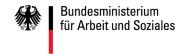








Comparative Study on Language and Culture Mediation in different European countries







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1. Introduction

Language and cultural mediation is a new field of research and work that is still in the development phase and has only recently started to receive attention in Germany. There are different definitions, concepts and historical developments on this topic in various countries. The English terms used, i.e. "community interpreting", "public service interpreting" or "liaison interpreting", have different designations in German alone, i.e. within the context of different German-speaking countries. In Germany people refer to "language and cultural mediation" or "language and integration mediation" while in Austria the term "community interpreting" is used and in Switzerland "intercultural translation".

However, what is language and cultural mediation exactly? Not only are the terms used inconsistently in the various European countries and sometimes even within the countries, but the related understanding and functions range from mere interpreting to cultural mediation or counseling in the health care, social welfare or educational sector. In contrast to classic interpreting, so-called language and cultural mediation primarily takes place in the nonprofit or public service sector.

Language and cultural mediation presupposes that successful communication goes beyond the application of language skills and often requires more, such as knowledge about the cultural background. Generally, therefore, it can be said that language and cultural mediators interpret and communicate sociocultural background so as to guarantee communication between foreign speaking clients and institutions providing standard care in the field of health care, social services and education. Through their work they forge a link between the institutions, e.g. hospitals, psychosocial centers, doctor's offices, counseling offices and other social services, and their non-German-speaking clients.

Why are language and cultural mediators employed? In their Canadian study Smedley, Stith and Nelson were the first demonstrate (in 2003) that ethnic minorities systematically receive health care of inferior quality compared to the majority society. The reasons for this are stereotypes, prejudices and uncertainties on the part of the health care providers, a conditional framework that is characterized by cost saving and does not meet the needs of patients of ethnic minorities as well as language and cultural differences that lead to misunderstandings during treatment (*Bowen 2001*).

Therefore, communication in daily life between immigrants and representatives of the host country should be supported with the help of language and cultural mediators. The "clients" of language and cultural mediators are frequently minorities in the host country (immigrants, asylum seekers, foreign workers, refugees, etc.) and the second party involved, as already stated, i.e. representatives of government agencies and institutions in the host country that have to communicate with clients speaking another language. In addition to better language skills, the representatives of the host country also often have a different spectrum of knowledge and experience from the members of the language minority. There is often not only a difference between the two parties in terms of the level of education, but heterogeneous value systems and patterns of thought as well as different sociocultural conventions and norms additionally play a major role. Thus the interpreters represent a link between the two parties aimed at compensating for the asymmetric power divide

¹ See in this connection: Bowen S. Language Barriers in Access to Health Care. Canada: Health Canada, 2001: 120. (Report prepared for the conference: Critical Link 3 – Interpreting in the Community: the complexity of the profession, Montreal, Canada, May 22-26, 2001).

between the two parties and eliminating language and cultural barriers. In this way language and cultural mediators extensively prevent time-consuming misunderstandings as well as costly multiple treatment and counseling.

Depending on the immigration situation in the respective countries, among other things, the concept of language and cultural mediation has received increasing attention in recent years, initially in Canada and the US and subsequently in Europe as well. The EU countries are becoming increasingly aware of their situation as immigration countries, giving rise to social and cultural diversity and new challenges. New approaches and problem-solving strategies for dealing with immigration in a constructive manner are therefore required. Language and cultural mediation is a very complex and multifaceted field that has been subject to little scientific research. In Germany as well as in some of the other countries examined the job description and/or role and benefits of language and cultural mediators in practice are controversial and have not yet been developed significantly. Nevertheless, it is possible to learn from the development in other countries, where the concept and recognition as an occupation have been researched and have thus advanced further at both the national and the local level.

2. Comparative study on language and cultural mediation in various European countries

The individual European countries have had varying experience with target groups, concepts and practical implementation in the field of language and cultural mediation to date. To some extent data on this experience have been recorded and compiled within the framework of this comparative study on language and cultural mediation in various European states with the aim of getting a general idea of the heterogeneous practice of language and cultural mediation in these countries and supporting knowledge and experience transfer at the European level. The precise objective of the study, aspects of the literature research and evaluation of the survey results are explained in more detail in the following.

2.1 Objective

This study was conducted within the framework of the transnational cooperation of the TransKom Development Partnership, which is part of the AIM transnational partnership of the EQUAL European Community initiative. The results of the European comparison shall be inputted in the national study on language and cultural mediation in Germany currently conducted by the SpraKuM subproject of the TransKom Development Partnership. In the SpraKuM project, carried out by Diakonie Wuppertal, refugees and asylum seekers are trained as language and cultural mediators and placed on the labor market. SpraKuM is additionally involved in establishing a job description for "language and integration mediators for immigrants" in Germany. The results of the study are primarily aimed at supporting the efforts towards recognition of the job description in Germany. You can find the study in the Internet under www.equal-tca-aim.com.

On the one hand, this study evaluates results of literature research in national studies and articles and, on the other hand, results of a survey with questionnaires on this topic in the individual countries. This survey and research were initially carried out only in the transnational AIM partner countries Italy, Austria and Spain with the support of the local partner organizations. In a second step Switzerland and Belgium were additionally integrated into the study since networking and the job description there are relatively far advanced at the national level and developments in the field of language and cultural mediation in these countries are, so to speak, trailblazing for national development of the job description in Germany. The section on Germany, by contrast, is based on experiences within the scope of the SpraKum project in Wuppertal and results of a national study on the demand for language and cultural mediation in the social services and health care sector.

2.2 Evaluation of the literature and survey results

It must be noted with regard to the methodological approach that the available information was mainly obtained through literature research that was then supported by the survey results from the questionnaires.

The areas of training, employment and placement of language and cultural mediators in the various countries were evaluated through the survey using questionnaires. For this purpose four separate questionnaires, i.e. for training institutions, placement agencies, institutions employing language and cultural mediators and for language and cultural mediators, were sent directly to the relevant persons and institutions by e-mail in most cases. Collection, sending and evaluation of the questionnaire data were originally supposed to be carried out by the respective partner organizations in the individual countries, but this was feasible only in isolated cases because the national conditional framework necessary for this did not exist everywhere. In the end the literature researched at the regional and national level and the questionnaires were not evaluated at the national level (except for Austria), but by the transnational project management.

The first interview data obtained from questionnaires were collected by the respective AIM partner organizations between March and Mai 2006. Because there were very few returns, however, and in the meantime a change had taken place in the transnational project management and in the responsibility for the overall study in Germany, additional data were collected in the countries examined to date with a revised questionnaire in a second phase between April and June 2007 and at the same time the survey was extended to include two new countries. The literature research on existing national studies and texts on the topic also took place in the second phase with the help of the partner organizations. However, the research proved to be difficult because, of the available national studies and texts on the topic, only a few provided an overview of the current overall situation in the countries and most of them were written in the respective national language and not in English. The sparse information from the literature research and the surveys was therefore supplemented in some cases by data from telephone or e-mail contacts to nationally relevant actors in the field.

Due to the above mentioned difficulties and conditional framework, this study conveys only an insight into the situation of language and cultural mediation in the various countries and makes no claim to completeness. That would require an additional comprehensive study in a European context and thus necessitate more extensive human resources and financial support also at the national level. However, it can provide an overview of the current situation of language and culture mediation in the six European countries. More information about the questionnaire evaluation you can find under each section about a country.

3. Overview of language and cultural mediation in six European countries

This comparative study on language and cultural mediation covers a total of six countries: Switzerland, Belgium, Austria, Spain, Italy and Germany. In the following sections information has been compiled on the questionnaire evaluation, the commonly used definitions, the acquisition of needs and existing studies, possible application areas of cultural mediators, training, the national networking and job description as well as the financing and placement in the respective countries. The literature details on the evaluated articles and books, moreover, are listed at the end of each national study. However, the contact details from the returns of the surveys with questionnaires in the individual countries are listed in the annex.

3.1 Switzerland

In this section you can find relevant information about language and culture mediation in Switzlerland.

3.1.1 Questionnaire evaluation

Operating within the framework of the second survey, the national study in Switzerland was conducted using questionnaires in the period from April to June 2007. Because of the systematic recording of all actors in the field of language and cultural mediation by Interpret, the national umbrella organization, a large number of responses were returned with representative results. However, no responses came from institutions that employ language and cultural mediators. Altogether 16 questionnaires were returned in Switzerland. They were broken down as follows:

- 7 language and cultural mediators
- 3 training institutions
- 6 placement agencies
- no institutions that employ language and cultural mediators

Together with the information available at INTERPRET's website (www.inter-pret.ch) and various articles, the questionnaire results provide a good insight into the general situation of language mediation in Switzerland.

3.1.2 Definitions

The nationally valid standards and definitions developed in Switzerland clearly specify the functions of language and cultural mediators, who are called "intercultural translators" there. In addition, a distinction is made between the responsibilities of the latter and those of "intercultural mediators" ("interkulturellen VermittlerInnen" und "interkulturelle MediatorInnen") on the basis of specific definitions. In contrast to the case of intercultural translators, uniform training standards do not yet exist for intercultural mediators in Switzerland.

Intercultural translation ("Interkulturelle Übersetzung"):

In 2003 the previously used term "language mediation" was replaced by "intercultural translation". Intercultural translators are qualified persons for oral translation in trialogue situations. They enable at least two persons of differing language origin to communicate with each other. They interpret while

taking into account the social and cultural background of the people involved in a talk. Their tasks also include identifying and clarifying any culturally related misunderstandings within the context of the talk. In addition, they have the necessary skills regarding intercultural communication, adequate command of the local official and interpreting language and knowledge about the Swiss health care, welfare and educational system to enable understanding and communication between persons of different origin.

Intercultural mediation ("interkulturelle Vermittlung"):

Intercultural mediators ("interkulturellen VermittlerInnen") inform immigrants and qualified staff members of public services about cultural peculiarities, different rules of the political or social system and differing social manners in an appropriate fashion. Intercultural mediation ("interkulturelle Vermittlung") also often entails intercultural translation, but encompasses more extensive functions, such as communication of information (at events or workshops), prevention work, parent education, educational family support and assistance, etc. as well as designing, planning and implementing projects, etc.

Intercultural Mediation ("Interkulturelle Mediation"):

These are specially trained in conflict-mediators, who are usually not called in until after a conflict has flared up. They are neutral and committed equally to both parties. They mediate in cases of conflict and help to resolve the conflict fairly, constructively and on a basis of agreement through negotiation as an impartial third party. They are employed, for example, in the case of divorces with children, conflicts at the workplace or conflicts in the neighborhood. (See INTERPRET website)

3.1.3 Assessment of needs and studies

Studies on intercultural translation in Switzerland have only been available for a few years. Thus far some studies, primarily in the health care sector, have examined patient satisfaction in connection with intercultural translation.

Bischoff and Loutan noted in 2000 that intercultural misunderstandings between doctors and/or nursing staff and their patients in the health care sector lead to diagnostic errors and faulty treatment, resulting in longer suffering on the part of patients, and also cause additional costs. Such misunderstandings arise in the social welfare and educational sector as well. Parents who are immigrants do not understand the education and grade system, are not aware of all rights and duties as parents of children required to attend school or do not understand the complex social security system. Reasons for intercultural misunderstandings include inadequate language skills on the part of the clients, the use of technical terms (especially in the health care sector) that are difficult to learn, or inhibitions and a lack of language skills when emotional or difficult topics arise in talks.

In 1997 national studies in the Swiss health survey ascertained in particular discrimination against immigrants in the health care sector and, based on that, a need for intercultural translation.

Regarding access to counseling centers and health care facilities, the primary barriers for immigrants that make initial contact difficult are:

- inadequate access to information
- structural factors
- language barriers
- language problems
- information does not correspond to the language or sociocultural background of those concerned
- lack of professional interpreters
- general differences and distrust

- women-specific aspects (e.g. sense of shame)
- bad experience with the assistance system in the country of origin

Secondary access barriers include:

- problems during initial contact
- different explanation models, health and illness concepts
- mutual lack of understanding, different norms and values, socioculturally different modes of behavior
- different conceptions about social practices, such as inclusion of family, gender relationships and upbringing of children
- immigration biography and traumatic previous experiences

Therefore, language mediation plays a decisive role, especially with respect to the initial contact. In addition, it has been determined that the use of nonprofessional interpreters (children, members of the family, friends, relatives or cleaning staff) leads to problems. The reasons for this are a lack of objectivity and neutrality, no guarantee of quality and accuracy (omission of parts of the subject matter of talks), lack of linguistic and subject-related competence and no guarantee of confidentiality. If children or members of the family are used, problems may arise, e.g. with taboo topics and those giving rise to shame or because of family problems and power structure. (See Eicke)

However, the employment of intercultural translators alone does not guarantee successful communication. The training of qualified personnel also plays a decisive role. An intervention study in Geneva ascertained that communication with foreign-language patients improved to the same extent that doctors learned to work together with interpreters and intercultural translators. Similar results were shown in other studies, too. (See Saladin)

The social and educational sector is less researched compared with the health sector. But at right now there is a study conducted in this sector from the school for applied sciences of social work in Zürich. (*Telefone interview with N. Velert*, 09. 10.2007)

3.1.4 Application areas

The traditional application areas for language and culture mediators are in the health and social services or educational sector. In the health sector, on the basis of these study results, specific language-supporting programs were introduced for immigrants (ranging from the use of multilingual information materials or educational leaflets all the way to employment of intercultural translators) predominantly in the health care sector, also within the framework of the "immigrant-friendly hospitals" project. The aim was to professionalize the interaction process between people whose native and education language is not German and the health care institutions. The following recommendations are mentioned for the employment of intercultural translators. External and trained interpreters are more suitable for complex talks that can be planned and involve emotional or cultural aspects. So-called "ad hoc interpreters" can be employed only for urgent non-recurring talks whose subject matter is simple and concrete and which last a short time. Fundamentally cooperation with certified intercultural translators or interpreters should be targeted so as to avoid having to call in members of the family and untrained staff as ad hoc interpreters. If staff members are employed as ad hoc interpreters, they should receive appropriate training and a structural framework for such assignments should be created within the institutions (pool of interpreters or list of translators). (See link to immigrant-friendly hospital and Saladin)

In the social services and the educational sector organized municipal or private (from NGOs) interpreting services exist only in some cities or communities, but not covering all the country.

The questionnaires from language and cultural mediators and placement agencies indicate that intercultural translators are primarily employed in the health care sector, but also in the educational and social welfare sector to support the services in counseling and crisis talks or in the case of crisis interventions. The following were mentioned as examples:

- Health care sector: e.g. hospitals, psychiatric and social services. Employment in crisis situations, in connection with physical and psychological illnesses or for medical reports
- Social welfare sector: judiciary (at court hearings, notary or registry office), integration and immigration matters, or at a women's refuge
- Educational sector: in schools, kindergartens, e.g. talks with parents or in connection with project work

The intercultural translators surveyed were in the 19-56 age group (four women and three men), native speakers (Turkey, Chile, Lebanon, Vietnam, Iraq, Kosovo) and do this work as a second job, with assignments usually several times a week. One of those surveyed works full time as a male nurse at a health care institution. Furthermore, the language and cultural mediators were asked about the advantages and disadvantages of their work in the questionnaires.

As added value of the work was mentioned:

- Supporting people in difficult situations
- Regarded as a person who can be trusted by both parties
- Helping compatriots when difficulties arise
- Creating understanding

As difficulties involved in the work were mentioned:

- The work is more difficult in ongoing cases or once-only assignments
- It is difficult to find out where intercultural translation stops and intercultural mediation begins
- Presence of one's own immigration history
- Communication with mentally ill persons
- Neutral, keeping to one's role, maintaining distance between translator and client

3.1.5 Training

In recent years various institutions, headed by Caritas Switzerland, have conducted courses for lay interpreters to a varying degree for the health care, social welfare and educational sector. They range from brief two-day training to six-month course programs tailored to specific fields.

To standardize these efforts in the training sector, the umbrella organization INTERPRET (Swiss interest group established in 1999 for intercultural translation and mediation) started developing training standards in 2000. Since 2003 it has been

- the certification office
- the supporting body of the quality inspection commission for certified training
- active in documentation/provision of information/public relations

INTERPRET is authorized to develop training standards as well as certification and language review procedures. The objective is to professionalize and achieve recognition of the occupation.

