

DO YOU SPEAK CORONA?

SURVEY RESULTS ON THE USE OF MINORITY LANGUAGES UNDER THE COVID-19 OUTBREAK

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CONTEXT

**DURING EMERGENCY,
QUICK PROCEDURES
COMMUNICATION IN
MOTHER TONGUE IS
VITAL TO UNDERSTAND
OFFICIAL
COMMUNICATION FROM
THE NATIONAL,
REGIONAL OR LOCAL
AUTHORITIES.**

A novel coronavirus, the COVID-19, appeared in Wuhan, China in December 2019 and began to spread relatively quickly - first in China and then around the world. By mid-March 2020 most of European countries declared state of emergency and enforced mass closures to flatten the coronavirus curve: only shops selling food and pharmaceutical products could remain open; schools closed, events were cancelled and people were recommended to stay home.

Two months into the pandemic, over 3.5 million people are infected worldwide and more than 200 thousand people lost their lives to the outbreak.

Suddenly, from one day to another the lives of all European citizens changed. As the most difficult emergency period phases out, we believe it is important to analyse the answer of our authorities from the mother tongue's use point of view.

ABOUT THE SURVEY

TIMEFRAME AND FOCUS

An online survey, with the scope of analyzing to what extent communication in mother tongue is assured by different stakeholders in the Member States of the European Union, as well as among the members of the Federal Union of European Nationalities (FUEN), was conducted between March 31 and April 30, 2020.

The online questionnaire focused on:

- the availability of information related to the coronavirus outbreak in general,
- on the availability of healthcare information related to the outbreak
- existence of an emergency hotline operated in minority language
- the availability of online education in mother tongue.

WHO COMPLETED IT?

The survey was completed by the members of the Intergroup for Traditional Minorities, National Communities and Languages of the European Parliament as well as representatives of members of the Federal Union of European Nationalities.

The questionnaire was available in two languages: English and German.

Countries Participating in the Survey

- EU Countries
- Non-EU Countries



The survey was completed for 29 minority groups in 18 European countries.

- Albania: Macedonian;
- Austria: Slovene;
- Azerbaijan: Turkish;
- Croatia: Czech; Serbian;
- Denmark: German;
- Estonia: German; Russian;
- France: Alsatian;
- Germany: Danish; Frisian;
- Greece: Pomakis; Turkish;
- Hungarian: Slovak;
- Italy: Croat, German Ladin; Slovene;
- Poland: Kashubian;
- Romania: Arman; Hungarian; Czech and Slovak;
- Russia: Lezghin;
- Slovakia: German; Hungarian;
- Spain: Basque; Catalan;
- The Netherlands: Frisian;
- Ukraine: Greek/Rumeian and Urumian; Hungarian.

COUNTRIES AND MINORITY COMMUNITIES PARTICIPATING IN THE SURVEY

THE DATA

In presenting the results of the survey we often refer to the term 'by case'. As seen above, there are 29 minority groups and 18 countries participating in the survey. However, the same minority groups live in multiple countries, such as Hungarians or Slovaks who live both in Romania and Ukraine, or Germans who live in Estonia, Denmark and Slovakia. In such cases, these minorities participate twice, or three times, simply because they represent a minority group in more countries. Thus, under the term 'by case' we refer to those 29 minority communities or linguistic groups for whom the questionnaire has been completed for.

Why not presenting detailed data by country?

In many countries there are more minority groups for which the survey has been completed for. In case of Italy, for example, three different minority communities are present in the survey: Croats, Ladins and Slovenes. Yet Italy, just as other countries, has a different communication approach towards its different minority groups.

In case of the Ladin ethnic group, COVID-19 related information is available through various channels: both regional and local government communicate in mother tongue and, at the same time, the minority organization is also active. In Slovenian partial information is available, provided by the regional government, meanwhile no information is channeled in Croat. As a result, presenting the data by country would be misleading, due to the different approaches towards the minority communities living on the territory of the same country, dependent on legislation and recognition of minorities. In each case, however, we present descriptive examples from each surveyed country.

The results are not representative for COVID-19 related communication on mother tongue of minority communities, but still serves a good outline on how communication on mother tongue is assured in times of crisis in almost 20 states. We aim to continue collecting the data and include other minorities as well, to create a complete European picture on the matter.



