devolution or Iaith Pawb. However, at the very least, enabling forces are unleashed by such documents which might be seized at this time to promote linguistically sensitive practices within health and social care settings in Wales.

The authors argue that on the principled grounds of maintaining and respecting human diversity, as well as on pragmatic grounds to accommodate those who favour using the Welsh language, the health and social care sector in Wales should more fully embrace the principle that accords a particular status to the Welsh language, and consider what actions should thereby appropriately follow. Based upon an adaptation of Davies' (1994) suggestions for anti-oppressive practice in Wales, the following recommendations are proposed for policy and practice. These principles will also have wider applicability for indigenous linguistic communities worldwide.

- 1 Language prejudice and discrimination should be treated in the same way as other forms of discrimination.
- 2 People in Wales have the right to engage with all services, including the health and social care system, through the medium of Welsh or English.
- 3 This will require all services to be available in Welsh and English at the point of contact.
- 4 This will necessitate that all front-line staff speak Welsh and English.
- 5 As part of the process of working towards this end, all health and social care staff in Wales should be provided with opportunities to develop their Welsh language skills.
- 6 Education/training for health and social care justice staff should be available fully bilingually.
- 7 Public media (such as video, newspapers, leaflets, magazines and posters) in health and social care agencies in Wales must reflect the bilingual nature and the equal status given to English and Welsh.

CONFLICTS OF INTEREST

None.

REFERENCES

Aitchison J and Carter H (1994) A Geography of the Welsh Language, 1961–1991. Aberystwyth: University of Wales Press.

- Alston P (1999) *The EU and Human Rights*. Oxford: Oxford University Press.
- Baron D (1990) The English Only Question: an official language for Americans? New Haven: Yale University Press.
- Bentahila A and Davies E (1993) Language revival: restoration or transformation? *Journal of Multilingual and Multicultural Development* 14:355–74.
- Blackledge A (2002) What sort of people can look at a chicken and think dofednod?: language, ideology and nationalism in public discourse. *Multilingua* 21:197–226.
- Commissioners of Inquiry into the State of Education in Wales (1847) Part II. Brecknock, Cardigan, Radnor, and Monmouth, London (871 XXVII). London: Great Britain Parliament Sessional Papers 1847.
- Coulmas F (1992) Language and Economy. Oxford: Blackwell. Cwmni Iaith (2002) An Overview of the Welsh Language Provision in Care Homes for Older People in Wales' Eight Most Welsh-Speaking Counties. Cardiff: Cwmni Iaith.
- Davies E (1994) They All Speak English Anyway. Cardiff: CCETSW.
- Davies B (1999) The Inappropriateness of the Criminal Justice System Indigenous Australian Criminological Perspective. Paper presented at the 3rd National Outlook Symposium on Crime in Australia, Mapping the Boundaries of Australia's Criminal Justice System, convened by the Australian Institute of Criminology, Canberra, 22–23 March 1999.
- Dobson R (1996) Doctors in Wales should learn Welsh. British Medical Journal 313:445–8.
- Drakeford M and Lynn E (1999) Becoming a social worker in Wales: language, teaching and inclusivity in professional training. *International Journal of Inclusive Education* 3:151–65.
- Eastman C (1984) Language, ethnic identity and change. In: Edwards J (ed.) *Linguistic Minorities, Policies and Pluralism.* London: Academic Press, pp. 259–76.
- Fishman J (1991) Reversing Language Shift. Clevedon: Multilingual Matters.
- Giles H and St Clair RN (1979) Language and Social Psychology. Oxford: Blackwell.
- Goffman E (1963) Stigma–Notes on the Management of Spoiled Identity. Englewood Cliffs, NJ: Prentice Hall.
- International Labour Organisation (ILO) (1957) International Labour Organisation. Convention No 107. Convention Concerning the Protection of Indigenous and Other Tribal and Semi-Tribal Populations in Independent Countries. Geneva: ILO.
- Krauss M (1995) Language loss in Alaska, the United States and the World. *Alaska Humanities Forum* 6:2–5.
- Kymlicka W (2002) Multiculturalism and minority rights: West and East. *Journal of Ethnopolitics and Minority Issues in Europe* 4:1–27.
- Kymlicka W and Patten A (2003) Language Rights and Political Theory. Oxford: Oxford University Press.
- Laing RD (1965) *The Divided Self.* Harmondsworth: Penguin.

- Lewis R (1998) Cyfiawnder Dwyieithog: bilingual justice. Llandysul: Gomer.
- Lindsay G, Soloff N, Law J et al (2002) Speech and language therapy services to education in England and Wales.

 International Journal of Language and Communication Disorders 37:273–88.
- Madoc-Jones I and Buchanan J (2003) Welsh language, identity and probation practice: the context for change. *Probation Journal* 50:225–38.
- Madoc-Jones I and Buchanan J (2004) Indigenous people, language and criminal justice: the experience of first language Welsh speakers in Wales. *Criminal Justice Studies:* A Critical Journal of Crime, Law and Society 17:353–67.
- May S (2000) Uncommon languages: the challenges and possibilities of minority language rights. *Journal of Multilingual and Multicultural Development* 21:366–85.
- Misell A (2000) Welsh in the Health Service: the scope, nature and adequacy of Welsh language provision in the NHS in Wales. Cardiff: Welsh Consumer Council.
- Pugh R and Jones E (1999) Language and Practice: minority language provision within the guardian ad litum service. *British Journal of Social Work* 29:529–45.
- Roberts G and Paden L (2000) Identifying the factors influencing minority language use in health care education settings: a European perspective. *Journal of Advanced Nursing* 32:75–83.
- Roberts G, Irvine F, Jones P et al (2004) Report of a Study of Welsh Language Awareness in Healthcare Provision in Wales. Bangor: University of Wales.
- Rosenhan DL (1973) On being sane in insane places. <u>Science</u> 179:365–9.
- Rubin J (1968) *National Bilingualism in Paraguay*. den Haag, Netherlands: Mouton.
- Vik R and Lars S (1993) The Nordic Languages: their status and interrelations. Oslo: Novus Press.
- Welsh Assembly Government (2003) *Iaith Pawb: a national action plan for a bilingual Wales*. Cardiff: Welsh Assembly Government.
- Whorf BL (1956) A linguistic consideration of thinking in primitive communities. In: Carroll J (ed.) *Language, Thought and Reality: Selected writings of Benjamin Lee Whorf.* Cambridge, MA: MIT Press, pp. 65–86.

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