



**Resolution 1469 (2005)<sup>1</sup>**

## **Language problems in access to public health care in the Brussels-Capital region in Belgium**

Parliamentary Assembly

1. Language being an important factor in the quality of health care, it is indispensable that there is satisfactory understanding between the patient and medical and nursing staff to avoid compromising the efficacy of medical care, which absolutely must remain a priority. Leaving medical and humanist considerations aside, effective communication between patient and doctor in Belgium is presupposed in the current legislation and case law in the law on patients' rights which entered into force on 6 October 2002.
2. At the same time, access to health care and language problems in the Brussels-Capital region must be considered in the general context of Belgium's constitutional development and its complex language situation, which is the result of historical events and compromises reached through lengthy negotiations.
3. After several successive legislative and constitutional reforms, starting in the early 1960s, Belgium has changed from a decentralised unitary structure into a federal state composed of three communities, three regions and four language regions (three monolingual and one bilingual).
4. The Brussels public hospitals operate under local authority supervision and are subject to fairly strict rules on bilingualism. Numerous administrative, political and judicial controls are carried out to ensure that these rules are effectively applied. In practice, however, strict application of these rules is not always easy to guarantee, for the following reasons in particular:
  - 4.1. the general level of bilingualism unfortunately remains rather low in the Brussels region;
  - 4.2. there is strong competition to recruit qualified staff due to the attraction exerted by the hospitals located in Flemish Brabant.
5. The solution to the problem evidently lies not in a reform of the language legislation, but rather in enforcement of the provisions of the legislation on language use in administrative matters.
6. The Parliamentary Assembly considers that language problems in access to health care in the Brussels-Capital region can only be solved if all the efforts currently being made to create all the conditions for a strengthening of bilingualism in Brussels hospitals are continued in the same spirit of goodwill, openness, tolerance, pragmatism and flexibility so as to foster peaceful cohabitation of the different language groups.
7. Accordingly, the Assembly recommends to the political representatives of the language communities in the Brussels-Capital region to:
  - 7.1. increase the administrative and judicial means of guaranteeing bilingualism in Brussels hospital services while respecting the fundamental principle of continuity of public services;
  - 7.2. evaluate and streamline the supervisory mechanisms for guaranteeing bilingualism and enforcing the language legislation in order to increase their effectiveness;

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1. Assembly debate on 7 October 2005 (32nd Sitting) (see [Doc. 10648](#), report of the Social, Health and Family Affairs Committee, rapporteur: Mrs Cliveti) and [Doc. 10680](#), opinion of the Committee on Legal Affairs and Human Rights, rapporteur: Mr Cilevics). Text adopted by the Assembly on 7 October 2005 (32nd Sitting).



- 7.3. avail themselves of the necessary means to develop the supply of bilingual staff in the Brussels hospitals;
  - 7.4. ensure that bilingual staff are in place in reception services and make efforts to provide a better welcome for Dutch-speaking patients;
  - 7.5. pay urgent attention to the need to ensure effective bilingualism in emergency services, in order to avoid potentially life-threatening consequences of possible misunderstandings;
  - 7.6. to investigate the reasons for the lack of enthusiasm of Dutch-speaking health-care professionals for practising in Brussels, to promote traineeships for Dutch-speaking students in Brussels hospitals, to spread information about vacancies to bilingual professionals who may be interested in working in Brussels, to promote “networking” between bilingual general practitioners and bilingual specialists working in hospitals and to improve language training possibilities in Brussels hospitals;
  - 7.7. set up a network of bilingual doctors;
  - 7.8. implement a language training programme in the medical schools of the region;
  - 7.9. strengthen and better define the responsibility of hospitals as a public service.
8. The Assembly further invites the Belgian Government to:
- 8.1. encourage cultural communication and co-operation across the language barriers in Belgium;
  - 8.2. ratify the Framework Convention on the Protection of National Minorities (ETS No. 157), in keeping with Assembly [Resolution 1301 \(2002\)](#) on the protection of minorities in Belgium, and to withdraw the reservations expressed at its signature, in such a way as to complement the existing language arrangements with the application of relevant provisions of the Framework Convention in order to ensure the best possible quality of health care for all inhabitants of the greater Brussels region.