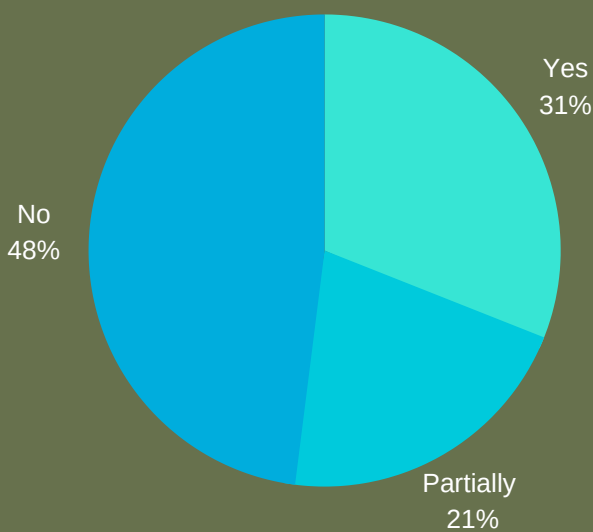
HOW DO YOU SAY FLATTENING THE CURVE ON YOUR MOTHER TONGUE?

RESULTS

Is general information available on mother tongue? Is health related information available about the coronavirus outbreak? Is there an emergency hotline that can be used on mother tongue of the minority communities and linguistic groups? Is online education on mother tongue available? Who are the stakeholders who provide these information and services?

The availability of information on mother tongue is crucial if we expect people to follow certain rules and behave in a way to reduce the spread of the virus. Certain terminology, such as flattening the curve, can be difficult to understand in another

IS COVID-19 RELATED INFORMATION AVAILABLE ON MOTHER TONGUE?



language and can ultimately alter the goal we have all set: to reduce the pressure on our health care system meanwhile fighting the outbreak. This is especially true for those marginalized communities that lack access to communication tools, are not literate or simply don't speak the language of the majority where they live.

Even if they are fluent in the dominant language, they still have the right to clear and accurate communication in order to be able to make informed decisions. Nevertheless, communication on mother tongue by the authorities who are imposing certain restrictive measures, raises the trust in the authorities themselves and increases the likeliness to follow those measures.

By looking at the pie chart, we can conclude that key general information on the coronavirus outbreak is available on mother tongue of minority communities and language groups in slightly more than half of the cases. 48% of the minority groups are not provided any information related to the outbreak on their mother tongue, 21% receive partial information, meanwhile 31% lack all communication on mother tongue. Countries providing at least partial information on mother tongue of the minorities are Azerbaijan, Croatia, Estonia, France, Hungary, Italy, Romania, Russia, Slovakia, Spain and Ukraine. Some of the countries provide information in one language and don't provide in others. Romania authorities, for example, do not provide any information in Czech and Slovak or Arman, but do provide information in Hungarian due to the fact that the Hungarian ethnic party - the Democratic Alliance of Hungarians in Romania - is present in the leadership of several county governments.

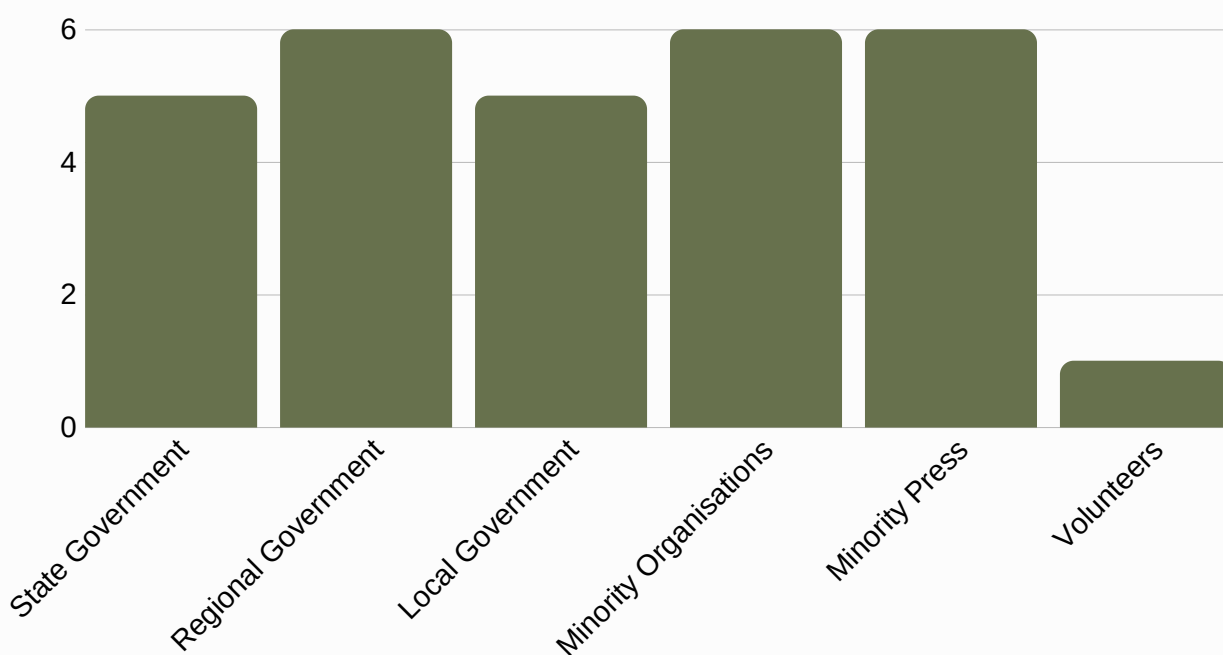
We have already seen that only half of the participating minorities have access to key information on the outbreak on their mother tongue.

