Equality & Health Impact Assessment for

Policy on the use of the Welsh Language within Public Health Wales

Part 1

Please answer all questions:-

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Policy on the use of the Welsh Language within Public Health Wales
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	People & Organisational Development Sara Peacock, Equality, Diversity & Inclusion Lead Sam Sutton, Welsh Language Advisor Sam.Sutton@wales.nhs.uk
3.	Objectives of strategy/ policy/ plan/ procedure/ service	Internal Use of Welsh Policy, as required under Standard 79 if the Welsh Language Standards (No.7) Regulations 2018
4.	Evidence and background information considered. For example • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge	Relevant Welsh Government strategy documents: Anti-Racism Action Plan; Cymraeg 2050: A Million Speakers; More Than Just Words, Five-year Plan 2022–27. Workforce skills profile from ESR as at June 2022: {{TABLE}}

Workforce skills profile table:

Total headcount	**2347**
0 (No skills)	1212
1 (Entry)	453
2 (Foundation)	104
3 (Intermediate)	76

• list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages Population pyramids are available from Public Health Wales Observatory and the 'Shaping Our Future Wellbeing' Strategy provides an overview of health need.	**4 (Higher)** — 96 **5 (Proficiency)** — 157 **Not known** — 249 Input sought from colleagues on the Cymraeg Teams channel, Welsh Language Group. Initial draft shared with staff diversity networks before going to further consultation.	
5. Who will be affected by the strategy/ policy/ plan/ procedure/ service Consider staff as well as the population that the project/change may affect to different degrees.	All staff have the potential to be affected by this policy, as it has the ambition to change organisational culture with regard to the use of the Welsh language internally. If the policy is effective, there is a potential for our provision of Welsh language services to improve, which would have a positive effect on our Welsh-speaking populations.	

Part 2- Equality and Welsh language

6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts (unintended consequences) Opportunities or gaps	Action taken by Directorate. Make reference to where the mitigation is included in the document, as appropriate **This column is to be updated in future reviews**	Recommendations for improvement/ mitigation/ identified gaps or opportunities
6.1 Age For most purposes, the main categories are: • under 18; • between 18 and 65; and • over 65	There are no substantial differences in how this policy could affect people because of their age. Younger colleagues are more likely to have studied Welsh at school, so may have latent skills more easily revived in a conducive environment. However, the policy is designed to support use of and respect for the language regardless of ability.		

6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes	Those with hearing or sight impairment might face additional barriers to accessing training in Welsh language skills, much of which takes place online. Some neurodiverse colleagues could face challenges adapting to the change in behaviours and expectations described in this policy. However, those who have Welsh as a first language could find that an improved bilingual environment makes it easier for them to cope.	Adjustments should be sought from learning providers to make opportunities accessible to all. Colleagues who face challenges should be supported to identify them and managers (and, where appropriate, P&OD) should work together to find practical solutions.	
6.3 People of different genders: Consider men, women, people undergoing gender reassignment	There is no differentiation by sex or gender in this policy. Increased use of Welsh in a professional environment, and increased discussion of terminology, should facilitate the creation, adoption and normalisation of newer terms around gender-non-conforming identities.		

NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going through any medical procedures. Sometimes referred to as Trans or Transgender			
6.4 People who are married or who have a civil partner.	There are no differential effects with respect to marriage or civil partnership		
6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding.	A number of people choose to use more Welsh when they have a baby, in order to bring that child up bilingually. Increased use of Welsh in a professional environment should contribute positively to increased confidence in the language		

| 6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers, gypsies/travellers, migrant workers | There has been some suggestion that the Welsh language is inherently racist or exclusionary (see for example the anti-racism report commissioned by Amguedda Cymru in 2021: https://arts.wales/sites/default/files/2021-08/Welsh%20Arts%20Anti%20Racist%20Union%20Report.pdf) However, this suggestion has been rejected by other anti-racism groups (see https://nation.cymru/news/race-council-cymru-wrong-to-say-welsh-language-excludes-minorities/)

The Welsh Government Anti-Racist Wales Action Plan is explicit in its ambition to increase the number of people in Wales from ethnic-minority backgrounds who are learning and speaking Welsh. | Attention should be paid to ensuring that Welsh-language activities are explicitly inclusive and welcoming to staff of all nationalities and ethnicities. Cultural activities should seek to include people of colours among the Welsh-speaking/learning role models, in order that all staff should see themselves represented | |
| **6.7 People with a religion or belief** | There should be no reason why anyone with a particular religion or belief should be affected disproportionately by this policy, which seeks to enable | Attention should be paid to ensuring | |

or with no religion or belief. The term 'religion' includes a religious or philosophical belief	all staff, at all levels, to embrace the Welsh language. The chapel can be a central part of culture for many Welsh-speakers, and some may feel a natural tendency to bring this into their discussions around social or cultural issues.	that staff of other beliefs and none should not be excluded from events, discussions etc on this basis. This should be included in the Terms of Reference for the Welsh Language Network, for example	
6.8 People who are attracted to other people of: • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual)	There is no differentiation by sexual orientation in this policy. Increased use of Welsh in a professional environment, and increased discussion of terminology, should facilitate the creation, adoption and normalisation of newer terms around sexual orientation.		
6.9 People according to their income related group:	This policy has no cost implications for individual staff.		

