

Being Small and Outnumbered: Service and Sociocultural Exclusion Among Older Linguistic Minorities in Finland

Fredrica Nyqvist, Siv Björklund, Marina Lindell et Mikael Nygård

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Résumé de l'article

Notre étude vise à analyser l'exclusion sociale de locuteurs du suédois et du finnois âgés vivant en situation linguistique minoritaire dans les municipalités bilingues de Finlande, qui sont tenues d'offrir des services dans les deux langues. Les données ont été tirées du *Language Barometer Survey* de 2016, qui mesure la qualité des services linguistiques dans les municipalités bilingues (n=33). Aux fins de notre étude, notre attention s'est concentrée sur 2 030 personnes âgées de 60 à 84 ans. Nous avons inclus quatre groupes linguistiques différents, suédophones ou finnophones monolingues et bilingues finnois-suédois, et examiné deux domaines d'exclusion sociale : la langue de service et l'exclusion socioculturelle. Les résultats ont montré que le fait de vivre en tant que minorité régionale pose plus de défis en matière d'inclusion sociale pour la minorité suédophone monolingue et bilingue, par opposition à la minorité finnophone. Nous concluons que la réalisation des droits linguistiques semble la plus égalitaire dans les municipalités bilingues où le suédois est la langue majoritaire.

Being Small and Outnumbered: Service and Sociocultural Exclusion Among Older Linguistic Minorities in Finland

Fredrica Nyqvist

Åbo Akademi University
Vaasa, Finland

Siv Björklund

Åbo Akademi University
Vaasa, Finland

Marina Lindell

Åbo Akademi University
Vaasa, Finland

Mikael Nygård

Åbo Akademi University
Vaasa, Finland

Abstract

Our study aims to analyze the social exclusion of older Swedish and Finnish speakers living as linguistic minorities in bilingual municipalities in Finland, where municipal authorities are required to offer services in both languages. Data was taken from the 2016 *Language Barometer Survey*, measuring the quality of language services in bilingual municipalities (n=33). For the purposes of our study, we focused on 2,030 people between the ages of 60 and 84. We included four different language groups, unilingual Swedish and Finnish speakers and Finnish-Swedish bilinguals and examined two social exclusion domains: service and sociocultural exclusion. The results showed that living as a regional minority poses a greater challenge when it comes to social inclusion for the unilingual and bilingual Swedish minority, as opposed to the Finnish-speaking minority. We conclude that linguistic rights seem to be achieved in the most egalitarian way in bilingual municipalities where Swedish is the majority language.

Résumé

Notre étude vise à analyser l'exclusion sociale de locuteurs du suédois et du finnois âgés vivant en situation linguistique minoritaire dans les municipalités bilingues de Finlande, qui sont tenues d'offrir des services dans les deux langues. Les données ont été tirées du *Language Barometer Survey* de 2016, qui mesure la qualité des services linguistiques dans les municipalités bilingues (n=33). Aux fins de notre étude, notre attention s'est concentrée sur 2 030 personnes âgées de 60 à 84 ans. Nous avons inclus quatre groupes linguistiques différents, suédophones ou finno-phones monolingues et bilingues finnois-suédois, et examiné deux domaines d'exclusion sociale : la langue de service et l'exclusion socioculturelle. Les résultats ont montré que le fait de vivre en tant que minorité régionale pose plus de défis en matière d'inclusion sociale pour la minorité suédophone monolingue et bilingue, par opposition à la minorité finnoise. Nous concluons que la réalisation des droits linguistiques semble la plus égalitaire dans les municipalités bilingues où le suédois est la langue majoritaire.