National training standards:

National standards for completion of intercultural translator training at a recognized institution have applied since April 2004. In addition to the training, 50 hours of practical experience and verified knowledge of the local language as well as the interpreting language (minimum: level B2 of the European Language Portfolio) are required to obtain the certificate.

The training encompasses two modules:

Module 1: Intercultural translating (85h of seminars, 65h of private study and 6-8h of group supervision.

Focal points:

- Intercultural communication
- Communication disruptions and conflicts
- Talk procedures and understanding of role
- Reflection on own sociocultural characteristics and immigration experience
- Training work: documentation and presentation of a practical case

Module 2: Orientation in health care, social services and educational system (40h of seminars, 50h of private study)

Focal points:

- Legal bases and structures of health care, social welfare and educational system
- Dealing with authorities and government services
- Text comprehension and communication of information
- Training work: information dossier and glossary for a specific field

Now there are 11 recognized training institutions in Switzerland. (See Eicke and INTERPRET website)

Defined competencies:

The certificate issued by INTERPRET is recognized by the Federal Office of Public Health (BAG), the Federal Office for Migration (BFM), the Swiss Federal Commission for Foreigners (EKA) and the Service for Combating Racism (FRB).

The certificate confirms that its holder:

- is well prepared for talks between immigrants and qualified staff members and is aware of his or her role and limits as an intercultural translator.
- is familiar with the Swiss health care, social services and educational system and constantly updates his or her knowledge in this respect.
- has adequate knowledge of the local official language as well as the interpreting language(s) to guarantee good and complete translation into both languages.
- is familiar with the principles of professional ethics (code of professional conduct) as well as the rights and duties of an intercultural translator.

The competencies required by the institutions (from the questionnaires received from placement agencies) include:

- own immigration background (or equivalent experiences related to migration)
- ability to communicate, language skills
- knowledge about systems of own and "new" culture
- education and training, work experience
- knowledge of systems, technical terminology
- general knowledge
- empathy and capacity for understanding
- confidentiality, understanding of role, ability to maintain distance
- mediation criteria such as age, gender, ethnic affiliation, availability

Examples of training courses (see questionnaires from training institutions):

HEKS, Basel, MEL project: Training as intercultural translator.

Training for intercultural mediators is planned. The training as intercultural translator is not a permanent program offered because now, in the third round, the market seems saturated. From 1998 to 2005

50 persons have been trained thus far according to the training concept of the umbrella organization INTERPRET. In the current project since 2005 (in two training stages) another 38 persons have been receiving training (more women than men). The languages to date are Turkish, Spanish, Portuguese, Kurdish, Italian, Serbo-Croatian, Arabic, Tamil, Albanian, Russian, Farsi, Urdu, African languages, etc. Overall more women than men were trained. Intercultural translators are employed in the health care, social services and educational sector. Placement is carried out centrally via INTERPRET.

Besides initial and further training for intercultural translators and intercultural mediators, HEKS Basel offers placement of intercultural mediators (intercultural mediation / animation) and training for clients regarding cooperation with translators as well as coaching / consulting of placement agencies.

Caritas Switzerland, Luzern: Training as intercultural translator.

The project has existed since 2000. Optional and/or shorter training modules not recognized by INTERPRET are also offered. Financing is provided for through the Swiss Federal Commission for Foreigners, via clients or hospitals, the sponsoring organization and to a small extent by the intercultural translators themselves. The institutions that employ language and cultural mediators are in the field of health care, social services and education, especially psychiatry and psychotherapy. Around 400-500 intercultural translators have been trained since 2000.

ECAP Foundation, Aarau: Language courses, integration courses, adult education and training as intercultural translator, among other things.

Institutions that employ language and cultural mediators: in field of health care, social services and education. Up to now there have been 36 participants in the following languages: Albanian, Spanish, Serbian/Croatian/Slovak, Turkish/Kurdish, Portuguese, Italian, Arabic, Polish, Chinese, Russian, Vietnamese, Filipino.

3.1.6 National networking and job description

For several years now attempts have been made to standardize the understanding of the various professional functions in the context of intercultural translation at the national level. INTERPRET plays a leading role in this respect. The endeavors to establish a standardized job description for language and cultural mediation date back to 1996 and are carried out within the context of integration support. Because of the poor situation regarding care for immigrants, the Federal Office of Public Health started intensively to focus its attention on the field of language mediation within the framework of integration support at the end of the 1990s.

Support of integration as a responsibility of the government has been part of revised federal law since 1998 and includes promoting the health of the foreign population. The Federal Office of Public Health (BAG) has 1996 started a working group of actors in the area of language and culture mediation. Since then the BAG is financing the training organizations. The Swiss Federal Commission for Foreigners (EKA) is supporting the placement agencies in the context of integration-support. The organization INTERPRET was established in 1999 as the "Swiss interest group for promoting translation and cultural mediation in the health care, social services and educational sector" by language mediators, representatives of institutions as well as various relief organizations of the national Protestant Church and Caritas Switzerland.

National networking:

Today INTERPRET operates with a coordination office in Bern, focusing on the areas of recognition, standardization and certification of training programs, sensitization and public relations work and has committed itself to making language and cultural mediation a recognized job description in the health care, social services and educational sector in Switzerland that is characterized by standard criteria for

quality. In addition to INTERPRET as the umbrella organization in the field of intercultural translation and the Swiss Association for Adult Education as guarantees for the quality of the training, cantonal integration officers are incorporated as partners.

INTERPRET views itself as the umbrella organization for all actors in the intercultural translation sector and plays an active role as such in working for recognition and professionalization of intercultural translation. It has had an administrative office and has assumed responsibility as the quality assurance commission for national training since 2004.

However, state recognition as a job description has failed to materialize thus far. The certificate of the umbrella organization and additional verification of qualifications are to lead to Swiss certification of qualification and a nationally recognized title in 2009. (See Eicke)

Uniform standards for further training and professional recognition as intercultural mediator ("interkulturelle VermittlerInnen und MediatorInnen") are also still in the development phase in Switzerland (see Definitions).

3.1.7 Financing and placement

Financing

A strategy for immigration and health was developed by the Federal Office of Public Health (BAG) together with the Federal Office for Refugees (BFF) and the Swiss Federal Aliens Office (BFA) and the Swiss Federal Commission for Foreigners (EKA) in 2002-2007 and adopted by the Federal Office in 2002. It contains five intervention axes (education, promotion of health, health care, therapies offered, research). The area of education includes certification of intercultural translators and promotion of transcultural competencies of qualified persons. Today networking exists at the federal level between the Federal Office of Public Health and the Swiss Commission for Foreigners and is aimed at supporting on the one hand professionalization through subsidized training and on the other hand placement through subsidization of local placement agencies. In most cases the placement and assignment fees are covered by the clients. Furthermore, cantons and municipalities receive support for the employment of certified intercultural translators. (See Eicke)

In Switzerland there are 18 placement agencies for intercultural translators altogether; they place trained translators who have an INTERPRET certificate at the regional level on request. These agencies often offer additional services in the field of intercultural understanding (e.g. intercultural mediation ("interkulturelle Vermittlung und Mediation"). The regional placement agencies can be found at INTERPRET's website.

Mediation requirements (see questionnaires from the placement agencies):

Examples are given for the number of assignments. Bern placed a total of 8300 hours in 2006, Zurich an average of 300-400 assignments a month whereas only 40-50 assignments a month were recorded in smaller municipalities.

In most cases the training institutions are also placement agencies. The latter are permanent facilities at the local level, funded via assignments as well as co-financing by the sponsoring organizations and the federal, cantonal and local governments or municipalities. Individual placement agencies have been operating in this field for as long as 20 years (e.g. Linguadukt and Medios) and in some cases they reorganized when INTERPRET was established.

These agencies arrange for placement of intercultural translators, to some extent intercultural media-

tors ("Interkulturelle VermittlerInnen") as well (in Baden and Basel) and/or future intercultural mediators ("Interkulturelle ÜbersetzerInnen") (in Zurich). In Basel there is a pilot project in which teams of two composed of social education workers and intercultural mediators are placed in cases involving protection of children and young persons or juvenile criminal law.

The institutions perform public relations work via Internet, flyers, e-mail, information events, advertisements, official occasions, presentation at government services and by offering further training courses. Placement is seldom carried out personally, but usually by telephone, fax, e-mail and to some extent via Internet/online order (though this is often not taken advantage of according to KIM Basel).

According to the questionnaire results, organized placement is meaningful because

- quality assurance and employment of suitable persons are ensured as a quality guarantee for clients
- secure and standard working conditions / social security benefits and remuneration of intercultural translators are guaranteed as protection against price dumping
- administrative procedures are regulated, efficient, client-friendly and fast placement are ensured and the contact persons and responsibilities are clearly defined
- monitoring of experiences and asking about client needs are provided for
- professionalization through targeted further training is guaranteed
- support and coaching of the intercultural mediators and sensitization at institutions are ensured.

The institutions involved want preliminary and follow-up talks in connection with trialogue situations. Unfortunately this is not always feasible in practice and takes place only according to need. Regular team meetings, supervision, an exchange of experience, case discussion and further training are primarily carried out with intercultural mediators ("interkulturelle VermittlerInnen" und "interkulturelle MediatiorInnen"), where coaching and support are very important.

Statistical evaluation of the assignments is carried out on the basis of feedback forms. Client feedback is recorded systematically. Annual evaluation by means of a database takes place only in some cases at larger placement agencies (Basel).

3.1.8 Literature

- INTERPRET website www.inter-pret.ch
- Website of "immigrant friendly hospitals" project http://www.mfh-eu.net/public/home.htm
- Monika Eicke, "Sprach- und Kulturvermittlung im Ländervergleich-am Beispiel Schweiz" in Niels Jens Albrecht, Thea Borde, Latif Durlanik (Hrsg.), "Sprach- und Kulturmittlung, ein neuer Weg zur Verbesserung der Gesundheitsversorgung von Flüchtlingen und Migrant/ innen", Interdisziplinäre Reihe, Band 2, Migration-Gesundheit-Kommunikation,
 Cuvillier Verlag Göttingen 2005
- Peter Saladin (Hrsg.), "Diversität und Chancengleichheit, Grundlagen für erfolgreiches
 Handeln im Mikrokosmos der Gesundheitsinstitutionen", Bundesamt für Gesundheit, Bern 2006

3.2 Belgium

In this section you can find relevant information about language and culture mediation in Belgium.

3.2.1 Questionnaire evaluation

Operating within the framework of the second survey, the national study in Belgium was conducted using questionnaires in the period from April to July 2007. Because of the good support provided by COFETIS-FOSOVET, the national umbrella organization for placement agencies in the field of language and cultural mediation in Belgium, there was a high number of responses returned, particularly by language and cultural mediators themselves. However, only a few questionnaire results were obtained from placement agencies and training institutions and the results from institutions that employ language and cultural mediators are solely from the health care sector. Altogether 28 questionnaires were returned in Belgium. They are broken down as follows:

- 24 language and cultural mediators
- I placement agency and training institution
- 3 institutions that employ language and cultural mediators, exclusively in the health care sector

The federal state of Belgium is divided into three regions and three language communities. For this reason there are, in some cases, differing regional developments for language and cultural mediation, which is called social interpreting in Belgium. On the basis of the questionnaires, supplemented by further articles and information from the COFETIS-FOSOVET website (www.cofetis.be), an attempt is made here to convey a general idea of the overall situation regarding language and cultural mediation in Belgium.

3.2.2 Definitions

In Belgium the job title "intercultural mediator" is used for the health care sector and "social interpreter" and "social translator" for the social sector (including the health care sector). Intercultural mediators work at Belgian hospitals or are employees there and are funded with government assistance on the basis of national legal provisions in Belgium. "Intercultural mediator" or "coordinator for intercultural mediation" is a recognized profession at Belgian health institutions. The mediators there are responsible for improving health care for immigrants, though their area of responsibility goes beyond mere interpreting and linguistic translation. To meet the demand for language diversity, the health care institutions additionally make inquiries among external interpreters. In Belgium such translation tasks are performed by "social interpreters" who work in social, legal and non-commercial context as well as at hospitals and public health institutions. They are usually placed on request at institutions via regional placement agencies. In some cases where there is a great need for translation work (e.g. at asylum coordination offices) social interpreters are also employed directly by the institutions.

COFETIS defines a "social interpreter" as follows: Social interpreting (in French: *l'interprétariat en milieu social*; in Dutch: *het sociaal tolken*) is a type of interpreting:

- in which the verbal messages are reproduced confidentially and completely from the source language to the target language.
- with the aim of enabling public institutions and charitable organizations (agencies that offer social services for the population) to perform high-quality work for everyone so that every individual has the opportunity of exercising his or her rights and meeting his or her obligations. (See COFETIS website)

² National Coordination of Social Translation and Interpreting Services (in French COFETIS: Coordination Fédérale de la Traduction et de l'Interprétariat Social; in Dutch FOSOVET: Federaal Overleg voor het Sociaal Vertalen en Tolken)

3.2.3 Application areas

In the health care sector the Center for Ethnic Minorities and Health (CEMG) launched a government-funded program for intercultural mediation in Belgian hospitals back in 1991. Since 1999 Belgian clinics have been able to apply for government funds from the Federal Public Service for Health, Food Chain Safety and Environment to finance the employment of intercultural mediators. Altogether 55 intercultural mediators (with 17 different languages) were employed in full-time positions at 55 different Belgian hospitals in 2006. The objective of the mediation program is to improve health care for ethnic minorities in Belgium. Intercultural mediators are employed to improve the quality of communication between health care providers and patients of ethnic minorities and, moreover, to sensitize clinics to the sociocultural and health needs of ethnic minorities.

The areas of responsibility of intercultural mediators at Belgian hospitals are:

- interpreting
- cultural mediation, e.g. drawing attention to specific cultural aspects (different values, etc.) that play a role in interaction
- emotional support and practical assistance for patients
- conflict mediation if linguistic or cultural misunderstandings are the cause
- acting as an advocate in the event of racism and discrimination
- looking after ethnic minorities as patients in connection with nursing staff and taking note of their problems
- providing for health information and education for the patients (See Verrept and website of Health Ministry)

According to responses from the questionnaires for institutions employing cultural mediators, the three such institutions in the health care sector have had good experience with social interpreting and language and cultural mediation. They mention the proportion of patients with a migration background in their clinics as the reason for employing social interpreters:

- AZ Sint-Lucas/Gent: 394 Europeans and 1462 non-Europeans, primarily Turkish and Arab patients
- AZ Groeninge/Kortrijk: 1.5% of the patients with a migration background
- Ziekenhuis Oost-Limburg/Genk: 30% of the patients with a migration background

In addition to permanently employed intercultural mediators (financed via the Health Ministry since 1992), (contractually bound) freelance workers (altogether 3-5 staff members) and external social interpreters still work at AZ Sint-Lucas/Gent and Ziekenhuis Oost-Limburg/Genk (see below). They thus also work in the health care sector, according to need.

In Belgium there are additionally about 20 social translation and interpreting services (French: SeTIS Service de Traduction et d'Interprétariat en milieu Social; Dutch: SVTD Sociaal Vertaal- en Tolkendiensten), which provide social translators and interpreters in the social and noncommercial sector, i.e. they also work in the health care sector. COFETIS mentions the following areas that make use of services for social interpreting and translation as a rule: public services, social services, services relating to immigration, asylum and integration, school and education, health and psychiatry, work and employment, law and judiciary, youth and family, public order, social housing and the sociocultural sector.

There are three different areas of services for social interpreters:

- I. Telephone interpreting (French: *interprétariat par téléphone*; Dutch: *telefoontolken*) where the interpreter translates orally in a talk between the two parties (particularly in the case of structured interventions, crisis situations, brief formal conversations).
- 2. Interpreting on site (French: interpretariat par déplacement; Dutch: tolken ter plaatse) where

the interpreter orally translates a talk between two parties at the site of the assignment (particularly in the case of delicate or sensitive issues, complex talks that require concentration and good preparation or situations with great nonverbal relevance).