Consider people on low income, economically inactive, unemployed/workless, people who are unable to work due to ill-health			
6.10 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	Welsh-speaking staff living in those areas where the language is not widely used as a community language (e.g. south-east Wales) should see a benefit from an improved Welsh culture and community in the workplace.		
6.11 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service			

6.12 Welsh Language
There are 2 key considerations to be made during the development of a policy, project, programme, service to ensure there are no adverse effects and/or a positive or increased positive effect on:

(please note these will continue to be reviewed to ensure Public Health Wales fulfils their duties to comply with one or more standards outlined within the Welsh Language Standards (No 7) Regulations 2018)			
Opportunities for persons to use the Welsh language	This policy is explicitly designed to increase and facilitate opportunities for all staff to use the Welsh language.		
Treating the Welsh language no less favourably than the English language	This policy is explicitly designed to ensure favourable treatment for the Welsh language.		

Part 3 – Health

Questions in this section relate to the impact on the health and wellbeing outcomes of the population **and** specific population groups who could be more impacted than others by a policy/project/proposal.
   The part of the assessment identifies;
   • which specific groups in the population could be impacted more (inequalities)
   • what those potential impacts could be across the wider determinants of health framework?
   • Potential gaps, opportunities to maximise positive H&WB outcomes
   • Recommendations/mitigation to be considered by the decision makers

7. Identification of specific population groups

Use the WHIASU Population Groups checklist as a reference to identify the population groups who could be more impacted than others by a policy/project/proposal. The check list can be found on the PHW Integrated EqHIA guidance pages (requires link to PHW Intranet pages for additional information and resources)

The groups listed have been identified as more susceptible to poorer health and wellbeing outcomes (health inequalities) and therefore it is important to consider them in a HIA assessment. In a HIA, the groups identified, as more sensitive to potential impacts will depend on the characteristics of the local population, the context, and the nature of the proposal itself.

7.1 Groups identified	Rational/explanation

Assessment

Complete the wider determinants framework table below providing rational/evidence where appropriate:

1. Consider how the proposal could impact on the population and specific population groups identified above (positive/negative) for each of the wider determinants (the bullets under each determinant are there as a guide)
2. Record any unintended consequences (negative impacts) and/or gaps identified
3. Record any positive impacts or missed opportunities to maximise positive health and wellbeing outcomes
4. identify and record mitigation/recommendations where appropriate

Please note you may find that not all determinants are relevant to the project/plan however recording N/A is not acceptable a rational or evidence should be explained/referenced

Wider determinant for consideration	Positive impacts or additional opportunities	Unintended consequences or gaps	Population groups affected	Mitigation/recommendations
7.2 Lifestyles • Diet/nutrition/breastfeeding • Physical activity • Use of alcohol, cigarettes, e-cigarettes • Use of substances, non-prescribed drugs, abuse of prescription medication • Social media use • Sexual activity	No impacts anticipated			

• Risk-taking activity i.e. gambling, addictive behaviour				
7.3 Social and community influences on health • Adverse childhood experiences • Citizen power and influence • Community cohesion, identity, local pride • Community resilience • Domestic violence • Family relationships • Language, cultural and spirituality • Neighbourliness • Social exclusion i.e. homelessness • Parenting and infant attachment • Peer pressure • Racism • Sense of belonging • Social isolation/loneliness • Social capitol/support/networks • Third sector & volunteering	Increased internal use of Welsh should contribute to an improvement in skills and confidence of our staff at all levels of Welsh, and the normalization of its use. Those staff should then feel more enabled and confident to use that language in a social setting, contributing in a positive way to those communities where Welsh is used.			
7.4 Mental Wellbeing • Does this proposal support sense of control? • Does it enable participation in community and economic life? • Does it impact on emotional wellbeing and resilience?	No impacts anticipated			
7.5 Living/ environmental conditions affecting health • Air quality • Attractiveness/access/availability/quality of area, green and blue space, natural space. • Health & safety, community, individual, public/private space	No impacts anticipated			

• Housing, quality/tenure/indoor environment • Light/noise/odours, pollution • Quality & safety of play areas (formal/informal) • Road safety • Urban/rural built & natural environment • Waste and recycling • Water quality				
7.6 Economic conditions affecting health • Unemployment • Income, poverty (incl. food and fuel) • Economic inactivity • Personal and household debt • Type of employment i.e. permanent/temp, full/part time • Workplace conditions i.e. environment culture, H&S	Welsh skills are highly sought after in the workforce, and developing those skills will improve people's employability for the future.			
7.7 Access and quality of services • Careers advice • Education and training • Information technology, internet access, digital services • Leisure services • Medical and health services • Other caring services i.e. social care; Third Sector, youth services, child care • Public amenities i.e. village halls, libraries, community hub • Shops and commercial services Transport including parking, public transport, active travel	No impacts anticipated			
7.8 Macro-economic, environmental and sustainability factors • Biodiversity • Climate change/carbon reduction/flooding/heatwave	No impacts anticipated			

• Cost of living i.e. food, rent, transport and house prices • Economic development including trade • Government policies i.e. Sustainable Development principle (integration; collaboration; involvement; long term thinking; and prevention) • Gross Domestic Product • Regeneration				

Stage 3
Summary of key findings and actions Please answer question 8.1 following the completion of the EHIA and complete the action plan

Key findings: Impacts/gaps/opportunities	Actions (what is needed and who needs to do) to address the identified mitigation and recommendations	Lead		

Alternatively, if appropriate, please explain the steps taken to consult with and consider the differential impact of the changes on the various protected characteristic groups (part 2) or any specific identified population groups (part 3).