Tiivistelmä

Tutkimuksen tarkoituksena on analysoida kaksikielisissä kunnissa kielivähemmistönä asuvien ikääntyneiden suomen- ja ruotsinkielisten sosiaalista ulkopuolisuutta. Kunnallisten viranomaisten tulee kaksikielisissä kunnissa tarjota palveluita molemmilla kielillä. Aineistona tutkimuksessa on käytetty vuoden 2016 Kielibarometriä, jossa mitataan kaksikielisten kuntien (n=33) kielellisten palveluiden laatua. Tutkimus sisältää 2030 60–84-vuotiasta henkilöä ja neljä kieliryhmää: yksikieliset ruotsinkieliset, yksikieliset suomenkieliset ja kaksikieliset, joilla on joko suomi tai ruotsi vahvempana kielenä. Tutkimuksessa tarkastellaan kieliryhmien sosiaalista ulkopuolisuutta palveluista ja sosiokulttuurisesta yhteenkuuluvuudesta. Tulokset osoittavat, että sosiaalinen osallisuus on haastavampaa ruotsinkieliselle (yksi- tai kaksikieliselle) kuin suomenkieliselle vähemmistölle. Voidaan todeta, että kielelliset oikeudet toteutuvat tasa-arvoisimmin kaksikielisissä kunnissa, joissa enemmistökielenä on ruotsi.

Abstrakt

Syftet med studien är att analysera social exkludering av äldre svensk- och finskspråkiga som lever som språkliga minoriteter i tvåspråkiga kommuner i Finland. I tvåspråkiga kommuner måste kommunala myndigheter erbjuda service på båda språken. Data som används kommer från *Språkbarometern 2016* och mäter kvaliteten på den språkliga servicen i tvåspråkiga kommuner (n=33). I studien ingår 2030 personer mellan 60 och 84 år. Vi inkluderar fyra olika språkgrupper: enspråkigt svenskspråkiga, enspråkigt finskspråkiga samt tvåspråkiga med antingen finska eller svenska som starkare språk och studerar språkgruppernas sociala exkludering från service och sociokulturell samhörighet. Resultaten tyder på att det är mer utmanande för en svenskspråkig regional minoritet (enspråkig eller tvåspråkig) att bli socialt inkluderad, än vad det är för en finskspråkig minoritet. Vi drar slutsatsen att språkliga rättigheter uppfylls mest jämnt i tvåspråkiga kommuner med svenska som majoritetsspråk.

Background

In general, older adults face a higher risk of being socially excluded due to age-related changes, such as an increased risk of functional disability, health problems, and loss of partner, family and friends. Also, older people may encounter ageism (Butler, 1975), in other words, prejudices against old age that might lead to age-based discrimination and social exclusion (Stuckelberger, Abrams, & Chastonay, 2012). The social exclusion of ethnic groups and sexual minorities has been studied to some extent (Heikkinen, 2011; Victor, Burholt, & Martin, 2012; McCann, Sharek, Higgins, Sheerin, & Glacken, 2013), and the results suggest that people from minority ethnic communities are particularly at risk of social exclusion due to, for example, poverty and unemployment. Social and economic inequality also produces political inequality. These structural inequalities are harmful to our societies and democracy, since they exclude and marginalize the voices and influence of some groups (Young, 2000, p. 34). However, the exclusion of linguistic minority groups seems to play

a subordinate role in the literature so far (see Walsh, Scharf, & Keating, 2017). Therefore, in this study, we seek to advance knowledge of bilingualism and minority status as significant social categorizations for exploring social exclusion in later life and as something that can be combatted by using appropriate policy measures.

We use the Finnish case to illustrate social exclusion, by focusing on older Swedish and Finnish speakers living as linguistic minorities in Finland. From the 12th century until 1809, Finland was part of Sweden and, during this period, Swedish was the administrative language in Finland, but the majority language was Finnish. Between 1809 to 1917, when Finland was an autonomous Grand Duchy under Russian rule, Swedish remained the administrative language (McRae, 1999). In the mid-19th century, a nation-building awakening process began with increased interest in the Finnish language aimed at strengthening the Finnish nation. Finnish then became an official language alongside Swedish in 1863 (Tägil, 1995). After the civil war in 1917-1918, Finland became independent and, according to the *Constitution Act of 1919*, Finland is a bilingual nation with two national languages, Finnish and Swedish, with equal obligations and rights (Finnish Constitution, 1999). In the early 20th century, Swedish speakers made up 13% of the population, with the percentage diminishing over the past century (Finnäs, 2013). In the decades following the Second World War, migration flows of Swedish-speaking Finns to Sweden were substantial, mainly due to job shortages in Finland (Saarela & Finnäs, 2007). Today, 88% of the population is Finnish-speaking, 5.2% is Swedish-speaking, and other linguistic minorities account for 6.8% of the population (Statistics Finland, 2018).