3. Written translation (for important and official documents).

COFETIS writes the following about the added value of social interpreting and translation:

- Social interpreters / translators cooperate specifically in implementation of a policy of diversity in the social services;
- furthermore, persons of foreign origin who have already received language assistance from a social interpreter are aware that knowledge of the national language is important and will therefore be encouraged to learn one of the national languages;
- isolation of persons who do not speak the language or only to an inadequate degree declines and the degree of participation by persons of ethnic minorities rises;
- in addition, the quality of the services performed for the users is significantly increased and the duration of the service made use of declines, which means that the total costs can be decreased. (See COFETIS website)

Evaluation of the questionnaires for language and cultural mediators showed that the social interpreters (14 women and 10 men) are all native speakers (from Turkey, Russia, Armenia, Ukraine, Kosovo, Morocco, Macedonia, Congo, Czech Republic, Poland, Pakistan, Albania) and most of them (15) work full time as social interpreters, two in permanent part-time positions, the others (5) perform this work as a second job, though with assignments several times a week or in an honorary capacity (2). Merely two have been working as social interpreters only for a year, the rest of them have already been working in this area for 3 to 15 years. The following institutions and areas of assignment were mentioned: health care, psychiatric centers, hospitals, social sector, judiciary offices, notaries, courts, schools, asylum institutions, refugee centers and police.

They mention the following about the added value of their work:

- Interpersonal relations
- Helping people with difficulties
- Helping people who cannot speak the language or have difficulty speaking it
- When those who profit from it feel they are understood better
- The feeling of being needed and when the talk is positive for both parties
- Easy to identify with the work
- Recognition
- Well-being of the people and society through the assistance of social interpreters
- A very enriching profession that contributes to self-development
- Providing assistance so people can integrate in Belgium
- Enriching thanks to intercultural exchange
- Feeling useful by helping people who need it
- A satisfying profession
- Being useful and helping people
- Restoring trust and understanding between the two parties
- When the dialogue is successful

The following are mentioned as difficulties during the assignment:

- Limitations at intellectual, psychological and physical level
- Passionate task
- Prejudice against the target group

- Limits as far as medical terms are concerned
- Sometimes asked to translate something that requires additional training
- Sometimes it is difficult to get the situation under control. Lack of the special terms for some topics
- Sometimes the people who profit from the work pose problems beforehand
- Alternating working days (half-days)
- Limits when one feels sympathetic to the other person
- Not having authority to make decisions to help one's compatriots
- Difficult to disassociate oneself because of the great willingness to help
- Avoiding too much closeness and familiarity
- Difficulty in finding the right words
- Continuous improvement of French
- Dependent on the situation

3.2.4 Assessment of needs and studies

Intercultural mediation

Two supporting evaluation studies were conducted in the clinics involved in Belgium within the framework of development of the intercultural mediation program. On this basis a quality assurance and improvement program was introduced, also with the aim of developing the job description for intercultural mediators.

The first qualitative evaluation study was conducted (by Verrept and Louckx, 1997) on the impacts of intercultural mediation on the quality of patient care between 1993 and 1995 when intercultural mediation had not yet been implemented in the normal support system for hospitals. A second qualitative and quantitative study between 1997 and 2000 examined the problems related to introduction of the mediator program and the quality of mediation. On the one hand, these studies demonstrated the positive effect of intercultural mediation on improving the quality of health care. On the other hand, however, they also showed that the interpreting competence of the mediators and utilization of the interpreting services offered had need of improvement.

Since introduction of the program on quality assurance in 2000 there has been a continuously increasing number of assignments of employed intercultural mediators in hospitals. In 2000 there were an average of 4.6 assignments a day and interpreting work accounted for approx. 40% of them. In 2004 the figure had risen to 7.7 assignments a day and interpreting work made up 60% of that. This is a positive development in minimizing the impact of language problems on the quality of health care.

Furthermore, qualified members of the health care staff and patients confirmed that introduction of intercultural mediators had led to significant improvement in the quality of care when the services offered were taken advantage of to an adequate extent. The most important thing for them was that the communication and exchange of information are guaranteed by the intercultural mediators. This included improvement in case history and diagnosis through better research into the patient's medical history and assistance in articulating problems and asking questions for patients. In addition, discussing various illness concepts and healing methods as well as psychological support were also said to be helpful. The focus here is not on mere translation, but on using other communication strategies and channels and on a better assessment of the nonverbal communication of patients. Moreover, the persuasiveness of the mediators in dealing with patients (in getting them to take certain medication, for example) is decisive. There is also an improvement in culturally sensitive care: this refers to ways of adapting clinics to the presence and needs of patients of ethnic minorities and dealing with these needs better, such as by setting up a prayer room or adjusting the diet to Muslim patients, etc. Nevertheless, mediator employment and translation quality require improvement. It is apparently difficult to convince the medical staff of the importance and role of intercultural mediators. One of the challenges is sensitization and training of qualified personnel and doctors so they can work together better with intercultural mediators since it is not always possible to win the doctors and health personnel over for training courses. Frequently problems are viewed as due to cultural aspects, especially among patients with psychosocial problems, and there is a tendency for medical staff to shift their responsibilities to intercultural mediators. The status of the mediators is relatively low and better representation of their interests is necessary. In addition, there are not enough available mediators (some are employed only part time) in some clinics and consequently external interpreters have to be called in to cover all languages required. Furthermore, mediators continue to depend on the assistance of informal translators and unqualified personnel. (See Verrept)

Social translation and interpreting

Several studies are currently being conducted on social translation and interpreting that go beyond the health care sector. COFETIS is conducting a study on cost savings through social interpreting³ within the framework of the ERF⁴ project. A study by Hertog and Van Gucht confirmed that language mediation in the health care sector plays a major role in the quality of the services, but also in the final costs of the care. The health services substantiate that they work more effectively and, in the end, more inexpensively. For this reason COFETIS assumes that this effect also applies to the broad social sector provided that understanding of the orally transmitted information is guaranteed right from the beginning because this reduces the number of services and enhances their effectiveness. (See COFETIS website and Van Gucht)

Furthermore, within the framework of the European EQUAL program, COFETIS is conducting a comprehensive study on needs that consists of three parts: 1) presentation of the various social translation and interpreting services in Belgium (languages offered, funding of these services, overview of user services, etc.); 2) quantification of needs for user services from 11 different sectors; 3) interviews with user services in order to conduct research on qualitative aspects of social interpreting and translation. This study was started in 2005 and will be available in March 2008.

3.2.5 Training

Intercultural mediation

Intercultural mediation can contribute to improving and eliminating inequality in health care if it is consistently implemented in the case of need, the qualified staff is familiar with cooperation and the mediators have been well integrated into the hospital structures. A prerequisite for this is appropriate sensitization and further training of qualified staff members and intercultural mediators.

A training requirement for employment as an intercultural mediator in the health care sector is either a degree in the professional field of intercultural mediation in the public health sector or in a (para)medical or social discipline, in language or literature studies or interpreting. Theoretical training in intercultural mediation has also been offered since 2005. In addition, at least two years of experience in a similar function (with professional supervision) are necessary.

Next to the seminars and short-term training courses of different organisations exist only a few long term training courses in intercultural mediation. In Flanders there exists an officially recignized three-

- 3 This study is written in English and available at COFETIS-FOSOVET.
- 4 ERF: European Refugee Fund

years training program (on higher secondary level) of two different schools. But it finishes only with a certificate, not with a higher education entrance qualification. A similar training program exists in Brussels within the project "intercultural mediation in the health sector" of the organisation "Foyer", that is designed for intercultural mediators, that work already in this area. (*Telephone interview Hans Verrept*, 11.10.07)

A program on improving the efficiency and effectiveness of intercultural mediators and quality assurance, financed and monitored by the Ministry of Health, was launched on the basis of the above mentioned studies. Among other things, it encompasses the following three points:

- Research support and observation of the activities of intercultural mediators and documentation of experience.
- Additional training and supervision of intercultural mediators parallel to employment. Supplementary training courses in interpreting techniques are offered to employed intercultural mediators according to training guidelines (of www.MMIA.org). Furthermore, a terminology working group was set up for the various languages in order to develop equivalent translations of medical terms and as training for language mediation. This group also serves to elaborate the role of mediators and their job description. In addition, there are invitations to supervision meetings at which problem cases are discussed and a knowledge platform shall be set up, enabling mediators to network.
- Practice units for medical staff: Training for working together with intercultural mediators, sensitization to employment of mediators when language and cultural barriers or problems arise and training for better and more effective cooperation. (See Verrept)

Social translation and interpreting

There are no uniform training standards in Belgium. In the French-speaking region of Belgium the individual placement agencies for social interpreters, called interpreting services, have developed their own training modules in cooperation with further training institutions. These training modules largely resembled each other, but were not identical. However, common training standards for the French-speaking part of Belgium are currently being developed so that basic training can be designed centrally and provided on a decentralized basis. In Flanders the basic training for social interpreters is centrally organized, but the courses themselves are conducted in decentralized fashion by the institutions in the individual provinces. There is a standardized certificate and training standards. Whereas university studies are necessary for intercultural mediators, social interpreters and intercultural mediators additionally have to meet less formal requirements.

The training profile of intercultural mediators (interculturele werkers) in Flanders of 1991 for the health care and sociocultural sector specifies four focal points for the training:

- Intercultural communication and anthropology
- Social studies and current problems
- Areas of intervention and work: here health care
- Communication and translation techniques
 Furthermore, an internship and supervision are requirements.
 (see training standards for Flanders)

One of the requirements for the basic training of social interpreters is a Dutch test (level B2), an introductory course of 18 hours and then 8 hours of basic training. This is followed by preparation for the oral examination (1-1.5 hours). The examination then takes place in the presence of a social translation and interpreting service. The certificate is issued by the Flemish ministry responsible for naturaliza-

tion. The language mediators who have received this certificate could demand a higher salary. Furthermore, they have the opportunity of following specialization modules and are included in the list of social interpreters. This training is organized by the COC⁵ (with representatives of a social translation and interpreting service, users and the translation schools) and COFETIS-FOSOVET in cooperation with 6 universities for translation.

There is no standardized training and no central diploma for the French-speaking part of Belgium. Fewer formal requirements have to be met for qualification as a social interpreter. The person has to be a foreigner who has immigrated to Belgium either a long time ago or only recently, is familiar with the problems of clients who have fled their country and with the difficulties of integration and applications for asylum or a person of the "second generation". He or she must have a command of French, the native language and possibly other languages and convey a positive image of successful integration. Here are some examples of the training curricula of individual organizations in the French-speaking part of Belgium:

CeRAIC et CAI:

Selection of participants by means of oral tests in the native language and French (also in writing), followed by division into different levels. There are practical meetings and mandatory supervision days with a psychologist every 15 days.

CRIPEL

Training for 800 hours as intercultural companion (la Promotion Sociale pour la fonction d'accompagnateur interculturel). Some of these courses are used to train social interpreters: French, social studies and institutions, deontology, communication and computer science. The social interpreters additionally take part in further training modules for health, translation techniques, etc.

This training module for "intercultural companions" existed before structuring of the field of social translation and interpreting began in the French-speaking part of the country. In 2008 it will be replaced by the official "social interpreting" training module. Some courses will be adapted, such as those related to the job description and professional code of ethics.

CIRÉ

Selection of participants through language tests and other subjective criteria (e.g. concentration, memory, etc.)

Basic training: 72 hours

- 1. The trialogue situation (4 days)
- 2. Four topics (2 days)
- 3. Institutions employing cultural mediators (1 day)
- 4. Assignment in the field (2 days)

Further training:

- 1. Translation techniques: 60h for 2 years
- 2. Four topic modules: 60h for 2 years
- 3. Individual and group meetings: 4h per month
- 5. Assignments
- 6. Meeting of interpreters: 2h per month (See conference documentation, COFETIS website)
- 5 COC: Centrale OndersteuningsCel (organization that centrally supports the Flemish social translation and interpreter services, particularly with respect to training).

Furthermore, 7 minimum competencies are required of social interpreters in the job description just developed:

- Language skills: oral language skills (understanding and pronunciation) of the national language (level B2 of the joint European reference framework) and native language.
 Reading comprehension in at least one of the national languages
- Skills in technical and practical information research
- Knowledge of institutions employing cultural mediators
- Knowledge of and respect for ethnic principles during work
- Knowledge of interpreting and translation techniques
- Skills in verbal and nonverbal communication, intercultural communication and knowledge of fundamental principles of communication
- Knowledge regarding labor law and rules of cooperation (See job description and COFETIS website)

In comparison to that the following competencies are mentioned in the questionnaires for institutions employing cultural mediators and intercultural mediators:

- Personal contact
- Knowledge of ethnic and cultural background
- Judgment of character
- Skills in cultural mediation and support for both parties
- Memory, capacity to convey information
- Ability to listen; correct translation without omissions
- Bilingual, command of foreign languages
- Knowledge in field of medical care
- Flexibility, readiness to cooperate, empathy, organizational capability, integrity, stress resistance, customer orientation, capacity for understanding
- Respectability and professionalism (e.g. impartiality, confidentiality, knowledge of institutions employing cultural mediators, punctuality, reliability)
- Openness, empathy and adaptability; flexibility, sympathy, respect, honesty
- Physical and moral endurance, patience
- Experience

3.2.6 National networking and job description

There is a legal foundation for services in the health care sector and now there are 55 permanently employed intercultural mediators in full-time positions at various hospitals. However, their position and professional work require creation of a more distinctive and better image. The national terminology working group (see above) also performs the function of defining the role of mediators and their job description more distinctly.

The job description for social interpreters encompasses national or federal competence and has been approved by all Belgian interpreting services. However, embodiment in law and consequently creation of a distinctive professional image for social interpreting services is a regional matter (for the Flemish and Frenchspeaking part of Belgium). Currently efforts are under way to achieve legal recognition of this by 2009.

- In Flanders a relevant dossier was submitted to the minister responsible for integration and naturalization in spring with the aim of obtaining recognition of social interpreting services.
 This has good prospects of success since integration in Flanders is to be restructured and social interpreting given a proper place in the law as one of several pillars of integration.
- In Walloonia and the capital, Brussels, talks have yet to take place, but the political will to bring about an equivalent situation in Flanders exists.
 (e-mail interview with S. Backes from COFETIS, August 9, 2007)

The responses in the questionnaires for language and cultural mediators regarding their view of their profession led to the following results:

- In a multicultural society a profession of great importance, particularly for persons seeking asylum and refugees who do not speak the language of the country
- Very useful or important work
- A difficult, varied and high-pressure job, but performed willingly
- A profession where you can help other people
- A job that requires a great deal of attention and experience. The goal is to provide for good communication and understanding
- Important for both parties
- A profession full of developments
- Very enriching in social, cultural and interpersonal terms

Moreover, it was mentioned that it was important to ensure that the profession is more recognized so as to receive more attention compared to the status of regular interpreters.

National networking

COFETIS-FOSOVET is the national umbrella organization of the social translation and interpreting services and represents the interests of 10 French-speaking and 9 Dutch-speaking local, regional and federal placement agencies that are frequently also training centers. COFETIS-FOSOVET is responsible for analyzing the demand and supply of social interpreting, for national harmonization of training, professional ethics and financing as well as, in the end, for a more professional and established job description. Social interpreters are placed regionally or locally according to need by the individual institutions that are listed at the COFETIS-FOSOVET website. (See COFETIS website)

3.2.7 Financing and placement

Since 1999 Belgian hospitals have been able to apply for financing of the employment of intercultural mediators by the Federal Public Service for Health, Food Chain Safety and Environment. The total expenses for intercultural mediation at clinics came to 1,220,000 in 2005. In 2005 50 clinics were involved (40 general hospitals and 10 psychiatric clinics). By 2006 the figure had already risen to 55 clinics. The legal basis for funding is Article 80, 2 of April 25, 2002 (revised on July 25, 2005) in the national law on patient rights. (Telephone interview with Mr. Verrept, Ministry of Health, September 5, 2007)

Social interpreters, by contrast, are still financed at the regional level in different ways. Along with restructuring of the national law concerning integration, however, efforts are being made to establish a legal foundation and thus a long-term and uniform funding structure. An exception is the legal basis already set up for the asylum application procedure, in which specific reference is made social interpreting.

Social interpreters are placed according to need on a regional basis via COFETIS-FOSOVET and the affiliated local or municipal sponsoring organizations. According to the questionnaires, in most cases they are placed by the regional placement agencies personally or after telephone or e-mail inquiry or via the Internet.

