

OVERCOMING BARRIERS BETWEEN RESEARCHERS, PRACTITIONERS AND COMMUNITIES

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Wales, like Canada, is a bilingual nation where the Welsh language is an important part of its national identity (Welsh Government, 2012a) and legislative framework (Council of Europe, 1992; Welsh Language Measure, 2011). This has implications for the delivery of public sector services, particularly in the context of health and social care, where responding to the language choice and needs of service users is fundamental to quality healthcare provision (Welsh Government, 2012b; 2012c).

Along with the revitalisation of many other minority or lesser-used languages across the world, the Welsh language has gained increasing status over recent years (Williams, 2000); and there is mounting evidence (Robert 1994; Thomas, 1998; Misell, 2000; Roberts *et al.*, 2004, 2007; Madoc-Jones and Dubberley, 2005; Irvine *et al.*, 2006, 2008; Prys, 2010; Iaith, 2012; Owen and Morris, 2012); and a strengthening legislative and policy drive (Welsh Government, 2011; 2012b) to support bilingual healthcare services. As a result, the Welsh Government has introduced a new strategic framework for Welsh language services in healthcare (Welsh Government 2012c); and established the ‘Coleg Cymraeg Cenedlaethol’ which supports Welsh medium provision in healthcare education and professional development (Coleg Cymraeg Cenedlaethol, 2011). As for education, health research is also critical in improving the quality of our health services in Wales. The National Institute for Social Care and Health Research Clinical Research Centre (NISCHR CRC), through its Language Awareness Infrastructure Support Service (LLAIS), is instrumental in extending the evidence base on language appropriate practice (Roberts and Irvine, 2006; Roberts and Irvine, 2007). Moreover, through embracing language sensitivity within the process of health research, it facilitates enhanced access and engagement for research participants in their language of need; thus striving to ensure that research findings are of greater relevance and rigour to inform policy and practice for the bilingual context (Welsh Assembly Government, 2009; MHRA, 2012).

Nevertheless, despite such rhetoric, the evidence-base to inform *organisational planning* on language awareness is complex and fragmented. Thus, further work is required to translate our knowledge and understanding to provide more effective and sensitive healthcare services; as well as to strengthen the bilingual healthcare system in Wales. A recurring theme that emerges from this work is the way that individual, organisational and contextual factors all impact on language appropriate practice. Thus, implementing the ‘active offer’ principle inherent in our new strategic framework for Welsh language healthcare services (Welsh Government, 2012c) means that organisations will inevitably need to adopt a whole-system approach that takes account of individual perspectives as well as contextual and organisational barriers and facilitators (Pratt *et al.*, 2005). Whilst research may be focussed at all these levels to provide evidence of what works best, at the same time, we need to engage with practitioners, managers and policy makers to enhance the way they receive and implement the evidence; and actively involve service users and communities in driving service improvements.

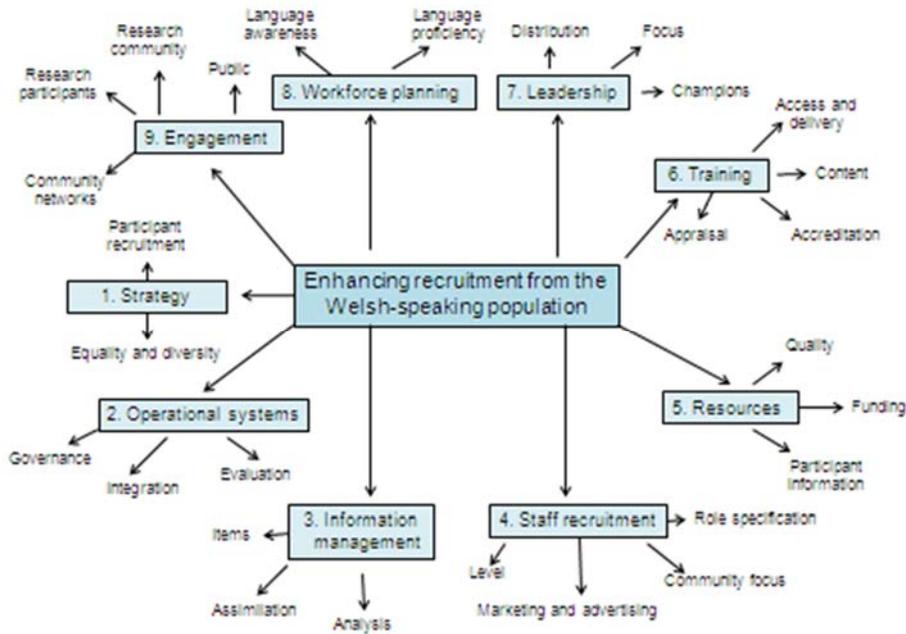
Whilst frameworks have been validated to develop culturally competent healthcare organisations (Office of Minority Health, US Department of Health and Human Services, 2001; Betancourt *et al.*, 2003; London Deanery, 2008; Purnell *et al.*, 2011), these originate mainly from the US and their direct transferability to the Welsh context is limited. This paper reports on a study that adopted a systematic participatory approach for embedding language awareness into NISCHR CRC. The aim was to develop a systems approach for fostering change in the organisational strategies and operational management of NISCHR CRC to account for language and cultural awareness in research. The study focused specifically on i) establishing the evidence for how language awareness should be embedded in health organisations; ii) using the evidence to develop organisational standards; and iii) auditing the standards to generate evidence-based interventions that support bilingualism across the organisation.

Applying an audit and performance feedback framework (Greve, 2003), language awareness champions (Titler, 2008) were supported to work together through a series of cycles to explore how best to integrate language awareness; evaluate solutions; and enhance learning. In line with this framework, the champion role was fully integrated into NISCHR CRC through action learning (Warrick, 2005) which focussed on establishing structures to support the audit; build aspiration; develop search capacity; and support action planning and implementation.

Adopting a formal consensus approach, 28 evidence-based organisational standards were established for embedding language awareness into NISCHR CRC (Figure 1), and these were adopted as a benchmark for an audit of practice across the three regional research networks and central office. Feedback highlighted areas of progress as well as concern and these informed action planning for the dissemination of good practice and the generation of new interventions. Thus, as well as enhancing the normalisation of bilingualism across NISCHR CRC and increasing opportunities for the recruitment of Welsh speakers to clinical studies in Wales, the findings shed light on our understanding of organisational learning and service improvement that has direct relevance across other ‘communities of practice’ (Li *et al.*, 2009).

Given the relevance of the bilingual context of healthcare provision across other European and international settings, and the lack of guidance on organisational planning, there is clear transferability of project findings across the international research community. Thus, in our common pursuit to establish integrated knowledge translation research for language appropriate healthcare systems, this paper offers a focus for reflection, discussion and collaborative action.

Figure 1: Domains of evidence-based organisational standards for embedding language awareness into NISCHRC CRC



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