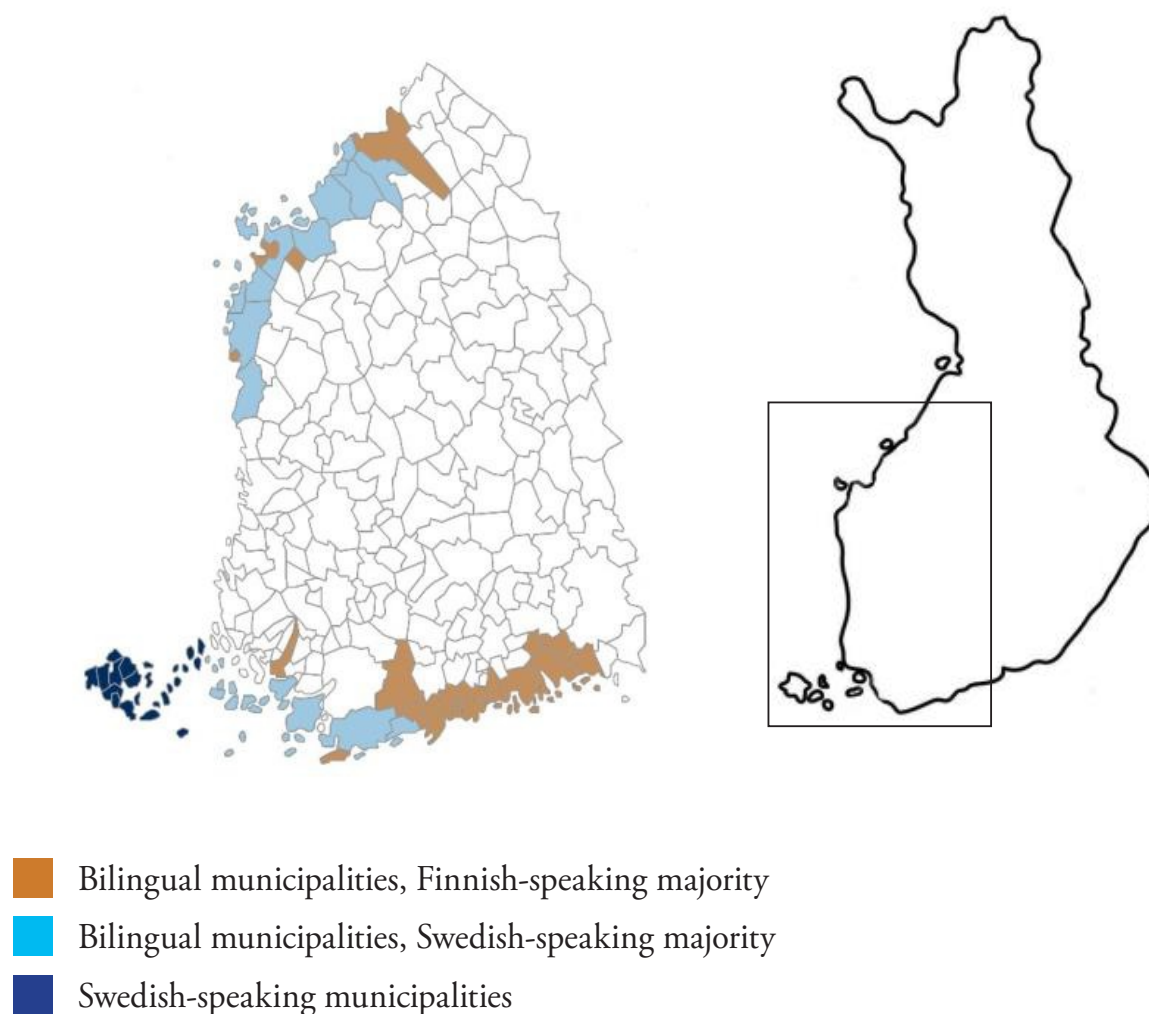
Under the *Language Act* of 2003¹ that replaced the former act of 1922², which was passed to ensure the “right of everyone to use his or her own language, either Finnish or Swedish, before courts of law and other authorities, and to receive official documents in that language” (*Finnish Constitution*, 1999, para 17), public authorities must respond to the cultural and social needs of both linguistic groups on equal grounds. The duties of regional and state authorities to provide services in both languages are dependent on the linguistic status of the municipality as unilingual or bilingual (*Language Act*, 2003, para 5). In bilingual municipalities, authorities are required to offer social and health care services in both languages. At present, a municipality is bilingual if the linguistic minority exceeds 8%, or 3,000 persons. Of the total number of 311 municipalities in Finland in 2018, 33 municipalities were classified as bilingual (15 with Swedish as the majority language, and 18 with Finnish as majority language). These municipalities are located in western Finland (Ostrobothnia), and in South Finland (Southwest Finland and Uusimaa), as shown in Figure 1. Unilingual Swedish speaking municipalities (16 in total) are found on the Åland