Where such information exists, at least partially, it is most often the regional governments, the minority organizations and minority press assuring that the coronavirus outbreak related information reaches minority communities and language groups. As presented in the figure, in only 5 cases do state governments and in 5 cases local governments assure this type of communication for minority groups.

Countries where state governments provide these information are: Croatia, Estonia, Azerbaijan and Slovakia. Regional government are the key information provider in Azerbaijan, Italy (for all three minorities participating in the survey), Russia and Spain. Local governments assure communication, by themselves or in addition to other stakeholders in:

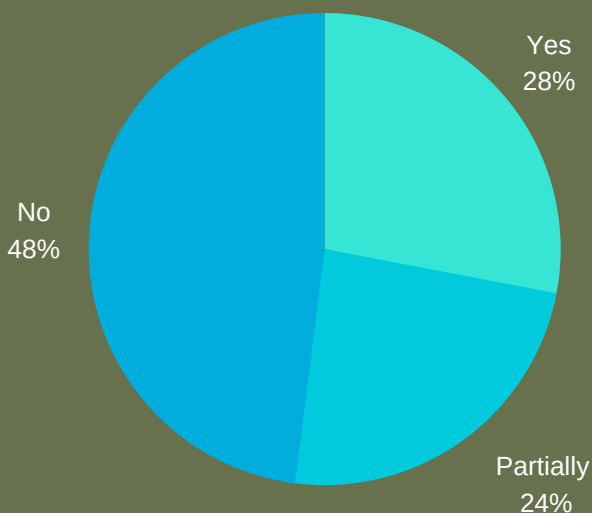
WHO ARE THE KEY STAKEHOLDERS PROVIDING INFORMATION ON MOTHER TONGUE?

Estonia, Italy, Romania and Spain. Minority press transmits general information on mother tongue about the pandemic in Croatia, Estonia, France, Italy, Romania, Slovakia and Ukraine. Minority organizations are actively informing on the mother tongue of the minorities they represent in Azerbaijan, Hungary, Italy, Romania, Slovakia and Ukraine.



Providing information on mother tongue about the measures taken to reduce the spread of the outbreak, about the adopted legislation or the phases and deadlines until some of these measures are in force, are vital information in shaping the behavior of the citizens and in raising their sense of belonging.

IS COVID-19 RELATED HEALTH INFORMATION AVAILABLE ON MOTHER TONGUE?



Availability of health related information is also of key importance in reducing the feeling of exclusion of minority groups and assuring that people seek medical attention if in need.

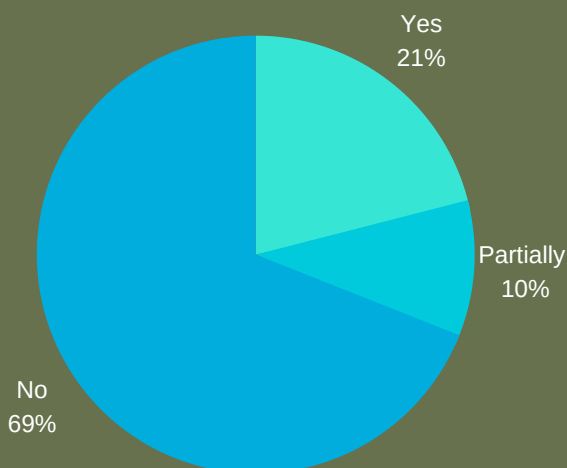
Our next question looked into the availability of health related information about the outbreak and the channels used to assure these information reach minority groups and linguistic communities.

By looking at the pie chart, we can conclude that key health information on the coronavirus outbreak is available on mother tongue of minority communities and language groups in slightly more than half of the cases, similar to that of general information. Partial information is available in 24% of the cases, meanwhile 28% of the minorities have full access on their mother tongue to the health related information of the aspects of the coronavirus outbreak.

