

PERSON-CENTRED CARE

LANGUAGE MANAGEMENT

IN KABIA RESIDENTIAL HOMES

AND DAY CENTRES FOR THE

ELDERLY



Kabia



Gipuzkoako Foru Aldundia
Diputatu Nagusia
Hizkuntza Berdintasuneko Zuzendaritza Nagusia

TABLE OF CONTENTS:

Introduction.....	1
First language, a need.....	3
First language and affective relationships	5
Relationship between the first language and dementia	6
First language and diagnosis	7
Balance of power	9
Language planning.....	10
Conclusions	11

GUARANTEEING CARE AND COMMUNICATION
IN THE SAME
LANGUAGE TO THE ELDERLY
LIVING WITH GREATER AUTONOMY AND DIGNITY

LANGUAGE MANAGEMENT IN KABIA RESIDENTIAL HOMES AND DAY CENTRES FOR THE ELDERLY

Introduction

Kabia's mission is to provide comprehensive and personalised care to users of the residential homes and day centres for the elderly, which makes it essential to cater to their needs and ensure their rights. Person centred quality care and attention are the centre of Kabia's activity which cannot be understood without taking linguistic equality into consideration, since it is essential for many people to receive the assistance they need, in their first language.

Gipuzkoa has two official languages, therefore users have the right to be attended in either of the two. However, the goal is not only to meet standard legal and professional requirements, but to improve the quality of care for users and offer a personalised public service in order to meet their needs and desires.

Undoubtedly, the needs of Kabia's users are quite varied, communication being one of the most important. Therefore, communicating is essential in order to meet their own needs and to live a dignified and healthy life; not only to be able to express what's happening to each one of them, but also for interacting, socialising and understanding the people around them. It is evident, therefore, that communication is a variable that should be placed in the centre of the caring process, along with communication, namely language.

Actually, languages may completely condition communication between people and, more so, in a territory where two languages are mainly spoken. Not all the population of Gipuzkoa masters Basque and Spanish equally, and it is quite common to find people who get along better in one language than in the other. Hence, what is more common, natural and effective for these people is to communicate in that language and, therefore, their wellbeing is also associated to it.

In fact, the same occurs among Kabia users, while for many Spanish is their first language, for many others it is Basque. Therefore, both need the first language to build relationships and fully integrate into their environment and feel comfortable and satisfied.

Therefore, Kabia is under the obligation of respecting the linguistic choice of all its users and take the necessary steps in order to do so. Because, if Kabia's goal is to provide quality care and people centred attention, it should necessarily bear in mind their

linguistic needs and rights; as we shall see, there is a direct relationship between language and the quality of care.

CARE AND COMMUNICATION

Guaranteeing care and communication in the same language enables elderly persons to be more autonomous and live with dignity.

First language, a need

The relationship of each user with Basque is unique and there are people with very different linguistic profiles in the Kabia residential homes and day centres. From users who only communicate in Spanish to those who have spent their whole life speaking Basque; all of these people are Kabia users and, therefore, their rights and needs must be met.

Today, all the people who work in Kabia residential homes –care providers, social workers, instructors, nursing staff, ...– speak Spanish and, therefore, the rights and needs of those who want to communicate in Spanish are met. But, what about the users who need to communicate in Basque?

The need to communicate in Basque depends on personal communication skills and the importance this language has for that person. This means that users may present very different situations and needs in the field of communication, and it is Kabia's responsibility to endeavour to provide them with an answer.

In some cases, speaking in Basque may be a question of willingness. Despite being Basque-speakers, there are people who have no difficulty expressing themselves in Spanish, which places us in the field of the user's willingness or desire. Undoubtedly, Kabia staff always has to respect a user's linguistic choice, and whoever wishes to communicate in Basque has the right to receive all services in this language.

However, what happens with those people who need Basque to communicate well, easily and naturally? There are many people who get along better in Basque than in Spanish and being able to communicate in Basque for these people is not a matter of willingness, but of necessity. Having to speak in Spanish may be an obstacle for those people who have less capacity to communicate in Spanish and, therefore, they may encounter difficulties coping efficiently with all their day-to-day situations:

socialising, being able to communicate with care staff, communicating what is wrong with them to medical and nursing staff... In these cases, it's not a matter of not having the skills to communicate, but of not having the skills to do it well or how they would like.

RISKS

Not being able to communicate well may lead to isolation, frustration or depression; more so, if we consider that elderly persons may also suffer from other illnesses. Hence the importance of receiving care in one's own language.

TO EACH THEIR OWN LANGUAGE

Offering Basque-speaking users the possibility to express themselves in Basque with care staff and other professionals, helps them to avoid frustration, lack of self-esteem, or the insecurity caused by not speaking fluent Spanish.

Therefore, over time and when this inability to communicate well repeats itself time and again, it may lead to frustration, insecurity, anxiety isolation, sadness, depression ..., and these adverse effects generally affect health. Particularly, if we bear in mind that these users may have other illnesses and disabilities.