1. *Language Act*, 423/2003.

2. *Language Act*, 148/1922.

Islands in Southwest Finland, which is an autonomous region. In Finland, municipalities are the main providers of public care and are afforded great responsibility in organizing services, in accordance with the *Language Act* (2003) and other special legislation such as the *Health Care Act* (2010)³. Linguistic rights are reviewed every fourth year, when a report of the Government on the application of language legislation is submitted to Parliament (Finnish government, 2017). The report focuses on the application of language legislation, implementation of linguistic rights and language relations in the country.

Figure 1
Swedish-Speaking and Bilingual Municipalities in Finland in 2017



Source: Kommunförbundet [Municipal Association], Härtull, 2018

3. *Health Care Act*, 1326/2010.

Despite strong legal rights, the minority is still dependent on majority decisions, leaving the minority vulnerable, and there is a fear that publicly-provided service in the Swedish language will become increasingly difficult to access (McRae, 1999; Törmä, 2014; Lindell, 2016). Several semi-public and third sector institutions work, however, to support extensive social and cultural activities in the Swedish language, particularly the semi-public Folktinget (the Swedish Assembly of Finland), which serves as a platform for spreading information and promoting public awareness of the legal rights of the linguistic minority in bilingual municipalities (for more information visit <https://folktinget.fi/>).

Following this contextual introduction of the Finnish case, the first section of this article lays out the theoretical framework, drawing upon theories on social exclusion, linguistic minorities, bilingualism, and contextualizing it in Finnish society and culture; the second section outlines the source of evidence, with data drawn from the *Language Barometer* of 2016; and the final section discusses and summarizes key findings.

Theoretical Framework

Social exclusion

While social exclusion has been on the research and policy agenda for several years, there is still no agreement regarding its definition (Littlewood, Glorieux, & Jönsson, 1999; Millar, 2007; Rawal, 2008). Nonetheless, there seems to be a consensus that social exclusion is a relative concept meaning that the exclusion of a given group, such as older people, should be assessed in relation to another defined group. Social exclusion also involves agency. This implies that older people might be excluded by the actions of other individuals or institutions. Further, social exclusion is dynamic and processual, with individuals experiencing more or less exclusion at different times or in different situations. Finally, it is a multidimensional concept encompassing social, economic, political or cultural domains, and it is common that exclusion in one area also affects other areas (Walsh *et al.*, 2017). Thus, social exclusion is not narrowly defined as material deprivation, marginalization or poverty, but broadly as also being excluded from participation in social and civic life. Some have proposed that participation is the opposite of exclusion rather than inclusion, whereas some have argued that both concepts are inseparable sides of the same coin (Rawal, 2008).