3.2.8 Literature

- COFETIS website at http://www.cofetis.be
- Job description of social interpreters at http://www.cofetis.be/¬?action=onderdeel&onderdeel=132&titel=Profil+m%C3%A9tier
- Training standards for Flanders, available at J. van Gucht, COFETIS-FOSOVET

- Conference documentation, TRIALOG seminar, Sept. 2006 at http://www.cofetis.be/¬?action=onderdeel&onderdeel=21&titel=Trialog
- Website of Ministry of Health: https://portal.health.fgov.be/portal/¬page?_pageid=56,704702&_dad=portal&_schema=PORTAL
- Verrept, Hans; Sprach- und Kulturvermittlung in Belgien. Eine Antwort auf Ungleichheit in der Gesundheitsversorgung. Interdisziplinäre Reihe, Band 3 Migration-Gesundheit-Kommunikation, Thea Borde, Niels Jens Albrecht, (Hrsg.), IKO-Verlag Frankfurt a.M., 2007

Further literature:

- Verrept H, Louckx F.: Health advocates in Belgian health care. In: Ugalde A, Cardenas G (Eds.).
 Health and Social Services among International Labor Migrants:
 - a Comparative Perspective. Austin (Texas): CMAS-books, 1997: 67-86.
- Le service de médiation interculturelle du CHR de la Citadelle à Liège,
 See: http://labiso.be/ebooks/labiso_65/html-n/labiso_65_brut.html
- Intercultural Mediation Unit, see at: http://www.health.fgov.be/vesalius/devnew/NL/prof/¬thema/intercult/index.htm (in Dutch) and
- http://www.health.fgov.be/vesalius/devnew/FR/prof/thema/intercult/index.htm (in French)

3.3 Austria

In this section you can find relevant information about language and culture mediation in Austria.

3.3.1 Questionnaire evaluation

In contrast to the other countries, the national study for Austria was conducted by the Austrian partner, the EQUAL development partnership Epima 2 itself. The interview data were already collected by means of questionnaires within the framework of the first survey between March 1 and April 30, 2006 and evaluated in a national study. (see http://www.epima.at/produkte/a1_suk_im_gesundheitsbereich.pdf)

Because of the systematic inclusion of all major actors in language and cultural mediation by Epima 2, a large number of responses were returned with representative results. Altogether 18 questionnaires were returned and 3 oral interviews conducted (by telephone). They were broken down as follows:

- 10 language and cultural mediators
- 2 training institutions
- 3 placement agencies
- 6 institutions that employ language and cultural mediators exclusively in the health care sector

Based on the evaluation of the questionnaire results and supplementary information from various national studies and articles, the national study provides a good starting point for the summary below of the situation regarding language and cultural mediation in Austria in which the most important results of the study are underlined.

3.3.2 Definitions

In the Austrian context interpreting is primarily viewed as conference interpreting because the focus of education and training is placed on this form of interpreting. The field of community interpreting as well as other types of interpreting are virtually nonexistent in education and training. The work performed by conference interpreters is reasonably well paid, trade associations represent their interests and traditional training institutions provide the market with new members of the profession. Community interpreting in Austria is still in its infancy and, as in other countries, is neglected or entirely ignored. (See Pöllabauer)

"Community interpreters" make it possible for people whose native language is different from that of the host country to obtain access to public institutions in the host country (hospitals, courts, schools, police, etc.). They help two of more parties who are not equal and have different knowledge and previous sociocultural knowledge to communicate to their mutual satisfaction. They translate and interpret in the service of the community for individuals or small groups (families), mostly for immigrants or refugees, in talks with authorities and welfare agencies, at schools and health care institutions. There is an especially high demand for community interpreters with rare language combinations. (See Epima 2 study)

3.3.3 Application areas

The main application areas for language and culture mediators in Austria are the health-, the social welfare and the educational sector, that are introduced here:

Health sector

According to questionnaires and the study on "Migration at the Austrian Red Cross" by Evrensel and Hörbart in 2004, there are only isolated examples of specific language-supporting programs offered to immigrants to professionalize the interaction process between people whose native and education

language is not German and health care institutions. In the cities and metropolitan areas the supply of translations and information in the native language is generally better than in remote areas.

Some hospitals only have multilingual information or educational material. As far as translations for immigrants are concerned (e.g. translations are required for the field of anesthesiology in Austria), the institutions usually cover their language needs themselves, through informal networks or in-house multilingual staff (from cleaning staff al the way to medical specialists) for cost reasons. Otherwise, according to a study from Vienna (see Recording of needs/studies), children (73%) or other family members like wives and relatives (40%) are frequently used. However, the employment of unqualified persons is generally considered to be problematic since bilingual skills alone do not guarantee interpreting competence. Some institutions already maintain central lists or pools for placement or interpreting services, though their number and implementation are still in the infancy stage and they do not meet the demand. In the case of more extensive needs (e.g. unusual languages or difficult explanations), external interpreters are employed in some cases, but as a rule only proper interpreters (from institutes or offices) are called in.

At the Klagenfurt state hospital, for example, there is a central list of bilingual staff members via which public employees can be requested. They work at no charge during their normal working hours, but are paid for their services when they are not on duty. At the Innsbruck state hospital interpreters can be requested by the wards and outpatient departments via a central list. To get on the list, interpreters have to apply to the hospital.

A special project is the "Intercultural outpatient department of the state psychiatric clinic (Psychiatry I)" in Linz, which was set up on January 1, 2005 because a significant increase in non-German-speaking patients was noted. However, psychiatric treatment in particular depends on good linguistic communication since talks are a key element of the case history, diagnosis and treatment. The patients there are treated by a special team composed of several occupational groups (psychiatric specialist, psychotherapist, specialist for psychosomatics, social worker, nursing staff). Besides the "Intercultural outpatient" staff, a pool of interpreters was set up for the languages required most, i.e. Serbo-Croatian, Turkish and Russian. In addition, there is a list of interpreters for rarer languages in the outpatient department. This innovative treatment concept enables earlier interprofessional intervention, which is extremely important for preventing chronic and more complex long-term developments especially among refugees with posttraumatic stress disorders. Among other things, the project received the Health Award of the city of Linz in 2005. Furthermore, since 1992 the alien integration office of the city of Linz has maintained a permanent internal pool of interpreters to which all municipal departments have access.

Likewise the supply of information in the respective native language can be described as better in the city of Graz and the greater metropolitan area than in other regions. In the Marienambulanz (outpatient department) of Caritas in Graz (which has existed since 1999) around 2700 people from 70 nations were treated in 2004. The goal is to provide initial and basic care to people without medical insurance or a medical insurance record card with low-threshold access in connection with:

- crisis intervention in the event of conflicts at the hospital
- preparation for birth
- external support during hospital stays

Assistance in the respective native language and the pool of interpreters are supported by the city of Graz, the federal state of Steiermark, Caritas and donations, such as from pharmacies and pharmaceutical companies.

In addition, there are other pools of interpreters in Graz, such as that of the Omega organization and the "intercultural health assistance for immigrants" of the ISOP organization, to which immigrants can turn directly if they need advice, support or an interpreting service.

Initial structures for community interpreting also came into being in the health care sector in Vienna through a project. Employment of the first community interpreters or "native speaker counselors" here goes back to the year 1989 and the WHO project "Vienna – Healthy City". On the one hand, the native speaker counselors back then were supposed to facilitate communication between the hospital staff and the Turkish-speaking patients and, on the other hand, additional costs resulting from difficulties in linguistic understanding were to be avoided in this way. In 2006, however, only five native speaker counselors were employed at Vienna's hospitals via the Viennese association of hospitals. They do not meet the needs by a long shot and the positions that became vacant in the course of time were no longer refilled. One native speaker counselor continues to be paid by the hospital itself (Preyer'sches Kinderspital). Otherwise, as in the other Austrian federal states, too, members of the family, persons in the next bed, members of the hospital's own staff or in complex cases sometimes external interpreters are called on to provide interpreting services.

Social welfare and educational sector

There is less information in the study about the social sector. Organized municipal interpreting services exist in some cities or communities, such as that of the "Alien Integration Office" in Linz with approx. 50 interpreters in 27 languages for the field of youth and family at government agencies or for counseling purposes. In some cases hospitals and doctors also make use of these services. The municipality of Karpfenberg in Steiermark, for example, has set up a citizens' office for which interpreters have been trained, though without inclusion of an interpreting institute.

Besides health care, the Alien Integration Office in Linz primarily mentioned youth/family, schools and kindergartens as institutions employing cultural mediators in the questionnaires. In the judiciary sector an interpreter is required for court hearings, for instance, i.e. only court interpreters on the list, and no "ad hoc" interpreters, may be officially called in. Turkish, Bosnian, Croatian, Serbian and Russian are mentioned as frequently requested languages, but also Polish, Czech/Slovak, Arabic, Albanian, Armenian, Farsi and Afghan, etc. (See Epima 2 study as well as Evrensel and Hörbart)

3.3.4 Assessment of needs and studies

Needs were recorded through studies only in isolated cases in Austria. One of those mentioned was a study on communication practice with non-Germans conducted at Viennese health care and welfare institutions in 1997. At the time of the survey 16 community interpreters were working at hospitals and youth welfare departments in Vienna. At present, however, only around half of the community interpreters are employed. As a result, the need for translations in public health care institutions of the city has unfortunately only been partially covered to date, although this need has existed for a long period of time. The same thing is pointed out by the results of a study conducted by the Ludwig Boltzmann Institute in 2003. At that time there were still seven community interpreters for Turkish in Vienna's hospitals.

Furthermore, there is additional need in particular for professional, independent and medically trained interpreters, predominantly in the fields of gynecology and obstetrics. This is substantiated, for example, by the study on health care services offered in the municipality of Krems conducted by the Equal development partnership "Different Origin – Joint Future" in 2003.

With regard to the language-related opportunities of immigrants in the health care sector in Tyrol, the Greens stated in the comprehensive study "Migration in the Austrian Red Cross" conducted by

Evrensel and Hörbart in 2004 that there were still many patients who could not communicate in the hospital. The integration department of the Tyrol state government (JUFF) also confirms this impression. It indicates that there is an interpreting service, but it is not taken advantage of very often because not many people know that it exists. In addition, there is hardly any qualified personnel from ex-Yugoslav or Turkish regions, immigrants from these areas of origin are employed only for lower-level services (kitchen assistants, cleaning staff, ward assistants). The demands of the Tyrol Greens went in three directions: firstly, multilingual persons should be increasingly trained as specialized staff members; secondly, the long-standing staff members should increasingly learn Turkish; and thirdly, more interpreters should be employed. (See Epima 2 study)

3.3.5 Training

Training for community interpreters is still in its infancy in Austria. Community interpreting undoubtedly opens up a new, exciting, turbulent and highly complex field of work for regular interpreters. A standard training curriculum does not exist for the training of community interpreters. A scientifically based pilot project for the training of community interpreters in Graz and a training course for in-hospital interpreter assignments in Vienna as well as isolated pilot projects for the training of health care disseminators, health care advisors and native speaker co-counselors of various organizations are mentioned.

Back in 2000 the city of Vienna wanted to introduce a university course for Community Interpreting. The "Vienna – Healthy City" project targeted the employment of language and cultural mediators – based on this special field – for the entire municipal administration to ensure communication with people speaking other languages. To be able to meet the great demand for mediators, thought was given to setting up a "university course for community interpreters".

The university course never came about while the curriculum developed for that purpose was incorporated in abridged form into a course conducted once by the Viennese association of hospitals, "Hospital Interpreters" (200-2001). Up to 2004 this training course, in which staff members of Viennese hospitals were able to acquire additional qualifications for in-hospital interpreting assignments, remained the only scientific pilot project for the training of community interpreters in Austria.

The university course "Community Interpreting" was conducted at the Institute for Theoretical and Applied Translation Science (ITAT) at the Karl Franzens University in Graz from 2004 to 2006. Continuation of this course was planned, though this depends on whether funding is provided for.

Other attempts at setting up training programs for community interpreting were limited to pilot projects, such as for the training of cultural interpreters or health care disseminators (Zebra organization – Graz; migrare organization – Linz).

University course in community interpreting, Graz

TARGET GROUP: This course was conceived as professional training for people who work and want to work as language and cultural mediators in a social, public agency, medical and therapeutic context and ended with a recognized university degree. The university course headed by Institute Director Erich Prunc and Sonja Pöllabauer was designed in cooperation with the Danaida, ISOP, Omega and Zebra organizations. It was aimed at professional interpreters as well as lay interpreters who had already worked in a language-mediating function in public life. However, the course was also recommended to students of Translation Sciences and employees of welfare, municipal, medical and therapeutic institutions.

TIME AND DURATION OF THE COURSE: The course started in October 2004, encompassing the Albanian, Arabic, Bosnian/Croatian/Serbian, Russian and Turkish languages, and ended in February 2006. The final examinations took place in January 2006.

TRAINING FOCAL POINTS: The training was offered in blocks over a period of three semesters and taught communication psychology and specific aspects of the respective culture involved in the interpreting work. Furthermore, the necessary interpreting and note-taking techniques were taught. There were also exercises in dealing with role conflicts, crisis situations and disruptions of communication. An internship at a public institution had to be completed in order to pass the course. Verification of the necessary language skills was a prerequisite. An aptitude test took place for those interested.

FINANCING: The course was largely financed by the Anniversary Funds of the Austrian National Bank and supported by the federal state of Steiermark so that course costs were limited to 150 euros per semester.

Course in hospital interpreting, Vienna

TIME AND DURATION OF THE COURSE: This was a single 16-day pilot course for the training of bilingual hospital employees for in-hospital interpreting assignments. Conducted by the Viennese association of hospitals from 2000 to 2001, this project was originally planned as a continuing long-term course, but failed due to the lack of a follow-up order from the city of Vienna.

TARGET GROUP: The course was designed for members of the health care professions, explicitly doctors, health and nursing care persons with degrees as well as high-level medical technician employees.

TRAINING FOCAL POINTS: The basic terms of interpreting, immigration and transcultural interaction, cultural perception of others and self-image, basic principles of communication psychology, basic principles of translation science, interpreting techniques, research and terminology work, professional ethics, interpreting in talks.

Pilot project: Training as Cultural Interpreter (Zebra organization, Graz)

BACKGROUND: Cultural interpreters are persons who are familiar with different cultural spheres and are able to reflect on the differences and gaps so as to support therapists or counselors alike as a "coach". In 1997 Zebra developed a training model in which cultural terms were analyzed within the framework of training evenings, sociocultural interrelationships between various cultures were examined and an introduction was provided to talk and discussion techniques. However, these cultural interpreters should primarily be employed for cultural mediation and less for linguistic translation and interpreting.

THE PARTICIPANTS were immigrants from diverse cultures of origin (high language competence and the ability to reflect were among the requirements) who had completed the training phase with a certificate as "cultural interpreter". Since then the very heterogeneous group has formed a kind of network, which is available to ZEBRA counselors as well as other institutions, government agencies, counseling offices, etc. in connection with culturally sensitive problems. In the meantime cultural interpreters are available for the following countries: Morocco, Egypt, Afghanistan, Bosnia, Ghana, Nigeria, Sri Lanka, Congo, Tunisia, Turkey, Turkish Kurds, Mozambique, Burundi and Chechnya.

Pilot project: Course for immigrants regarding health issues (migrare organization, Linz) This course is a cooperation between migrare, the center for immigrants in Upper Austria, and PGA, an organization for prophylactic health work.

GOALS: Training for immigrants regarding key health issues, dissemination of knowledge to other immigrants: immigrants as "bridges" between the Austrian health care system and people with a migration background who are repeatedly faced with barriers here. Health care knowledge is viewed as part of integration by both the Zebra organization and migrare in Upper Austria. The goal is to provide the conditional framework for successful integration of immigrants in the health care system. Better accessibility of immigrants in their groups and communities through disseminators, making use of the position of opinion leaders for better communication of sensitive health issues and the existing basis of trust are major cornerstones here. Here again the focus is more on "cultural mediation" while language and interpreting-related aspects are given little to no consideration.

TARGET GROUP: Immigrants with a good command of German from the region of Upper Austria who are interested in the topic of health care and are willing to pass on the acquired knowledge in their private sphere.

BENEFITS: The course serves the function of further education regarding major aspects of the Austrian health care system and key health issues related to "immigration and health or illness". Furthermore, the course provides a sound basis for later (recognized) training as a health counselor or in health care occupations and the participants can work as disseminators, i.e. they pass on their knowledge acquired in the theoretical part to other immigrants in the form of a six-hour project.

SUBJECT MATTER OF THE COURSES: Austrian health care system, immigration and age, safety at the workplace, contagious diseases, childhood illnesses, family planning, healthy nutrition, trauma, psychosomatics, addiction and drugs, verbal and nonverbal communication, methodology – moderation – presentation.