The channels used to communicate on mother tongue are also similar to that seen in case of assuring general information about the outbreak. Public authorities, and specifically those representing local governments are the ones proving to be more operative when they disseminate health related information. Local governments in 9 cases disseminate health related information. Regional governments in 7 cases, minority organizations in 7 cases, minority press and state governments in 6 cases respectively. When looking at the raw data, this still means that only roughly half of the minority groups or linguistic minorities have access to crucial health related information on their mother tongue about the pandemic.

AVAILABILITY OF EMERGENCY HOTLINES

Emergency hotlines started receiving an increased volume of calls as early as the first cases of COVID-19 began to appear in the countries.[1] To mitigate the high risk of overburdening the emergency hotlines, the governments have set up dedicated hotlines or increased the capacity of the existing call centers to face the raise in the volume of calls related to the coronavirus outbreak. We were interested to analyze whether emergency hotlines were also available in the languages of the minority communities or linguistic groups.



"Unhindered access to emergency information is a basic human right. Yet, as observed from the chart, the availability of the emergency hotlines in minority languages are limited, as 69% of the cases have no access to them. We can observe that in only 21% of the cases have hotlines been set up and in 10% of the cases minority communities or linguistic groups have partial access to mother tongue emergency facilities, should a COVID-19 related emergency arise. The countries where such hotlines are available are: Azerbaijan, Croatia (in Serbian), Estonia, Germany, Italy (in Ladin), Romania (in Hungarian) and Spain.

Who provide the emergency hotlines?

Where hotlines exist on mother tongue of the minority groups, it is mainly the authorities who are providing for this service. State governments assure emergency hotlines in mother tongue in only 2 cases (in Croatia and Estonia), regional governments in 4 cases (Estonia, Italy and Spain for two minority groups), local government in 4 cases (Germany and Romania) and minority organizations in 1 case (Azerbaijan). All the other countries lack such facility for minority groups living on their territory.





ENTERING DIGITAL

IS ONLINE EDUCATION AVAILABLE FOR MINORITIES?

Access to education is a basic human right and all children should benefit from it. Whether online education on mother tongue could be organized or not was another important aspect of our survey.

In 16 occasions, representing 55% of all cases analyzed, online education was organized on mother tongue during the coronavirus outbreak. In another 4 cases, representing 14%, online education on mother tongue was at least partially available, meanwhile in 6 cases, representing 21%, no access to online education was assured. In 3 cases, representing 10%, mother tongue education was not available before the coronavirus outbreak either.

The countries in which online mother tongue education was set up are: Austria, Estonia, France, Germany, Hungary, Italy, Romania, Russia, Slovakia, Spain and Ukraine. Online education was partially provided on mother tongue in Croatia and in the Netherlands.



WHO ARE ASSURING ONLINE EDUCATION?

In 3 cases state governments are the ones assuring that online education is in place and children continue benefiting of mother tongue education. These state governments are: Croatia for Czech language, Italy for Slovenian language and Ukraine for Hungarian language education. One regional government for the Lezghin minority in Russia provided for mother tongue online education. Two local governments - in Estonia for Russian minority and in Slovakia for Hungarians organized online education.

Schools assure education in mother tongue in 4 countries: in Hungary for Slovak, in Slovakia for German, the Netherlands for Frisian and in Ukraine for Greek.

Teachers are the ones providing for mother tongue education in Croatia for Serb, in Italy for Ladin and in Romania for Slovak and Czech.

RECOMMENDATIONS



THE STRUGGLES OF COMMUNITIES TO BRING GREATER ATTENTION TO LINGUISTIC ISSUES SHOULD BE PART OF THE COMMUNICATION RIGHTS AGENDA.

Only in half of the surveyed cases do stakeholders provide at least partial information on the mother tongue of the minority communities. States should engage to provide these information to reach minority groups with accurate language use and appropriate channels.

Being able to ask for help in a life-threatening emergency on mother tongue could save lives. We recommend setting up these emergency hotlines with operators who speak the language of minorities in every country,

Online education is available for only 15 of the surveyed minorities, out of the 25 who benefited of mother tongue education before the outbreak as well. More emphasis should be placed on digitalisation of education overall, but minority communities need to be included in this process.

Endnotes:

[1] Italy reported 5,086 calls made to the 112 Centre in Milan on February 16, 2020 (<http://www.vita.it/it/article/2020/02/24/coronavirus-numeri-di-emergenza-presi-dassalto/154125/>). In Spain, Catalonia, emergency calls have tripled by March 18, 2020 (<https://www.lavanguardia.com/vida/20200318/474240479361/coronavirus-telefono-112-emergencias-saturado-dudas-virus-catalunya.html>) In Croatia 6000 calls were received daily, although previously 4000 calls were the average (<https://dugopolje.org/113-telefonska-linija-za-sve-informacije-okoronavirusa/>).

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