According to a recent review (Walsh *et al.*, 2017), social exclusion literature among older people recognizes six thematic social exclusion areas: social relations (*e.g.* social networks and support, social opportunities); material and financial resources (*e.g.* poverty, income, pensions); services, amenities and mobility (*e.g.* health and social care services, general services, housing); civic participation (*e.g.* volunteering, political participation, citizenship); neighbourhood and community (*e.g.* services, amenities, social and relational aspects) and

sociocultural aspects (e.g. identity exclusion, ageism and symbolic exclusion). When it comes to past research, services, amenities, and mobility have all been more extensively studied than civic participation. Although the research literature on the social exclusion of older people among linguistic minorities is limited, social exclusion has been covered in the literature on multilingualism, often in the context of migration, assimilation and economic disadvantage (for an overview see Piller, 2012).

In this study, social exclusion primarily refers to service and sociocultural exclusion, two areas that have been examined in the gerontological literature (Walsh *et al.*, 2017). In Finland, social and health care service exclusion from a linguistic perspective and the experience of language-based discrimination, *i.e.* sociocultural exclusion, have been summarized in a report based on the results of the *Language Barometer* surveys of 2004 and 2016 (Lindell, 2016) conducted among Swedish and Finnish speakers living as linguistic minorities in bilingual municipalities. Swedish speakers living in bilingual municipalities with Finnish as the majority language were generally less satisfied with service and experienced greater discrimination, and this seems to be related to the size of the linguistic minority in the municipality. As one could expect, in a municipality with fewer Swedish speakers, it was also more difficult to receive social and health care service in one's own language.

In 2014, the Ministry of the Interior, published a report aimed at assessing discrimination in social and health care services, as experienced by elderly people from minority groups, including Swedish speakers (Törmä, Huotari, Tuokkola, & Pitkänen, 2014). Interview data was collected from older Swedish speakers living in the capital region of Helsinki, as well as from stakeholders. The results showed that respondents were quite satisfied with primary health care services in Swedish. The reason for this appears to be based on the right to receive service in the language of one's choice. The situation was experienced differently in home-based care, as well as within special care environments, where it seemed more difficult to receive care in one's own language. A special concern was raised by stakeholders for older people with cognitive impairments having lost second language skills, since it could lead to communication barriers and inappropriate care; an issue that has been acknowledged in previous international research (e.g. de Moissac & Bowen, 2019; Martin, Woods, & Williams, 2019). Finally, bilingual respondents in the study reported that they switched to the Finnish language, if professionals could not deliver service in Swedish in a satisfactory way, rather than continuing the discussion in Swedish. They fared lower care quality and misunderstandings.

We argue that knowledge about language rights has an essential cultural dimension that involves recognizing the cultural capital of linguistic minorities and can be seen as key to socialization into the culture (Skutnabb-Kangas & Phillipson, 1998). Therefore, a lack of knowledge of language rights is included in this study as a proxy measure of sociocultural

exclusion. In 2016, 27% of Swedish and 22% of Finnish speakers living as linguistic minorities in bilingual municipalities reported that they lacked knowledge about their language rights (Lindell, 2016). A similar pattern was noted for the indicator measuring the importance of language rights. A somewhat larger percentage of Swedish speakers (19%) did not consider language rights as important compared to Finnish speakers (15%). However, these findings are based on analyses within the general adult population, and do not specifically represent older people.

Sociocultural exclusion has implications also for participation in society. People who feel included in their community are more likely to volunteer on its behalf. A strong psychological sense of community will motivate people to contribute to changing problems in the community and developing their neighbourhood. Thus, sociocultural exclusion leads to many negative consequences, both direct and indirect (Liu & Besser, 2003).