1st course: 2003 – 2004: Training for 15 women and men with a migration background in the following languages: Albanian, Bengali, Bosnian-Croatian-Serbian, German, English, Farsi, French, Hindi, Spanish, Turkish and Hungarian. Through their projects in 2004 they reached 570 other immigrants with whom they discussed important topics regarding health issues and the Austrian health care system.

2nd course: September 2004 – May 2005: Theoretical training from September 2004 to May 2005. Practical implementation as multilingual health education from June to December 2005. The course consisted of a total of 86 units of instruction and was financed by the federal state of Upper Austria and the city of Linz. (See Epima 2 study)

3.3.6 National networking and job description

Community interpreting is still in the initial stage of its development and, as in other countries, too, is neglected or entirely ignored as a new job description. However, various endeavors and public relations work that are already being carried out by different institutions and organizations are aimed at long-term financing and structuring of the training for and employment of community interpreters. Success has been primarily achieved at the regional and state level thus far. In Steiermark, for example, a working group has been formed to establish a nationwide pool of interpreters. (*Telephone interview with S. Pöllabauer, Sept. 19, 2007*)

3.3.7 Financing and placement

Placement predominantly takes place at the regional and local level in connection with the institutions that conduct training projects. Some hospitals or organizations maintain in-house or local lists or pools of interpreters, but they are not subject to any quality criteria. (See also in this context the point Institutions that employ cultural mediators). (Telephone interview with S. Pöllabauer, Sept. 19, 2007)

3.3.8 Literature

- Study of Epima 2 development partnership, Stofner Christiane 2006; see on the Internet at http://www.epima.at/produkte/a1_suk_im_gesundheitsbereich.pdf
- Pöllabauer, Sonja: Nema Problema, alles paletti...? Community Interpreting aus der Sicht von NGOs Eine empirische Erhebung der Situation in Graz, in: Dolmetschen. Beiträge aus Forschung, Lehre und Praxis, hg. von A. Kelletat,. Frankfurt am Main und andere 2001 (FA SK Publikationen des Fachbereiches Angewandte Sprach- und Kulturwissenschaft der Johannes Gutenberg-Universität Mainz in Germersheim, Reihe A, Bd. 30), 65-78
- Evrensel, Hörbart: Migration im Österreichischen Roten Kreuz. Gesamtstudie. Ludwig Boltzmann Institut für Menschenrechte, 2004; see on the Internet at http://www.roteskreuz.at/show_medium.php?mid=4308

Further literature:

- Pöllabauer, Sonja; Prunč, Erich: "Brücken bauen statt Barrieren. Sprach- und Kulturmittlung im sozialen, medizinischen und therapeutischen Bereich", Institut für theoretische und angewandte Translationswissenschaft, Karl Franzens Universität Graz, 2003
- Grbić, Nadja / Pöllabauer, Sonja (Hrsg.): «Ich habe mich ganz peinlich gefühlt. Forschung zum Kommunaldolmteschen in Österreich: Problemstellungen, Perspektiven und Potenziale", Institut für theoretische und angewandte Translationswissenschaft, Karl Franzens Universität Graz, 2006

3.4 Spain

In this section you can find relevant information about language and culture mediation in Spain.

3.4.1 Questionnaire evaluation

The national study in Spain was conducted – in the periods from March to May 2006 and April to June 2007– using questionnaires within the framework of the first and second survey. Since there is no systematic recording of all relevant actors in the field of language and cultural mediation in Spain, the responses returned are not representative of the national situation, but – together with selected information from articles and documents – they provide a good insight. In Spain a total of 9 questionnaires were returned. They are broken down as follows:

- 4 language and culture mediators
- 2 training institutions (during the 1st survey) and
- 2 training institutions (during the 2nd survey)
- I placement agency
- 2 institutions that employ language and cultural mediators

3.4.2 Definitions

Language and cultural mediation has not developed very far as a professional field in Spain. Altogether there are two different areas of work: on the one hand, interpreting and translating for public services with the focus on language mediation. These functions are comparable to that of intercultural translation in Switzerland. In addition, there is the area of intercultural mediation where interpreting or language mediation is disregarded and the focus is placed on cultural mediation, in the interest of avoiding conflicts. However, the term intercultural mediation also serves as a designation for both areas; they cannot be distinctly differentiated from one another in Spain due to the lack of a clearly defined job profile there.

Intercultural translation (traducion y interpretación en los servicios públicos): Intercultural translation involves more than communication of the linguistic message. Intercultural mediation is a new form of translation that goes beyond the classic role of the interpreter, who focuses purely on rendering the words. Intercultural translation means active involvement in the communication process in order to convey further understanding of the impact of cultural factors in the communication process. Through his or her activities an intercultural translator bridges the gap between two cultures and languages so as to create understanding between the different groups involved. (see Valero Garcés)

Intercultural mediation (mediación intercultural): Intercultural mediators are usually called in after a conflict has flared up. They are neutral and committed equally to both parties. They mediate in cases of conflict and help to resolve the conflict fairly, constructively and on a basis of agreement through negotiation as an impartial third party. (see SEMSI)

In intercultural mediation the mediator acts as a channel to support communication and is assigned to deal with conflicts where ethnicity, nationality, religion, etc. play a role. The focus is on providing support in problematic situations in order to foster a dialogue and avoid or resolve conflicts. Intercultural mediation is based on the pluralistic concept of culture, which is why so-called "community mediation" can also go further than resolution of the conflict, and is aimed at reinforcing tolerance, respect, participation and development of cohesion within the community. (see Campos Marquès)

Intercultural mediation is a process that contributes to better communication and improves the relations and intercultural integration between people and groups from different cultures.

Three fundamental aspects are important in this context:

- ensuring communication to maintain the social cohesion, autonomy and social integration of minorities and enable a new form of coexistence (i.e. living side by side
- counteracting racism and exclusion of ethnic minorities
- acting as a link between actors having difficulties with communication or conflicts of an intercultural nature.

(see Triangulo website)

4.4.3. Assessment of needs and studies

Immigration and the resulting social challenges are receiving more and more attention in Spain, where immigration figures have been rising rapidly since the 1990s (at the moment approx. 10.8% of the Spanish population are migrants), Nevertheless, the field of intercultural translation has undergone little development and there are hardly any professional services in this area. Thus far short-term, ad-hoc solutions have prevailed and in practice it is primarily volunteers or students who are enlisted instead of qualified persons. (see FITISPos)

In a number of papers published by Instituto Cervantes in 1999 (www.cvc.es) the situation was described as follows: Communication between the government and new immigrants in the population is not always as satisfactory as it should be. Spain was not prepared for dealing with unfamiliar languages and cultures. Consequently the following picture has emerged in the field of intercultural translation:

- Lack of relevant knowledge among many translators or interpreters regarding professional ethics and designations for official qualifications, certification or competence.
- Frequently inappropriate procedures are used by public officials in general services (children, relatives and friends are called in as translators).
- Lack of quality and performance guidelines.
- As a result of inaccurate translations or incorrect interpreting, members of minorities cannot exercise their rights.
 (see Valero Garcés)

The COMUNICA research group (University of Alcalá in cooperation with various municipalities), which is very active in the field of intercultural translation, provides a survey of current studies and research activities in Spain.

- University Jaume I, Castelló. Research projects in the field of intercultural mediation and translation in the health care sector.
- University of Granada, Andalusia: PhD courses 1999-2006 in "Community Interpreting" and dissertations in this field (as the first in Spain). In addition, GRETI research group since 2001, established by the Andalusian regional authorities, exploring translation and the challenges of globalization with the aim of improving courses of study for interpreters.
- University of Alcalá, Madrid: COMUNICA research group, which was established in 2005 to compile national studies on translation and interpreting in conjunction with public agencies, with the aim of bringing together NGOs, universities and public agencies in order to push forward training and research in this field. Furthermore, FITISPos research group, which primarily examines the employment of professional or nonprofessional interpreters in a medical context. (see FITISPos)

3.4.4 Application areas

Interpreting and translation services in public agencies exist only in isolated cases in some towns in Spain. Schools, banks, unemployment centers, hospitals, etc. were among the institutions mentioned as users of intercultural translators. The translators deal with people of different cultures and languages

and speak various languages. In the case of topics like money, gender, food, religion, death and illnesses, which are taboo in one society but not in the other, the intercultural translator has to intervene in order to prevent communication from collapsing and to facilitate social integration. (see Valero Garcés)

Intercultural mediators, on the other hand, may be assigned to the following situations by the town:

- difficulties between locals and persons who have migrated there
- difficulties in coexistence
- lack of information about customs and practices of the other culture in each case
- lack of information on the part of migrants about the social system in the country where they live
- prejudices between people of different cultures

Important characteristics of an intercultural mediator include:

- being aware of the realities of migration (due to one's own migration background)
- being familiar with the ethnic background of the people and with their problems
- being able to gain access to people and institutions, etc.
- The objective should be to create relations between different ethnic groups and cultures in which everyone learns something from the others. (see Campos Marquès)

Based on the results of the questionnaires, two areas of employment in public agencies will be presented here as examples:

Terassa municipal administration, Barcelona: As a response to the internal needs of municipal administration employees and to community conflicts (migrant conflicts in Can' Anglada in 1999), 4 permanent and 6 temporary staff members were assigned, beginning in 2000, to translation services and intercultural mediation, in particular for the Maghreb community; this was financed by the city. Examples of institutions that employ language and cultural mediators include: social services, citizens' offices, women's projects, local police, industry, health, adult education, transition between school and vocation.

Mataró municipal administration, Barcelona: Intercultural mediators have been hired as support for communication between public agencies and migrants, for cultural mediation, coexistence and integration of the district residents.

The four positions corresponded to the population groups in Mataró: a woman from Gambia, a woman from Morocco, a man from Senegal and a Berber. Their areas of responsibility are:

- translation work (in the course of the project it became evident that cultural mediation and translation are gaining importance)
- interpretation of cultural irritations and conflicts
- advising specialists
- taking part in municipal projects

The following fields of work are involved:

- 1. Health care sector: working at the family center and cooperating with health services providing information and education on family planning, e.g. mediation in connection with language difficulties and cultural codes. Accompanying people to government agencies and advising specialized staff.
- 2. Educational sector: working at primary and secondary schools and in special courses. Accompanying parents or teachers on home visits, assisting with communication problems between parents and school, specialized conference for teachers, etc.

3. Social services: translation between social workers and clients, accompanying people to social services offices and interpreting cultural codes that hinder work.

Launched as a pilot program by the local administration, the project established itself as a major tool for public administration, schools, organizations and citizens in the district. It is financed by the city and the public administration. (see also Campos Marquès)

In the survey, the intercultural mediators (1 man [Morocco] from the project in Mataró and 3 women [Poland, Spain, Brazil] from the Goada-Acoge Project from Guadalajara) stated the following regarding the added value of the profession:

- Explaining the standpoint of the migrant culture
- Opportunity to understand the migrants and their points of view
- Forging links between the various groups

The following were mentioned as difficulties:

- Language barriers
- Summarizing
- Little participation on the part of the migrants
- Little recognition of the profession

3.4.5 Training

The lack of recognition for this profession unfortunately also means that there are only a few existing training courses; no standardized training curriculum for intercultural mediation and translation exists in Spain.

At the moment there is a broad range of training programs for intercultural translation and intercultural mediation that extend from basic level courses all the way to master's and postgraduate courses of study. All training courses have the following common goals:

- Knowledge regarding the background behind migration: interculturalism and the role that intercultural mediation can play as an intervention technique.
- Methods for practical use: skills and tools that promote a dialogue, communication and relations between the actors in social services agencies and the clients or between the local and the migrant population.
- Attitude / behavioral training: progress in further development or changing of modes of behavior, opening oneself to others, training behavior in the event of conflict, and reflecting on one's own role and the roles of others.

(see Campos Marquès)

The following programs exist in the field of **intercultural translation** at the university level:

- University of Alcala de Henares, Madrid: Official master's degree in Intercultural Communication, translating and interpreting in public service (the first in Spain).
- Postgraduate courses at the University of Salamanca and Valladolid: Official master's degree in Translation and Intercultural Mediation in a professional context with training in community interpreting (since 2006).
- University Jaume I, Castellón: Postgraduate course with an integrated approach between community interpreting and intercultural communication in the health sector.
- La Laguna University, Tenerife: Postgraduate course with degree in Community Interpreting and Translation (since 2006).
- University Vic, Catalunya: Introductory courses on translation in public agencies, supported

- by the Catalonian government in 2004, 2005 and 2007. Furthermore, courses on intercultural mediation or "link-workers" that are also based on the concept of linguistic translation.
- Other universities offer courses in community interpreting, advanced training and supplementary modules for volunteers within the framework of the studies.
 (see FITISPos)

The curricula of two universities were described in more detail in the questionnaires for training centers:

University of Alcala, Madrid: One-year training program in translation for public services as part of the master's degree in intercultural communication, translation and mediation for social services. This government-financed project provides training for intercultural translation in the health care sector, public administration and the courts. A prerequisite for participation is a university degree and a command of Spanish and another language. To date there have been 300 participants from 18 nations.

Competencies that are taught:

- Intercultural communication
- Understanding the public services and their procedures (police, clinics, courts, municipal administration, schools)
- Language and cultural mediation
- Translation and mediation in social services
- Technical terms

Subjects of the course of study:

- Interlinguistic communication
- Institutional communication for migrants: translation and mediation in public services
- Techniques and resources for translation and mediation in public services
- Translation in the health care sector
- Translation in the courts
- Specialized translation: health care, courts
- Internships at the institutions
- Master's thesis

University Jaume I, Castelló de la Plana: Postgraduate course in intercultural mediation and translation in the health care sector in cooperation with the University of Granada, Alcalá, the CRIT study group, state health institutions, NGOs and the Triangulo study group. Thus far there have been 13 participants. The requirements are: linguistic competence in the language of origin and "intercultural motivation". The following competencies are learned in a course encompassing 120 hours of classroom work and 40 hours of practice: intercultural competence, mediation competence, translation competence.

Subject matter:

- Translation and intercultural mediation in the health care sector
- Migration and social services
- Health and disease in different cultures
- Communication between doctor and patient in different cultures
- Medical terminology and fields
- Translation techniques
- Mediation and communication techniques
- Internships

By virtue of the sharp rise in the population with a migration background in Spain and the intensification of the resulting sociocultural problems in some regions, a growing awareness has developed with respect to the associated problems. Various training programs in intercultural mediation and intervention have been launched in the interest of resolving intercultural conflicts, especially in Catalonia and Andalusia. EMSI and SEMSI, projects sponsored by local organizations, offer such courses in intercultural communication and mediation, though without a defined job description or language training.

SEMSI training project, Madrid: A dramatic increase in migrants in the Madrid metropolitan area at the beginning of the 1990s – from 53,593 in 1996 to over 261,260 in 2003 – gave rise to a need for mediation between public institutions and the foreign population to support integration and participation. A program entitled "Immigration and Multiculturalism" was introduced at the Free University of Madrid in 1989 in order to boost research, training and intervention in the field of migration, interethnic relations and social development. This resulted in several projects, including SEMSI (Servicio De Mediacion Intercultural En El Municipio De Madrid), an Equal Community Project of the Fundacion General de la Universitad Autónoma de Madrid in cooperation with Servicios Sociales de Atencion Primaria del Ayuntamiento.

Goals: Social integration of foreign immigrants by means of the special methodology of intercultural mediation. Thirty mediators of different ethnic background (mostly women and from a total of 14 nations: Morocco, Algeria, Cameroon, Rwanda, Chile, Ecuador, Colombia, Peru, Cuba, Bulgaria, Portugal, Palestine, Argentina and Spain, as well) worked in 21 regions between 1997 and 2002.

Areas of responsibility: Specialists trained in migration, interculturality and mediation are assigned to the social service agencies in a district and mediate between the immigrant population on the one hand and the social service providers, public and private enterprises, institutions and members of the foreign and local population in the neighborhoods on the other hand. They specialize in community mediation in a multicultural context with the focus on legal mediation, social networking, vocational integration, family mediation, mediation in the field of education, etc. They not only look after people from their own country, but also work together with everyone outside their own group and affiliation.