It is therefore undeniable that limitations in communication may have adverse consequences for health, and, to avoid this, it is very important to be aware of the impact a language can have. In fact, the extent to which successful communication is related to language and after detecting that this language may be an obstacle, steps may be taken to overcome these communication obstacles and avoid the adverse effects they may cause on people's health. In other words, and extrapolating this to the reality of Basque-speaking users, it may be enough to provide our service in Basque and reply also in Basque to the needs they encounter in order to avoid the possible frustration, lack of self-esteem, insecurity ... brought on by linguistic limitations.

Language, therefore, plays an important role in the care of the elderly, since it is clear that, when language needs are not met, situations emerge which, otherwise, could be easily overcome or avoided.

In this respect, it must be taken into consideration that Kabia endeavours to provide the best possible response to the society of Gipuzkoa and, therefore, the entity must take into account the diversity of the territory. The relationship between communication and the first language is so cross-sectional and important, that Kabia also bears in mind other non-official languages in Gipuzkoa and, when speakers of languages other than Basque or Spanish enter, their communication needs are identified and means are employed to meet these needs.

NON-OFFICIAL LANGUAGES OF GIPUZKOA

The relationship between the first language and communication is so direct, that even when speakers of other non-official languages in Gipuzkoa enter Kabia, the organization addresses their communication needs.

First language and affective relationships

In order to delve a little more into this last idea, it should be taken into account that it is very important for the users of the centres and residential homes to have positive dynamics and experiences with their environment, with the rest of the users, with the care and health staff..., because this brings peace of mind, emotional balance and wellbeing. In this respect, as well, language takes on special relevance, since, beyond the mere ability to communicate, language is very important at an affective level, because it is essential for the complete development of affectivity.

The proximity, love and affection conveyed by language to every person directly affects self-esteem, confidence and security it produces them and is, therefore, intimately related to their quality of life.

Hence, it is essential for users to be able to express humour, sadness, joy, anger... in the language they choose, since it is very common for them to need a specific language in order to fully develop their personality. Therefore, the use of this language, beyond mere communication, is a variable which may have an influence at an emotional level.

This is why, in order to meet these affective needs, the language needs of users should be taken into consideration.

PROXIMITY AND SUPPORT

The users in the centres are elderly persons, and over time many lose mental faculties. For elder Basque-speaking persons this support is considerably strengthened by using Basque.

AFFECTIVE NEEDS

Elderly persons calm down noticeably when they receive comprehensive care in their own language, and this gives family members a greater sense of security and peace of mind.

Relationship between the first language and dementia

Users are elder persons who, over the years, have impaired cognitive abilities. Mental illness or dementia affects them progressively and they go through many different stages. However, albeit little by little, along with their cognitive abilities, many of these people lose their language skills and this loss is closely related to communicative competence.

On this point, it should be taken into account that all the users in Kabia who are Basque-speakers are bilingual and know Basque and Spanish to a greater or lesser extent. In addition, the first language of many of them is Basque, a fundamental issue when analysing the loss of communicative and language capacity brought on by dementia.

DEMENTIA AND BASQUE

Many people who suffer from dementia are only capable of communicating through the first language they learnt in their childhood, and others only understand Basque. It is a major limitation for these people to express themselves in Spanish.

Although multilingual people are capable of communicating in different languages, they do not lose the ability to express themselves in one or the other equally. The communicating capacity in the second or third language is lost before the first language, which is, as a rule, the one that is more deeply rooted and is maintained over time. Moreover, in some cases, when the communication skills are lost in all languages, the last thing that is lost are the communication or comprehension skills of the first language.

This means that many Kabia Basque-speaking users who have dementia may have real communication and/or comprehension difficulties in Spanish, and having to express themselves in Spanish may be a difficult limitation to overcome. So, in these cases, the lack of care in Basque may cause a risk of total isolation for users, with direct consequences for their health: depression, insecurity, lack of self-esteem...

Therefore, also in these cases, Basque is an essential variable for improving dignity, the quality of care and the living conditions of users. Being able to communicate with these people is one of the most effective tools to meet their language needs and, without doubt, another one of the keys to help identify their other needs.

First language and diagnosis

For users to receive quality care, it is important this care is also provided in Basque, we have already seen that otherwise, it may have adverse consequences for the health of these people. Furthermore, the influence of language is perceived from the very diagnosis itself and the language variable should be taken into account from the outset.

Accurate diagnoses are essential in order to provide good care for any person and, to do this, it is vital for the users to be able to express their state, symptoms, feelings, mood... as detailed as possible. The care provided differs according to the information collected, it is therefore important for the communication to be adequate and effective between users and health staff. Obviously, this communication is held in a specific language and it is important for users and staff to know it; otherwise, it will be unlikely for them to understand each other.

However, not all people have the same ability to communicate in both languages, and there is the risk that users have to communicate in the language they do not speak as well. No doubt, this directly affects the information received and the diagnosis.

In the case of dementia, for example, the person's poor communication may be due to dementia, but also to a lack of communicative capacity in that language, which may pose the risk of a wrong diagnosis or a delay of the correct diagnosis.