Bilingualism and previous research

The population registers in Finland record each citizen's mother tongue as Finnish or Swedish, and one cannot be registered as bilingual, *i.e.* speaking both languages. However, mixed marriages have increased since the 1950s, when about a fifth of all Swedish speakers married a Finnish speaker, compared to almost 40% from the 1980s and onward (Finnäs, 1986; 2010), indicating an increase in the number of bilinguals. The 1950 census study showed that bilingualism was much more common among Swedish speakers than Finnish speakers. In the country as whole, slightly less than 8% of Finnish speakers identified themselves as bilingual, compared with 54% of Swedish speakers (Allardt, 1985). A study conducted in bilingual municipalities in the 1980s showed that that knowledge of Swedish among Finnish speakers living in bilingual municipalities had increased, and about 50% described themselves as speaking and reading Swedish relatively well (Sandlund, 1991). The Barometer survey, which collects data regarding language proficiency and identity among Swedish speakers, showed that in 2007 about 80% of the respondents reported that they spoke Finnish at least relatively well, whereas 17% of the Swedish speakers reported bilingualism, in the survey seen as a measure of a bilingual identity (Herberts, 2008). With the increase in the number of Swedish-speaking bilinguals, who can switch languages based on the situation, and increasing difficulties in receiving public services in Swedish (Lindell, 2016), it seems logical to assume that Swedish speakers with limited knowledge of Finnish are even more vulnerable today to being socially excluded.

We know from previous research that Swedish and Finnish speakers differ from each other when it comes to social and health-related resources. The Swedish-speaking minority appears to have some health advantages over the Finnish-speaking majority (Saarela & Finnäs, 2005), and they appear to be an exception to the general health trend of the majority.

Previous studies show that Swedish speakers reported better health (Nyqvist & Martelin, 2007), lower disability pensions (Reini & Saarela, 2017), as well as lower mortality rates (Saarela & Finnäs, 2005). Swedish speakers also appear to live in more cohesive communities characterized by a larger social capital compared to Finnish-speaking communities (Hyyppä & Mäki, 2001). However, in these types of comparative studies, respondents are categorized by their registered mother tongue, and there is no information regarding bilingualism in relation to social and health-related resources.

The ability to communicate and interact plays a crucial role in an individual's life across the lifespan. For most people, language is a key means for daily interaction. Studies conducted with older adults (e.g. Motobayashi, Swain, & Lapkin, 2014), have shown that opportunities for using language in meaningful ways with other speakers are crucially important to maintaining and even enhancing cognitive development. Results suggest that a key component for cognitive change is *linguaging*, in other words, “the activity of mediating cognitively complex ideas using language”, where language production activities such as speaking and writing mediate and foster remembering, attending, and other aspects of higher mental functioning. In a similar vein, cognition and languages have been of interest in studies of the bilingual brain and delays in onset of dementia as a possible effect of bilingualism (see Bialystok & Sullivan, 2017; Freedman, Alladi, Chertkow, Bialystok, Craik, Phillips, Duggirala, Raju, & Bak, 2014; Bak, Nissan, Allerhand, & Deary, 2014). It is, however, not only the cognitive dimensions of bilingualism in older adults that are relevant. Sociocultural dimensions become relevant and timely in an increasingly global and multilingual society, where older adults also face a variety of challenges including bilingual and multilingual interaction settings. Whereas many studies focus on professional and non-professional interpretation, language brokering and cross-cultural communication (see Xiao, Willis, Harrington, Gillham, De Bellis, Morey, & Jeffers, 2017; Jansson & Wadensjö, 2016; Hadziabdic, Lundin, & Hjelm, 2015) as ways of interaction in situations, where migrants and newcomers do not share the same language and culture in their surroundings, in our study we investigate bilingualism as a possible gatekeeper for social inclusion and exclusion for older adults in Finland. We assume that most participants of our study are familiar with the stable Finnish-Swedish bilingualism at the national level, and that they have a thorough experience of the dynamics of the use of the two languages in their local contexts.

Hence, we can assume, on the one hand, that bilingual Swedish and Finnish speaking older people, who are able to shift languages based on the situation, feel less excluded than unilingual Swedish or Finnish speakers. Language is therefore seen as a means for being able to access services and for capacity building (Piller, 2012). On the other hand, research on bilingualism and culture suggests that the first language or mother tongue, in particular, is an important part of collective ethnic or cultural identity, meaning that regardless of one's language skills, one could still have an unilingual ethnic identity (McRae, 1999), which

could also affect the sense of inclusion or exclusion. How domains of social exclusion relate to language when living as a minority will bring more knowledge to what is already known about the situation of Swedish and Finnish speakers in Finland. The literature on the social exclusion of older persons has not generally dealt with exclusion from a linguistic perspective; however, social exclusion has been articulated in the literature on multilingualism. In this study we bring them together. Our study of social exclusion will increase knowledge of the complexity of disadvantage affecting older language-minority adults and offer valuable insight into if and how language serves to socially exclude older people.