Examples of activities:

- Information and support for the foreign population: gaining access to resources, such as
 improvement and dissemination of information, preparation and translation of materials, advising and accompanying citizens to institutions or authorities for the purpose of translation
 work or mediation.
- Supporting specialists in connection with social intervention (particularly social workers, along with others), translation work, interpreting and cultural mediation.
- Promoting social and civic involvement, increasing participation of immigrants in social and public life, networking among citizens in cooperation with local organizations (e.g. preparation, implementation and evaluation of community activities or intercultural initiatives and public relations work).
- Fostering intercultural coexistence and improving relations between the local population and immigrants through such activities as sensitization of the local people to the concerns of the foreign population, mediation, resolution of conflicts as well as further training courses on cultural topics and backgrounds.
 (see SEMSI)

In addition, there are various project-related advanced training programs for specialists or training courses in intercultural mediation that are not officially recognized, such as the "La Formiga" project

(subject matter: intercultural mediation, mediation techniques, methodology, migration and interculturality), and focus on work in health services, education or public services, etc.

Furthermore, the ACISI training group offers long-term advanced training and supervision for intercultural mediators and other specialists who are already at work in this field (topics: mediation skills, migration process and cultural aspects, mediation in various areas, education, training, etc.) (See questionnaire results for training centers in this connection.)

3.4.6 Nationale networking and job description

Intercultural translation and interpreting in public agencies:

The lack of recognition for this type of translation and the fact that there are only a few courses and that the job is not well paid because of the working environment have hampered further development of a separate job description in Spain to date. The COMUNICA Initiative, which was established in 2005, has put together courses and studies of the country on the subject of intercultural communication and wants to establish a job description for intercultural mediation and translation for public services (mediación intercultural y interpretación para los servicios públicos). The goal of the group is to bring together NGOs, universities and public service agencies in order to promote training and research in this field. (see Valero Garcés and FITISPOS)

Intercultural mediation:

As a separate new occupational field, Community Mediation requires an academic education and ethological and deontological principles. As of recently, efforts have been made to set up training at universities and in connection with services for residents. However, difficulties are posed by the fact that no legally stipulated training standards exist as yet. (see Campos Marquès)

At the moment there is discussion about whether intercultural mediation can be regarded as a separate profession or whether it constitutes additional tasks to be performed by social workers, judges, etc. Formally trained mediators come from a number of different occupational groups and hold university degrees in various areas of mediation (family mediation, international mediation, cultural mediation). Informal mediators are people with an immigration background without a specific degree or training and who have realized that they can act as translators and mediators in certain situations; consequently they offer their services to social institutions (health services, social services, the courts, etc.). One of the problems is that the quality of the services performed by informal mediators varies considerably (for example, they are not impartial enough or are too much influenced by their own native culture).

There is a tendency, therefore, to preferably employ professional mediators with a formal university degree for intercultural mediation. On the other hand, however, they must be able to put themselves in the position of the clients. For this reason intercultural translators may be required instead and the work of the mediators could also be performed as a cross-sectoral task by social workers, teachers, etc. Currently efforts are thus being made to win over more and more people with an immigration background for this training and additionally to make use of their linguistic and cultural competence. (e-mail Izaskun Goikoetxea, TRANSITO, June 26, 2007)

Furthermore, there is an ongoing debate over the cultural or ethnic origin of intercultural mediators; three different positions are taken here:

- Mediators have to correspond to the ethnic background of the group for which they work because this is the only way to ensure access to the cultural codes.
- Too much emphasis on cultural and ethnic factors in the mediation may lead to problems.

- Mediators should have knowledge and experience related to at least two cultures (bicultural).
- The professionalism of the mediators is more decisive than ethnicity. Recognition and their
 position as neutral and trustworthy mediators as well as the trust placed in them are more
 decisive than their ethnic identity.

(see Campos Marquès)

The Triangulo group represents at the national level the interests of intercultural mediators, aiming for recognition and appreciation of the profession. These are persons who are employed in the field of migration assistance, social work and intercultural mediation. The occupation came into being through training projects conducted by two organizations, *La Federación Andalucía Acoge* and *La Asociación Desenvolupament Comunitari*, in 1995-1998. The goal was to train intercultural mediators within the framework of the Leonardo Da Vinci program in cooperation with CEBAI (*Bruxellois Dáction Interculturelle*). A first meeting took place in 1998 to compare work and training and to exchange experiences. Since 1999 there has been cooperation in the training process through a dialogue with actors, authorities, organizations, social services and migrants. The group has expanded in the meantime and is committed to social and official recognition of intercultural mediators, better coexistence of culturally diverse people and groups, and standardized training. (see Triangulo website)

3.4.7 Financing and placement

Placement for intercultural mediators or translators is not systematically or centrally organized and is usually carried out at the municipal level via relevant contacts in the towns or projects. In most cases funding for employment is provided for individually through the towns. In some cases national project financing, such as via federal or EU funds, was mentioned in connection with regularly employed mediators in the projects.

3.4.8 Literature

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3.5 Italy

In this section you can find relevant information about language and culture mediation in Italy.

3.5.1 Questionnaire evaluation

The national study in Italy was conducted in the periods from March to May 2006 and April to June 2007 using questionnaires, operating within the framework of the first and second surveys. Since there is no systematic recording of all relevant actors in the field of language and cultural mediation in Italy and since there are independent actors and strategies at both the regional and local level, the responses returned – together with the selected information – merely provide an insight into the situation prevailing for language and cultural mediation in Italy. A total of 10 questionnaires was returned in Italy. They are broken down as follows:

- I language and cultural mediator (during the second survey)
- 2 training institutions (during the first survey) and
- 2 training institutions (during the second survey)
- I placement agency (during the first survey) and
- I placement agency (during the second survey)
- 2 institutions that employ language and cultural mediators (during the first survey) and
- I such institution (during the second survey)

3.5.2 Definitions

In Italy language and cultural mediation has developed considerably as a professional field in practice, but is organized differently at the regional and local levels and the service is not offered on a large-scale basis across the country. In Italian literature the actors in this field are designated as mediatore (inter-) culturale, i.e. cultural mediators or intercultural mediators, or also as mediatore linguistico culturale, i.e. language and cultural mediators. In the following I will use the term cultural mediators.

Cultural mediators work for the public administration and other institutions in Italy in supporting encounters between residents of different ethnic or cultural backgrounds. They are trained to maintain an impartial position and professional confidentiality while supporting the dialogue between service providers (representatives of public services, such as police, clinics or health care institutions, day care facilities, counseling and information services, etc.) and immigrants. Since most cultural mediators come from the same countries as the immigrants, they offer their linguistic support in addition to assistance with orientation at the cultural level. (see CIES website)

In practice, however, there are two "different types" of cultural mediators in Italy who in most cases differ in terms of age, status, pay and ethnic origin. First of all, there are the non-academically trained cultural mediators, usually immigrants themselves, who are employed as community interpreters in the nonprofit sector either as volunteers, in an honorary capacity or as paid employees. Secondly, there are the cultural mediators or interpreters (called *interprete di trattativa*) who receive formal education at a university, are predominantly of Italian origin, work in the private sector and sometimes in the non-profit sector, and are better paid because of their education and training. (see Russo and 5.5 Training)

3.5.3 Assesment of needs and studies

Unfortunately no studies with a national reference were found concerning language and cultural mediation. However, there are studies with a regional focus, such as the comprehensive study on cultural mediation in the Piemont region. (see Allasino et al. in this connection)

3.5.4 Application areas

Cultural mediation in Italy developed in different ways, growing out of needs at the local and regional levels. Since towns are confronted with a constantly growing number of immigrants, the demand by social service agencies for support by cultural mediators in dealing with clients with a migration background continuously rises as well. In 1998 linguistic support for ethnic minorities by cultural mediators was officially recognized in Italy by national Title 40/98, which regulates immigration and the status of immigrants in Italy in general. (see Russo and 5.6 Job description)

Mentioned as institutions that employ cultural mediators are, in most cases, public and municipal services, particularly institutions involved in the area of immigration and integration (including homes for minors, asylum coordination offices, initial counseling offices for immigrants, police, prisons and courts, employment offices, etc.) as well as in the health care and education sector..

The following fields of work are cited in the officially recognized training profile for cultural mediators in the Campania region:

- Public administration: registry offices, unemployment centers, etc.; institutions for immigrants, etc.
- Social and health care services: clinics, counseling centers, information centers for social health, drug prevention services, etc.
- Public security: police stations, aliens police, transitional hostels
- Integration services: institutions for social and cultural integration, looking for housing, language courses, etc.
- Schools
- Public and private social institutions and centers: reception centers, special reception camps or accommodations, institutions for minors (see job description of the Campania region)

As stated in the definition of the standard intercultural mediator according to the Piedmont Region Professional Training Council Department: a mediator works for facilities and services, public as well as private (health care, hospitals, family guidance bureaus, schools, welcoming centers, social assistance services, penitentiaries, state and local public administration). He/She cooperates with public and private service operators in carrying out their tasks and helps plan interventions in order to guarantee results. (see FB)

Functions:

Cultural mediators act as cultural and language mediators to facilitate communication between two parties and create understanding at the linguistic and cultural levels. The use of cultural mediators is aimed at facilitating the integration and orientation of foreign citizens into the Italian social context. They work for public agencies and institutions such as schools, police stations and courts, and maintain a sense of impartiality, professional confidentiality and distance between institution and client. Cultural mediators are auxiliary specialists who support the particular professional staff (teachers, social workers, etc.) in their dialogue and activities with immigrants.

Generally, cultural mediators are not called in until initial signs of problems or conflicts emerge. If circumstances permit, they are also deployed preventively to facilitate the relationship between people of different cultures and to prevent discrimination based on ethnic background. Cultural mediation requires special methods and skills in interaction, such as listening, accompanying, supporting, providing information, translating and counseling with respect to cultural aspects. The main tasks in providing support between the professional staff of any given institution and immigrants, who are in fact their clients, are summarized as follows:

Cultural mediators...

- provide for correct communication and mutual understanding between service providers (social institutions, health care facilities or educational institutions, etc.) and the clients,
- are involved in the reception and/or admission of the clients,
- inform and introduce clients to the available services,
- accompany clients to local services offices,
- assist in translating information material and documents,
- assist in writing information material by pointing out specific cultural aspects associated with specific ethnic minorities,
- carry out cultural mediation (consulting on cultural assumptions and stereotypes),
- explain to clients the role and competencies of the qualified staff in the service offices provided,
- make suggestions for adapting the services to the respective needs of the clients.
 (see "Tante Tinte" website)

Peer mediators as cultural mediators

In pilot projects in Rome and Turin so-called peer mediators are employed as nonprofessional or "short-term cultural mediators"; they work with juvenile immigrants or refugees, for instance. The function of these young peer mediators is to support other young immigrants. A relationship of trust is built, not so much through language mediation, but more in social integration and interaction with authorities, as well as in personal matters like contact with their families at home. In some cases professional social workers and peer mediators perform streetwork in teams in order establish contact with other young persons and support them with information and counseling.

One advantage of peer mediators is their greater closeness to the world young people live in as compared to grownups, who have often had different experiences as immigrants and thus suggest other modes of behavior. A young person is more likely to be accepted by people of the same age, can act as a role model, perform mediation work and provide temporary support. (see article "Mediatori culturali e peer educators")

3.5.5 Training

This profession exists all over Italy, but the training curricula vary from region to region, though only to a minor extent. There are numerous nonacademic training programs for language and cultural mediation, primarily for the target group made up of ethnic minorities. A problem that arises in this context is that many immigrants are employed as cultural mediators in practice, but do not receive appropriate training or do not have a relevant recognized degree. An exception is the course specially designed for immigrants at the University of Siena. Conversely, there are trained interpreters with university degrees who do not have a migration background.

Responding to the demand for professional mediators in practice, around 30 universities and other private institutions in Italy have been offering a number of (post-graduate) degrees in the field of language and cultural mediation since the university reform in 2001-2002 (which introduced new degrees).

The curricula essentially differ in terms of the specific approved qualifications. Some degrees emphasize interlinguistic and/or intercultural mediation skills, such as Lingue pro La mediazione linguistica (Languages for linguistic mediation, University of Cagliari) or Esperto linguistico pro l'impresa (linguistic expert for companies, University of Ragusa). Other degrees, such as Linguaggi multimediali e informatica umanistica or Traduzione e interpretazione pro usi linguistici speciali are more general ("Multimedia languages and humanistic information technology", "Translation and interpretation of specialized languages", University of Naples). (see Russo)

There are numerous nonacademic training programs for language and cultural mediation, though only at the local and municipal level, primarily in the form of projects. Training courses in language and cultural mediation started back in the early 1990s thanks to local authorities (of the regions, provinces and cities), immigrant organizations, NGOs and nonprofit organizations, usually within the framework of projects (financed, for example, through European Social Fund support). These training courses were offered for immigrants who have the same cultural background as the clients and are employed to act as a link between the local and the immigrant population. One example of this is the training provided by the ABATON organization in Salerno, whose curriculum for training cultural mediators is officially recognized as vocational training by the Campania region. The project is financed with EU and regional funds. The following training standards apply to the entire region. Altogether the training lasts 600 h (300 h of classroom instruction and 300 h in practice). The subject matter is divided roughly into six areas:

- Professional work techniques (intercultural mediation, conflict mediation, communication, etc.)
- Laws and institutions (social and political situation at the national and regional levels, etc.)
- Language (English and other languages)
- Social psychology, educational sociology and didactics
- Health care system
- Statistics and information

The training is aimed at persons from the third sector: immigrants and unemployed persons with advanced education. Job advertisements elicit a large response; of 100 applicants, only 20 are selected.

The criteria for participation are:

- being of age
- university entrance qualification
- knowledge of Italian (immigrants who cannot demonstrate adequate command of Italian have the opportunity of taking part in a language training course beforehand)
- knowledge of one of the following languages: English, Spanish, Arabic or another language outside the territory of the EU

The following **competencies** are to be acquired during training:

Basic skills

- Knowledge about the various cultures in Italy (traditions, religions)
- National laws and structures for immigration
- Initial and follow-up support for new arrivals
- Basic knowledge regarding Italian lessons for foreigners and the related problems

Professional skills in:

- Intercultural interaction
- Support
- Information
- cultural exchange and mediation between immigrants and institutions
- Advising local service providers
- Cooperation with medical staff, teachers, lawyers and judges, police officers, social workers, etc.
- Counseling and supporting immigrants according to their needs
- Mediation between different cultures, religions and views
- Planning activities on cultural integration for various circumstances
- Preventing behavior and decisions that tend to give rise to prejudice and discrimination

Cross-sectional competencies for:

- Interaction between persons, groups and institutions
- Dealing with unexpected situations
- Communication using different media (writing, telephone, Internet)
- Problem-solving strategies for practice
- Conflict prevention and management

The curriculum for the training of cultural mediators in the Campania region can be seen on the Internet at: www.pro-qualifizierung.de/curriculum. (see job description of Campania region)

3.5.6 National networking and job description

In *Testo unico Esparsette disciplina dell'immigrazione* (unified legislation on immigration) and in *Documento programmatico relativo alla politica dell'immigrazione* (practical document on immigration policy), cultural mediation is described as a constant and indispensable element for the social integration of persons who have recently "landed", enabling them to exercise their rights and supporting their cultural integration into society. Thus cultural mediation helps to alleviate fear and distrust; it promotes respect for differences and prevents racist, xenophobic and discriminatory behavior. (see Castiglioni)

In the new Immigration Act of 1998 (L.40/98) explicit mention is made of the job description of cultural mediators:. The...State, the Regions, the Province and the Common ones in the within of the own competences favor the realization of conventions with associations for the employment, to the inside of the own structures, of titular aliens of paper of stay or allowed of stay of not inferior duration to two years, in quality of intercultural mediators, to the aim to facilitate the relationships between the single administrations and the aliens pertaining to the various ethnic, national, linguistic and religious groups". (See article "Mediatori culturali e peer educators")

After implementation of this Immigration Act, a working group was established at the institutional level, where several hearings took place with ONE (National Coordination Office for Social Integration of Foreigners), CNEL (National Council for Industry and Labor), and representatives of cultural mediators and organizations in order to draw up a national statement to guide regional governments. This was to take the form of a recommendation for cooperation with cultural mediators and was to boost national recognition of the job description. However, this national recognition of the job description has yet to come about. (See website www.cies.it)

Training courses in language and cultural mediation started back in the early 1990s. Associations and organizations of cultural mediators then developed out of training courses for immigrants, primarily in northern and central Italy. Nowadays employment of cultural mediators is common practice in generalized public services all across the country, and particularly in schools, social and health care institutions and at police stations and courts. As a result of Italy's territorial heterogeneity, however, there are different regional standards, structures and practices regarding cooperation with cultural mediators, thus preventing further professionalization. Cooperation in the field of cultural mediation is still predominantly project-related or on an honorary basis. Standardized professional training for cultural mediators and a national job description for cultural mediators with relevant training and functions do not yet exist in Italy. (See Russo)

Regional autonomy has applied with regard to education and training in Italy since 1970. This means that the responsibility for recognition or accreditation of the job description lies at the regional level. The Piemont region, for example, has recognized qualification standards for the training of cultural mediators since 2002 and the Campania region since November 2003. Calls for applications and com-

pletion of the training course are then valid nationwide after accreditation. However, accreditation has to be renewed every two years, resulting in considerable bureaucratic work and expense for training institutions. Only in the last three years have efforts been made to harmonize training in the various regions. (See job description in the Campania region and Allasino, among others)

3.5.7 Financing and placement

In most cases the training courses are funded at the municipal or regional level through co-financing, such as through European project funds (e.g. ESF). Organizations of cultural mediators have arisen out of some training courses, like the Sanabil cooperative from Turin, the ARCI cooperative from Salerno and the CIES organization. CIES, for instance, which arranges for the employment of cultural mediators (see also "Financing and placement"), offers the two forms of language and cultural mediation on site and translation or mediation via telephone. It maintains a database listing about 600 cultural mediators from approx. 50 different countries of origin and offers this service to public and private agencies. In Bologna, for example, cultural mediators are placed by municipal services. (see CIES website)

3.5.8 Literature

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3.6 Germany

In this section you can find relevant information about language and culture mediation in Germany.