According to a study conducted in Wales, language is very important in dementia diagnosis. People with dementia who handle themselves better in Gaelic are diagnosed, on average, three years later than English monolingual people. What underlies these cases, fundamentally, is the supremacy of English, since some of the symptoms taken into account when detecting dementia are measured according to communications skills and, in many cases, these measurements are conducted in English.

Therefore, in the case of people who handle themselves better in Gaelic, these symptoms remain half hidden, as this lack of communicative capacity is attributed to the difficulty to communicate in English and not to the symptoms of dementia.¹

IMPORTANCE OF THE DIAGNOSIS

In order to take good care of any user it is essential to make accurate diagnoses and, to do this, it is vital for the elder persons to express in detail their possible symptoms, mood, situation... they present. This is much easier for them in their first language.

¹ Alzheimer's Society Cymru; Welsh Language Commissioner (2020): *Welsh Speakers' Dementia Care. United Against Dementia.*

Consequently, this possible delay in the diagnosis has an influence when prescribing treatment and its effectiveness. Evidence shows the importance of language in the diagnosis and evaluation of dementia, and the importance of language is undeniable when conducting accurate and effective early diagnoses. Therefore, patients should be given the possibility of expressing themselves in their first language, since, if they do not, there is a risk of losing information which may be relevant y lead to situations with otherwise could be avoided.

Balance of power

There is also another variable to keep in mind, such as the balance of power. Due to the structure, management and there tends to be an imbalance in the different role of health staff and users of day centres and residential homes, generally speaking, health staff have a dominant position as regards users. While it is true that not all users act the same way in this situation, it is possible that situations of dependency may arise which make it difficult for the users to identify and make their language needs visible. If we also add health issues and dementia, it could be more difficult for users to explicitly express their wish to receive the service in Basque.

Hence, it is the responsibility of the entity to detect these situations and, without the need of an express request, anticipate these issues and undertake an appropriate language planning.

Language planning

In order to properly manage the use of languages, efficient and global language planning is required, in which actors at many different levels participate, from territorial rules to local measures, and in which the institutions in charge of caring for these people should play the leading role.

In the extent that the role of the entity is meeting the needs and rights of users, language management should also be taken into consideration, since the performance of the service in one language or the other may be key.

This is why, the Kabia organisation should take steps so that all its public services can also be provided in Basque and promote and consolidate these policies over time. By doing so, as well as requiring minimum linguistic knowledge for working places, language planning must drive training or one-off measures, such as calls for exams agreed with H.A.B.E.

When quality care is offered in residential homes and day centres, it is necessary they work with their own staff and also with hired staff, and it is very important to remember the linguistic variable with both. Short, medium and long-term measures must be promoted, and the goal always being person-centred and quality care.

Ultimately, all this planning is based on users' rights and needs, including language, and what a quality offer should necessarily bear in mind: measures and policies to meet the rights and needs of all users.

ARANTZA LEKUONA ZABALA

- MANAGER OF KABIA -

Kabia's mission is to provide comprehensive and personalised care for the users of residential homes and day centres for elder persons.

In order to do this, it is essential to attend to their needs professionally and guarantee their rights.

In order to do so, quality and person-centred care is at the core of Kabia's policies, which cannot be understood without taking into account linguistic equality.

For many users, it is vital they receive the care they need in their first language, which in many cases is Basque.

Conclusions

Language is fully associated with users' needs, rights and care, so language is a variable which should be placed in the centre of the management model. A favourable linguistic context offers help and benefits to users, given that being able to communicate in the language they choose will make them feel more secure, comfortable, relaxed, healthy, more satisfied at an affective level...

COMMUNICATION AND NEED

Kabia users' needs are varied, and communication is among the most important.

Communication is essential for meeting the needs of users and maintaining a healthy life as possible. Consequently, communication is a substantial variable in the care process and, therefore, so is language.

In the case of people with good cognitive and communicative skills, the possibility of expressing themselves in their own language and be able to effectively respond to the day-to-day situations they encounter, will have a positive impact on their health. It will affect their self-esteem, personal evaluation, social life, relationships with care staff..., and meeting all these aspects is important in order to live a dignified quality life.

In the case of persons with impaired communication skills, language may be a key variable for conducting an early diagnosis of what befalls users and being able to offer them the personalised care they need.

LINGUISTIC GUARANTEE

It is most natural and effective for many elder persons to speak in Basque. They use this language to communicate; not only to socialise with other users, but also to speak to care and nursing staff and other professionals. Therefore, Kabia must guarantee users the possibility of using the language they need.

Therefore, it is no coincidence that Kabia has also placed the linguistic variable in the centre of its policies. Language management is directly related to quality and person-centred care making it strategic to implement an appropriate language policy management, which will lead to a better provision of service. In this respect, offering service in Basque brings benefits to Basque-speaking users on the short and long term, since their language needs are guaranteed and, at the same time, overcoming the adverse consequences and linguistic barriers which could arise from language.

Ultimately, the language management implemented in the residential homes has a direct relationship with the security, dignity and good caring of users, therefore the linguistic variable should be located in the centre of the entity, as a transversal line which encompasses all fields. Quality and person-centred care must include linguistic equality.