In light of the above, we raise two research questions in this study:

RQ1: Is there a difference in service exclusion and sociocultural exclusion between older Finnish and Swedish speakers?

RQ2: Do Finnish-Swedish bilinguals experience less language-related social exclusion than unilinguals?

Data and methods

Data in this study was taken from the *Language Barometer* survey of 2016 measuring the quality of language services in bilingual municipalities. The postal questionnaire survey has been carried out every four years since 2004. It is managed by the Social Science Research Institute at Åbo Akademi University. The *Language Barometer* describes the views of residents who belong to the language minority (Swedish or Finnish) in a bilingual municipality. In 2016, it was sent to a randomly selected population sample and answered by 3,704 persons aged 18-84, resulting in a response rate of 42%. For this study we included 2,030 people aged 60 to 84.

Language

In the survey, participants were asked to include their mother tongue. It was not possible for bilingual and multilingual older adults to explicitly include their bilingualism and multilingualism. Therefore, we have traced trajectories of individual bilingualism based on two survey questions, where participants were asked if they have used the other national language (*i.e.* Finnish or Swedish) at home during their childhood and if they regularly use the other national language in their daily life. Consequently, language was divided into four different categories: Finnish, Swedish, Finnish bilingual and Swedish bilingual. The first two language groups were based on Finnish or Swedish mother tongue. The two bilingual groups were based on mother tongue and language use at home (only/mostly Swedish/Finnish or both languages equally), or language use in the childhood home (both languages equally). The two indicators of bilingualism, origin and use, comply with two of the four

definition criteria (origin, function, use, and identity) of mother tongue widely used in the research field of bilingualism and multilingualism (*cf.* Skutnabb-Kangas, 1984; Skutnabb-Kangas & McCarty, 2008). However, we recognize that these trajectories focus entirely on the use of either Finnish or Swedish as the other national language. It cannot be entirely excluded that, in our data, there may be multilingual older adults who use languages other than Swedish and Finnish, who identify themselves as multilingual speakers, and who may have language service experiences in languages other than Finnish and Swedish.

Social exclusion domains

Service exclusion

Service exclusion was measured with three indicators. The first question asked: “In general do you try to receive service in your own language?”. The four-graded response scale was dichotomized into “yes” (“yes, always” and “yes, often”), and “no” (“sometimes”, “rarely”, and “never”). The next two indicators assessed satisfaction with health care and social services from a linguistic perspective. For each of the five health care services (health centre – doctor’s practices, health centre – public health nurses’ practices, accident and emergency clinic, dental care, mental health service) and each of the four social services (social work, elder care, home-based service, service and support for people with disabilities), respondents were asked to grade language service on a scale of 1-7, where 1 was the lowest and 7 was the highest. We used a median split to dichotomize groups below and above a median satisfaction score for health care (median=5.25), and social services (median=5.33), respectively.

Sociocultural exclusion

Sociocultural exclusion was assessed with three questions. The first one asked: “How well do you know your language rights?”. The response alternatives were “very well”, “well”, “not so well”, and “not at all”. The response alternatives were dichotomized with the first two response alternatives as “well” and the latter two as “not so well”. The second question asked: “Are language rights considered important to you?” with the response alternatives as “very important”, “somewhat important”, “not very important”, and “not at all important”. The response alternatives were dichotomized with the first two as “important” and the latter two as “not so important”. The third and final questions asked: “Have you been harassed and/or discriminated against due to your language?”. The four-graded response scale was dichotomized into “no” (“never”) and “yes” (“often”, “sometimes”, and “a few times only rarely”).