3.6.1 Questionnaire evaluation

The following information is not result of a questionnaire evaluation or literature research, like in the other countries. The information was compiled by the project coordinators Varinia Fernanda Morales and Melanie Assauer from the sub-project SpraKuM in Wuppertal, a qualification project of language and culture mediators of the EQUAL Development Partnership "TransKom". (See "contacts")

3.6.2 Definitions

In Germany there are a large number of terms and different training approaches relating to language and cultural mediation. They range from social-medical interpreters and integration guides to language mediators and community interpreters all the way to integration assistants, intercultural consultants or language and cultural mediators as such. The subject matter of existing curricula and the length of seminars or training courses are just as diverse. Some further training courses, for example, are conducted on one or more days while other programs are offered over a period of months or within the framework of courses of further study.

Based on this diversity, three training providers joined forces in Germany within the framework of the European initiative EQUAL in mid-2005 in order to develop a standardized range of further training programs out of tried and tested training courses with the aim of ensuring long-term quality nationwide.

One of these providers is the organization *Gesundheit Berlin e.V.*, which trains immigrants as so-called **community interpreters** in a 12-month training program. The bilingual participants are trained to furnish professional support for the care of non-German-speaking patients, mainly at health care institutions, on the basis of interpreting and communication competencies. The curriculum focuses primarily on teaching basic medical, psychological and health-related principles as well as explaining the structure of the health care and social welfare system in Germany. Later coordinated assignments on call via the placement tool of the community interpreter service are trained within the scope of internships.

The second provider is the *Intercultural Office of the city of Darmstadt*, which has been conducting training for **integration assistants** since 2003. Its program concentrates on imparting know-how in the field of social services and education to the immigrant trainees so that qualified support can be provided to specialized social workers in their contact to immigrant families and communities. The focus of the 18-month training program is thus on teaching basic skills in the fields of social work, day care centers, schools and vocational training as well as extending know-how with regard to educational and family assistance. The job description of integration assistants also encompasses sociocultural competencies in dealing with institutions. In addition to assistance, the work performed by these qualified persons is to ensure that a basis of trust is established to immigrant communities and information is communicated to immigrants.

Diakonie Wuppertal, the third provider, represents a kind of link between the two above mentioned initiators in the joint development of vocational training based on its training program for language and cultural mediators. Refugees and asylum seekers receive the necessary qualifications here to perform professional interpreting work in the health care and social services field and to pass on sociocultural background knowledge. Language and cultural mediators convey the sense of what has been said and improve communication and thus understanding between foreign-language-speaking clients/patients and the respective specialized staff through intervention in connection with socioculturally

specific aspects of counseling and treatment. This requires special skills with respect to sociocultural sensitization and communication, mediation and conflict management, interpreting techniques and relevant specialized terminology in the area of health care and social services. Language and cultural mediators have solid basic knowledge about the structure, fields of work and problem areas of the educational, health care and social services sector in Germany. They are bilingual and have not become alienated from their own culture and socialization.

The result of the amalgamation of these three training providers and the work they have been performing since 2005 for the purpose of recognition of a **standard government-approved job description** is further training of immigrants (including refugees and asylum seekers) as so-called **language and integration mediators**.

The job description of language and integration mediators combines the functions of community interpreters, language and cultural mediators and integration assistants. Language and integration mediators communicate at both the language and sociocultural level with the help of their background knowledge about their own cultures of origin and thus guarantee communication between people with a migration background, the respective qualified staff and the health care, educational and welfare institutions. They have the necessary basic know-how in the fields of education, social services and health care. They are able to interpret professionally in the case of "language and cultural mediation" as well as support qualified social workers in the case of "integration assistance". The further training program is divided into modules and covers a total period of 18 months plus a six-month advanced module aimed at qualifying participants for university admission based on its specifications.

3.6.3 Application areas

The institutions that employ language and integration mediators operate in all areas of the education, health care and welfare sector in Germany whose services are made use of by immigrants. These are institutions and services that rely on language and/or cultural communication links in the treatment, counseling and support of immigrants and refugees. In the health care sector this also involves psychiatric and psychosocial institutions and in the social welfare sector primarily education and family assistance. Language and integration mediators are predominantly employed on a freelance basis, but also in full-time or part-time positions at the institutions and booked for this purpose via regional placement agencies. Altogether 80% of the graduates from Darmstadt and Wuppertal are employed, though in Wuppertal 25% of these work as language and cultural mediators in the health care field.

The increased political commitment to intercultural opening of the standard service places greater emphasis on continuous employment of language and integration mediators to provide high-quality counseling to persons with a migration background. According to surveys, institutions display an increased awareness of the necessity of cultural mediation alone since a culturally different understanding is often not identified until language and integration mediators are employed, even if a fundamental potential for understanding exists by virtue of basic language skills. Berlin counted a 224% increase in such employment between 2003 and 2006.

Primarily the following languages are required by the institutions that employ language and integration mediators: Persian, Arabic, Russian, Serbo-Croatian, Turkish, Kurdish, French, Vietnamese and Tigrinya.

Field of health care work:

- General hospitals and all medical and care departments
- Hospital social services
- Rehabilitation facilities

- Facilities for physical and psychological rehabilitation
- Outpatient departments
- Psychiatric clinics
- Therapeutic facilities
- Psychosocial centers
- Doctor's offices
- Public health care services
- Health departments
- Health care counseling (Aids counseling, nutritional counseling)

Field of social work:

- Child and youth welfare institutions (outpatient and inpatient, assisted living, youth centers, children's homes)
- Assistance plan talks with youth welfare department
- Counseling offices of the municipalities and private institutions (divorce counseling, debtor counseling, immigration counseling, educational guidance)
- Government agencies and departments
 (social services department, aliens department, housing department, employment office)
- Town district work
- Schools (school social work) and day care centers
- Career advancement
- Social work with women
- Geriatric care
- Care for the disabled

3.6.4 Assesment of needs and evaluation studies

Language and cultural mediation, integration assistance and community interpreting training as well as the work itself were evaluated in different ways parallel to the project. The internal training criteria were extended and/or defined more precisely through qualitative and quantitative surveys of the participants and teaching staff and evaluations of these surveys.

By the same token training institutions as well as agencies that booked language and cultural mediators were surveyed regarding needs, employment of such mediators and satisfaction with their work. The results developed from this furnish information on language needs and also existing difficulties, e.g. with funding.

Parallel to that, the assignments of the language and cultural mediators to be trained are constantly evaluated by the university clinic in Hamburg- Eppendorf with regard to needs and employee satisfaction.

As part of establishment of the job description, a survey was conducted in the federal states involved up to that time, i.e. Berlin, Hessen and North Rhine-Westphalia, in order to determine the needs for language and integration mediators and the opportunities for financing their employment. Altogether approx. 2500 institutions providing health care and social services were surveyed. Around 20% of the questionnaires were returned, a result that is very beneficial as a working approach. In the first place the questionnaire contained several questions on the structure of the institutions, i.e. on services offered, number of employees and how many employees have a migration background, etc.

Another focal point of the project-supporting survey related to training for language and cultural mediation and involved a whereabouts study conducted by the North Rhine-Westphalia Ministry of Inte-

gration concerning the influence of projects on sustainable vocational integration for the target group of refugees and asylum seekers and concerning their social conditional framework. The results of these studies will soon be available in the form of a publication.

3.6.5 Training

The recognized further training for language and integration mediators targeted nationwide is divided into three 6-month modules, each of which represents an independent unit in terms of content and structure and which are based on each other. In addition, it is possible to take part in a voluntary sixmonth advanced module as preparation for university entrance qualification.

Module I

The basic module serves as the initial phase of further training as language and integration mediator. The goal is to impart basic specialized and social know-how and in part mediation competence that is necessary in preparation for the following advanced modules. The aim of the German lessons is to consolidate and expand knowledge of German and specialized terminology. The orientation internship serves as the basis for deciding on the training field in the advanced modules.

Module II – Focus on health care or social services

This module is the advanced phase building on the existing basic competence. The aim of the theoretical section is to expand and further develop specialized, social and mediation competence. The objective of the German lessons is to expand specialized terminology and prepare for the written work. The goal of the parallel internship is to gain practical experience that is the subject of reflection on practical work. This advanced module can be carried out with different focal points.

Module III - Practical phase in field of health care or social services

This module forms the final phase of the further training. The objective of the theoretical section is to consolidate the existing competence and extend it to selected fields. The goal of the German lessons is to support the written work. The internship is carried out as block training with the aim of gaining more in-depth reflected experience in a practical field and preparing for occupational practice. This advanced module can be conducted with different focal points.

3.6.6 Job description

The following three actors operating in the field of intercultural mediation have jointly taken the initiative regarding recognition of the job description for "language and integration mediators".

- SpraKuM Project of Diakonie Wuppertal trains "language and cultural mediators"
- Interkulturelles Büro der Wissenschaftsstadt Darmstadt trains "integration assistants"
- EQUAL community interpreting project of Gesundheit e.V. Berlin trains "community interpreters"

To move closer towards the goal of establishing this new job description, three levels have to be developed:

- 1. Determining needs and developing the labor market
- 2. Drawing up different models for employment of language and integration mediators
- 3. Developing standardized basic training for the purpose of work quality assurance

Activities aimed at institutional recognition of the new job description for "language and integration mediators" were carried out nationwide in 2007. Individual umbrella organizations on the employee and employer side have been won over and the process of establishing the job description is currently on a stable foundation supported by a broad public. A social policy consensus will be adopted in the form of a proclamation at the final conference of the process of establishment of this new job description (November 2007). Ongoing talks are in full swing.

3.6.7 Financing

The uniform job description is aimed at standardizing the existing variety of procedures for payment of the services rendered that range from working in an honorary capacity to employment in accordance with vocational training rates, thus providing a clearer picture for potential employers. Past workshops with experts concerning establishment of the job description viewed working on a free-lance basis as the main goal of later integration into the labor force. In addition, employment contracts can be set up in the form of a permanent position or working on call. The currently applicable rate for language and cultural mediators, integration assistants and community interpreters of 25.00 a hour, plus reimbursement of traveling expenses incurred, is regarded as a starting point of negotiations for future language and integration mediators. The hourly rate is oriented to the quality of the training and the work and presupposes the capacity to finance it on the part of the various institutions that employ language and cultural mediators.

The training as such is currently financed via the Equal initiative, the European Social Fund and the Federal Ministry of Labor and Social Affairs. In future various funds shall guarantee training; among other things, the training is to be passed on to further training institutions and conducted accordingly. The Employment Agency will be called in to negotiations as an additional source of financing. A combination of these options with funds from the Federal Ministry of Labor and Social Affairs is conceivable.

3.6.8 Literature

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4. Summary of the results

4.1 Definitions

The concept of language and cultural mediation has received increasing attention in recent years in Europe, because EU countries are becoming increasingly aware of their situation as immigration countries. New approaches and problem-solving strategies for dealing with immigration in a constructive manner are therefore required. Although the job description for language and cultural mediation is already applied at the regional and local level, it has received little research and recognition, particularly in the countries in which immigration and migration are a new phenomenon, such as in the southern countries (Spain, Italy, etc.), but also in countries like Germany and Austria, which have hardly promoted integration of immigrants for a long time. In Switzerland and Belgium, by contrast, national networking, standardization of training and networking of occupational practice have advanced further on the basis of specific legal regulations and national cooperation and networking (e.g. on the part of the respective national umbrella organizations COFETIS-FOSOVET in Belgium and INTERPRET in Switzerland), which may provide an orientation for development in this field for other European countries as well.

There are different definitions and concepts regarding the precise meaning of language and cultural mediation in the countries examined within the framework of this study. Clearly defined and standardized job titles with a clear description of the duties exist at the national level primarily in the countries where development of the job description and standardization of training is relatively far advanced, such as in Switzerland and Belgium.

In Germany alone a large number of terms have been used to date (language and cultural mediators, community interpreters and integration assistants) and now they are to be combined into a standard government-recognized job description, i.e. so-called language and integration mediation. The relevant designation in Switzerland is "intercultural translation", in Austria "community interpreting", in Belgium "social interpreting" (l'interprétariat en milieu social / sociaal tolken), in Italy "cultural mediators" (mediatore culturale) and in Spain "intercultural translation" (traducion y interpretación en los servicios públicos). The related job description can be generally summarized as follows: mediation at the language and sociolcultural level to support communication between people with a migration background and the qualified staff of the institutions in the field of health care, education and social services.

In some of the countries listed here, e.g. Switzerland, Belgium and Spain, the job title intercultural mediation (Spanish: *médiacion intercultural*) is additionally used with a range of duties that goes far beyond the functions of language mediation or almost completely disregards them. Intercultural mediation is viewed more as prevention through information and explanation and mediation in the case of conflicts, taking into account intercultural aspects. In Belgium, for example, intercultural mediators are employed especially in hospitals and in Spain at public service institutions in communities greatly characterized by immigration.

In Switzerland, where the job description is differentiated most clearly (based on the three different definitions of intercultural translation and intercultural mediation ("interkulturelle Vermittlung" and "interkulturelle Mediation"), intercultural mediators ("interkulturelle VermittlerInnen") perform this

role while intercultural mediation ("interkulturelle Mediation") refers solely to conflict mediation in an intercultural context, such as in connection with divorces or neighborhood conflicts.

However, a clear description of the duties of language and cultural mediation and recognition of the profession as a clearly defined job description at the national level is a major goal for all countries so as to promote the quality and application of language mediation in practice and not to overtax the mediators in the performance of their work as well as guarantee their success.

4.2 Assesment of needs and studies

Language and cultural mediation is very complex and helpful and though this is frequently confirmed in practice, it has not been demonstrated and researched on a scientific basis to any significant extent thus far.

Although predominantly practical experience has been gained to date in the countries looked at here, no extensive studies have been conducted, but rather isolated regional studies or practice-oriented evaluation studies in connection with projects. Furthermore, research primarily focuses on the health care sector.

The comprehensive study in Canada mentioned in the introduction verified for the first time in 2003 that compared to the majority society ethnic minorities received health care of poorer quality than members of the majority society, a fact that certainly applies to other countries, too.

For the most part project-based evaluation has been carried out in Germany thus far, but recently a survey was conducted within the scope of establishing the job description in the federal states of Berlin, Hessen and North Rhine-Westphalia for the purpose of determining the needs for language and integration mediators and the opportunities for financing their employment. The results will be published soon by the project SpraKuM under the Website www.TransKom.info.

Studies in the field of intercultural translation in Switzerland showed that intercultural misunderstandings lead to diagnostic errors and faulty treatment in the health care sector (Bischoff and Loutan 2000), and in the field of social services and education, too, such misunderstandings occur with the corresponding effects. Discrimination against immigrants in the health care system and the employment of nonprofessional interpreters (so-called ad hoc interpreters), in particular children, were also perceived as a problem in a study within the framework of the project "Migrant-Friendly Hospitals" from 2002-2007. For this reason employment of intercultural interpreters is recommended as a contribution to improving social and health care for immigrants.

In the field of intercultural mediation in the health care sector in Belgium a supporting evaluation study examined and underlined the importance of employing intercultural mediators in practice as support for qualified clinic staff. Another study in the health care sector (Hertog/van Gucht) verified, furthermore, that language mediation in the health care sector plays a key role in the quality of the service and in connection with cost savings in care. The national umbrella organization COFETIS-FOSOVET is currently examining this phenomenon, applied to the sociocultural sector.

Up to now Italy and Austria have predominantly conducted regional studies: in Italy mainly in the field of public services and in Austria in the health care sector. In Spain, too, research is still in its infancy. However, there is a relatively up-to-date overview of activities carried out within the scope of national studies and research, dating from 2007 and compiled by the COMUNICA research group of the University of Alcalá.

In summary it can be said with respect to language and cultural mediation needs that everyone in certain situations should have the right to linguistic support and appropriate communication of information, especially when serious decisions having a bearing on physical integrity, health or even asylum proceedings are involved. Particularly with an eye to administrative simplification and avoidance of additional costs due to misunderstandings in the treatment of illnesses or in asylum proceedings and in connection with integration, it can only be in the interest of the respective government agencies and thus the individual countries if language mediators are employed in such situations.

Since language and cultural mediation work and the need for it have been subject to little research to date and the former is still in the development phase, however, a further, and in this case more comprehensive study on the need for and benefits of language and cultural mediation and a resulting comparison at the European level are necessary according to the experience with the present study.

4.3 Application areas

The "clients" who are supported by language and cultural mediators are, for the most part, members of minorities in the respective host country (immigrants, asylum seekers, foreign workers, refugees, etc.) and qualified employees, i.e. representatives of service institutions like government agencies and institutions that have to communicate with clients who speak a foreign language – and therefore rely on language and cultural communication assistance.

Often an unequal language proficiency level as well as an unequal knowledge, education and experience horizon exist between the two groups. Moreover, other communication disruptions frequently occur during communication due to heterogeneous patterns of thought, value and norm systems. Language and cultural mediators are links or bridges between the two parties involved and their job is to balance the asymmetric power divide between the parties and contribute to elimination of language and cultural barriers.

Primarily interpreting "on site" is meant when reference is made to forms of language and cultural mediation. In Italy, Switzerland and Belgium, however, telephone interpreting or also written translation, especially in connection with important documents, is additionally mentioned under certain circumstances, such as in the case of short talks, standardized procedures or cases of emergency.

The classic institutions that employ language and cultural mediators in the countries described are for the most part in the health care, social services and educational sector. In some countries like Austria and Switzerland the health care sector, e.g. general or psychiatric clinics and therapeutic facilities, dominates among the researched fields in which language and cultural mediators are employed. In the other countries like Italy and Spain it is not so much the health care sector, but predominantly the education and social welfare system and institutions dealing with immigrants, such as public and municipal authorities and services, that are mentioned.

In Germany the following are mentioned as examples of health care institutions that employ language and cultural mediators:

- general hospitals and their medical and nursing services
- psychiatric clinics and therapeutic facilities
- rehabilitation facilities
- doctor's offices
- psychosocial centers

 public health services, health departments and health care counseling offices (Aids counseling, nutrition counseling)

For the field of social welfare the following are mentioned as examples:

- counseling offices of the municipalities and private institutions, especially for immigrants (immigration counseling, divorce counseling, debtor counseling, educational guidance)
- government agencies and departments (youth welfare department, social services department, aliens department, housing department, employment office)
- town district work
- schools and day care centers
- child and youth welfare institutions (outpatient and inpatient)
- care for elderly and disabled persons

In Belgium social interpreters work in all such institutions while intercultural mediators are employed especially in hospitals, though their field of work, as already mentioned in the point "Definitions", goes beyond interpreting and cultural mediation and focuses on health education, providing patients with information as well as emotional and general support, conflict mediation in the event of problems and support in the case of discrimination. In addition, social interpreters are often called on for language support as needed. The duties of intercultural mediators in Spain are described likewise. They are employed in city districts with a high proportion of immigrants to provide information on services at public education or counseling institutions and thus contribute to preventing conflicts and misunderstandings.

Language and cultural mediators view their own work as involving certain positive and negative aspects. Among the positive aspects perceived is the fact that they can help other immigrants and support them in connection with difficulties and language problems. The intercultural exchange and process of creating understanding as well as the trust and recognition received are also seen as a boon. However, it is perceived as very hard in some situations to overcome language and understanding difficulties and deal with prejudices, for example, as well as to remain impartial and disassociate oneself from the problems of the immigrants. Another obstacle is that language and cultural mediators can only communicate and mediate and have to accept the fact that they have no authority to make decisions. The low status and little recognition of the profession are additionally mentioned as negative aspects.

4.4 Training

Like interpreters, language and cultural mediators have to possess a basic repertoire of specialized competence. This includes language competence in the source and target language, terminological familiarity and transfer competence, etc. However, language and cultural mediators are also confronted with non-linguistic and cultural influencing factors, requiring additional social, cultural and psychosocial background knowledge and related skills going beyond the traditionally necessary competencies. These competencies have to be developed and imparted, inter alia, through personal and practical experience and appropriate training.

In Switzerland and Belgium, where development of the job description is far advanced, this is attributable in particular to the standardization and thus quality assurance of training at the national or regional level.

The existing curricula at the local, regional and national level as well as the length and number of training programs in the individual countries are relatively diverse. On the one hand, there are training courses conducted by NGO institutions for one or more days while other programs last several months

and some are offered within the framework of advanced courses of study. In connection with training for language and cultural mediators, therefore, the question arises as to whether merely a shorter or longer further training course based on an occupation is required or formal vocational training or academic studies are needed to acquire appropriate qualifications. Nationally this may be viewed differently.

In Switzerland a clear job description for "intercultural translation" and uniform standardized training now exist at the national level. The process of government recognition, however, has yet to be completed. Since 2004 national training standards have applied to the specific vocational training offered by 11 recognized institutions in Switzerland. The training ends with a certificate issued by INTERPRET, the national umbrella organization for language mediation work. In addition to training, the 2 modules with a total of 120 hours of seminars, 110 hours of private study and 6-8 hours of group supervision, the requirements for obtaining the certificate include 50 hours of practical experience and command of the local and interpreting language.

The focal points of the training are intercultural communication and conflicts, reflection on one's own intercultural characteristics and immigration experience, conducting talks and understanding of one's role, text comprehension and communication of information as well as the basic principles of the health care, social welfare and education system and dealing with government agencies. A case in practice is documented or training work is performed at the end of each module. However, national standards and uniform training content do not exist yet for the other task involved in this field of work, intercultural mediation ("interkulturelle Vermittlung" und "interkulturelle Mediation")..

In Belgium there are no standardized national training programs for the field of "intercultural mediation" in hospitals, but only national standards as a requirement for employment or performance of this work. In addition, training courses and supervision for intercultural mediators are offered by various institutions parallel to employment. A standard training curriculum for the field of "social interpreting" (since back in 1991) exists only in the Flemish-speaking part of Belgium while for the French-speaking section the training profile along with the job description are still in the development phase, inter alia under the direction of the national umbrella organization, COFETIS-FOSOVET.

In terms of standardization, the situation in the other countries involved in the study is not so far advanced. In Germany there are predominantly isolated project-based initial and further training programs spread across the country. In 2005, within the framework of the EQUAL European initiative, three institutions joined forces in Germany with the participation of the SpraKum project in Wuppertal in order to develop standardized further training (18-month basic module and 6-month advanced module) aimed at ensuring uniform quality and university entrance qualification. Plans call for provision of this training in future also as government recognized vocational training. However, there is still a long way to go until then.

"Community interpreter training" in Austria is also in its infancy and the training scene there is just as "scattered" and project-based as in Germany. From 2004 to 2006, on the other hand, a university course of study in "community interpreting" was conducted in Graz as high-quality academic training ending with a recognized university degree. It was not possible to continue it, however, due to lack of financing.

The situation is similar in Spain, where in some cases training is offered at the university level not in classic interpreting, but in "intercultural translation and interpreting", such as at the University of Alcalá in Madrid or at the University of Salamanca and Valladolid, which even end with a master's degree. Moreover, there are several postgraduate courses of study or courses for translation and interpreting. On the other hand, there are also project-based training programs in "intercultural mediation", e.g.

within the framework of the SEMSI project, in cooperation with the free university in Madrid, though it requires completion of a course of study.

Since only regional recognition of vocational training is required to become automatically valid at the national level in Italy, there are a large number of similar but varying regional training curricula for so-called "cultural mediators" there, too. Again, however, no uniform standards exist for the entire country. Launched as projects by NGOs in the 1990s, there are many nonacademic training courses, but they do not lead to an academic degree and are primarily offered to immigrants or are attended by them. Some university courses of study have even been set up in Italy since the university reform in 2002. The problem with them is that they are predominantly attended by native Italians because of their entrance requirements, a fact that is criticized in the practical field due to their lack of a migration background.

Besides the question of whether training should be carried out at an academic or nonacademic level, another point of debate in the individual countries is how to draw up admission prerequisites and training requirements so the courses are also accessible to immigrants, who frequently lack the corresponding study certificates or vocational training recognized in the country. Furthermore, there is the question of how much occupational practice is necessary in addition to qualified training and whether immigrants and native citizens are equally suitable or what type of immigration or sociocultural experience is necessary for qualified performance of the work.

4.5 Networking and job description

The status of the development of training standards for language and cultural mediation in the individual countries is almost comparable to the status of the national development of a job description since the two are linked to each other. An official recogition of a common job description on national level for language and culture mediators is dependant on a good national networking of organisations, an agreement on common training standards and corresponding legal basics.

In Germany, as already mentioned in the point on Training, three institutions recently launched a joint initiative for recognition of the new job description for "language and integration mediators". For this purpose three aspects first have to be further developed: determination of needs by the labor market, development of employment models and specification of uniform standards for basic training at the national level. The experience of the other countries and the opportunities opened up by Europe-wide networking via the national umbrella organizations and networks are helpful here.

As in Germany, development of the job description in Austria is also in a relatively early stage. There are various efforts to obtain permanent funding and to structure training and employment particularly in the health care sector, though success thus has taken place predominantly at the regional rather than the national level.

To date regional sovereignty in Italy has resulted in the development of varying regional training standards and practices. Recognition of the job description, like accreditation of training in Italy, also takes place at the regional level. In the new immigration law of 1998 cultural mediation was designated as an important element for social integration of newly immigrated citizens at the national level in Italy. Since then the already lively practice at the regional and local level has received even more recognition, demand and financial support. After implementation of the law a working group was established at the national level to work up a national recommendation for cultural mediation for the regional governments.

In Spain the COMUNICA research group of the University of Alcalá in Madrid was established in 2005 to boost research and efforts for a separate job description in this field. Since 1999 the Trinagulo group, on the other hand, has been endeavoring to develop the occupational field of intercultural mediation and cooperation in public relations and training. A subject under debate there at the moment is whether intercultural mediation is an independent occupation or merely a supplementary qualification or cross-sectional task of specialized staff in the social services.

In Belgium the job description for "intercultural mediation" in hospitals is relatively well developed thanks to the legal stipulation of financing of a full-time position for each hospital, currently filled by employees at 55 clinics in the country altogether. The employees jointly work on improving quality and defining the job description more precisely within the framework of quality development of the mediator program, financed by the Health Department.

Networking by national umbrella organizations is relatively far advanced in Belgium as well as in Switzerland and therefore a good example. COFETIS-FOSOVET is the national umbrella organization in Belgium that promotes a common job profile of social translators and interpreters, represents the interests of social translation and interpreting services and is the network in which approx. 10 French-speaking and 9 Dutch-speaking local and regional placement agencies of social interpreting services are joined together. Official government recognition of the job description for social interpreting is targeted for 2009 since, as in Italy, regional recognition has to take place first and only then national recognition.

INTERPRET is the national umbrella organization for all actors in the field of intercultural translation in Switzerland and was established in 1999. The promotion of integration has been stipulated in national law already since 1998. The organisation is responsible for coordination in connection with recognition and standardization of training for intercultural translation and for public relations work aimed at recognition of a standard job description for intercultural translation. These efforts will soon culminate in official government recognition.

4.6 Employment and financing

Official national recognition of the job description for language and cultural mediation requires a determination of needs on the part of the labor market and development of appropriate employment and financing models.

A uniform job description in Germany is aimed at standardizing the existing variety of procedures for payment of the services rendered, which range from working in an honorary capacity to permanent employment, in accordance with vocational training rates, thus providing a clearer picture for potential employers. Workshops conducted thus far with experts concerning establishment of the job description viewed working on a freelance basis as the main goal of later integration into the labor force. In addition, employment contracts can be set up in the form of a permanent position or working on call. The currently applicable rate for language and cultural mediators, integration assistants and community interpreters of 25.00 a hour, plus reimbursement of traveling expenses incurred, is regarded as a starting point of negotiations for future language and integration mediators in Germany. The hourly rate is oriented to the quality of the training and the work and assumes that the various institutions that employ language and cultural mediators are able to finance it.

This diversity also exists in most other countries and the majority of the language and cultural mediators work on a freelance basis, some full time, some as a second job. In many cases assignments are

arranged via local, regional or even national placement agencies, through which institutions can inquire about and book cultural mediators.

National placement via the umbrella organizations, however, only takes place in Switzerland and Belgium. In Switzerland the 18 regional and local placement agencies are joined together in the umbrella organization INTERPRET, which also advertises via a joint website on the Internet enabling direct contact to the local placement agencies or the cultural mediators themselves. There is also cooperation between the placement agencies by means of systematic recording of assignments and client feedback. Through its website COFETIS-FOSOVET, the national umbrella organization of social translation and interpreting services in Belgium, also offers a central listing of its 10 French-speaking and 9 Dutch-speaking local, regional and federal placement agencies, which have to be contacted directly, however.

Organized and central placement means above all customer orientation, guarantees the quality of the work, enables the creation of standard working conditions, standardizes the placement procedures and facilitates systematic evaluation and support of assignments.

The assignments or at least the placement is not yet able to finance itself in most countries, including Switzerland and Belgium, and like training is still co-financed in most cases through regional, federal or EU funds within the framework of projects.

In Switzerland, however, professionalization of the work through national networking has been achieved primarily by means of subsidizing the training and the local placement agencies by the Federal Office of Public Health and the Swiss Federal Commission for Foreigners. Furthermore, cantons and municipalities receive subsidies for employing intercultural translators. In addition to the social interpreters, who work at all institutions employing language and cultural mediators in Belgium on a freelance basis through the placement agencies, intercultural mediators are even employed as permanent staff members in many Belgian hospitals. This was made possible in 1999 by the legally established right to financing by the Ministry of Health.

In Germany training courses as such are currently still financed via the Equal initiative, the European Social Fund and the Federal Ministry of Labor and Social Affairs. In future various funds are to ensure provision of training. Among other things, training shall be passed on to further training institutions and conducted there accordingly. The Employment Agency will be called in to negotiations as an additional source of financing. A combination of these options with funds from the Federal Ministry of Labor and Social Affairs is conceivable.

5. Outlook

As this study indicates, the duties, training and areas of work in the professional field of language and cultural mediation do not fundamentally differ from each other. However, there are differences in the professionalization and development of the occupation between Belgium, Switzerland, Spain, Italy and Germany. On the one hand, this is due to different socioeconomic conditions, but also to successful national networking. For this reason it will certainly be decisive in the future to promote an exchange at the international and European level, too, with the aim of learning from one another, discussing and jointly further developing standards, such in the training of language and cultural mediators. Only in this way can language and cultural mediation as a clearly developed job description contribute to improving the involvement of immigrants in everyday life and foster their integration.

6. Appendix

Here you find information about contact details of the responses of the survey with questionaieres in the different countries. The returned responses to the questionnaires were not included in the study for the sake of protection of anonymity and are available from the transnational project management of the AIM partnership in Wuppertal that conducted this study. The formats of the questionnaires from the second survey and the pdf version of the study are available at the website.

In order to simplify the use of this list it is structured as follows

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