Sociodemographic variables

Sociodemographic variables included age (60-69 and 70-84), gender, educational level and region. In the survey, participants were asked to provide their highest level of education

and we included two education categories: “lower secondary” and “higher secondary”. We separated bilingual municipalities by region: Ostrobothnia (14 municipalities), Southwest Finland (3 municipalities) and Uusimaa (16 municipalities, including one municipality in the region of Kymenlaakso).

Analyses

The distribution (%) of all variables included in the study was calculated by language group (Table 1). Pearson’s correlation coefficient (r) was used to assess the association between social exclusion indicators (Tables 2a–2d). The association between language groups and social exclusion indicators was analyzed using multivariate logistic regression. The results were presented as odds ratios (OR) and 95% confidence intervals (CI). We began the analyses by including language groups (Model 1), then added gender, age group, education level and region as control variables in the model (Model 2). Analyses were performed using IBM SPSS version 24.

Results

Descriptive characteristics for all variables included are reported in Table 1 based on four different language groups. A greater proportion of respondents were considered Swedish or Finnish than bilingual in our study sample. The Swedish speakers, including bilingual Swedish speakers, were slightly older and reported higher educational levels as compared to the Finnish speakers. In our study sample, a greater proportion of Finnish speakers were from the Ostrobothnia region, whereas more Swedish speakers were from the Uusimaa region in southern Finland. This is due to the fact that Swedish speakers are in a majority in several municipalities in Ostrobothnia, making Finnish speakers a regional minority in these municipalities. The number of respondents who do not try to receive service in their own language was clearly higher among the two bilingual groups. Lower satisfaction with health care and social services was relatively common among unilingual and bilingual Swedish speakers. When it comes to the sociocultural exclusion domain, bilingual Swedish-speaking respondents, in particular, reported a lack of knowledge of language rights and did not consider language rights as important as the other language groups. More than 30% of the Swedish speakers, both unilingual and bilingual, reported language-based harassment and discrimination, whereas the number was slightly less than 20% in the Finnish-speaking groups.

A correlation analysis was separately conducted for the four different language groups (Tables 2a-d) to better understand relationships between domains of social exclusion.

Table 1
Sociodemographic characteristics, social exclusion domains
by four language groups

<i>Sociodemographic characteristics</i>		Finnish ¹ (n=637)	Swedish ¹ (n=826)	Finnish- bilingual ² (n=205)	Swedish- bilingual ² (n=362)
<i>Gender</i>	Female	57.6	55.8	62.9	45.6
	Male	42.4	44.2	37.1	54.4
<i>Age group</i>	60-69	61.9	45.8	54.1	48.3
	70-84	38.1	54.2	45.9	51.7
<i>Education level</i>	Lower secondary	36.9	25.9	32.4	28.5
	Upper secondary	63.1	74.1	67.6	71.5
<i>Region</i>	Ostrobothnia	64.4	10.5	71.2	11
	Southwest Finland	19.2	4	14.1	4.2
	Uusimaa	16.5	85.5	14.6	84.7
<i>Service exclusion</i>					
<i>Try to get service in own language</i>	Yes	85.9	64.7	36.1	24.4
	No	14.1	35.3	63.9	75.6
<i>Satisfaction with health care services³</i>	Greater	67.9	38.4	81.5	29.1
	Lower	32.1	61.6	18.5	70.9
<i>Satisfaction with social services³</i>	Greater	58.2	44.4	74	27.9
	Lower	41.8	55.6	26	72.1
<i>Sociocultural exclusion</i>					
<i>Knowledge about language rights</i>	Good	74.3	75.3	83.9	61.1
	Poor	25.7	24.7	16.1	38.9
<i>Importance of language rights</i>	Greater	85.3	87.5	81.1	57.8
	Lower	14.7	12.5	18.9	42.2
<i>Harassed and/or discriminated against due to one's language</i>	No	83	61.4	80.6	66.8
	Yes	17	38.6	19.4	33.2

1. Based on registered mother tongue (Finnish or Swedish).

2. Based on registered mother tongue and language use at home (only/mostly Swedish/Finnish or both languages equally), or language use in childhood home (both languages equally).

3. Only answered by those with service experience (health care n=1546; social care n=392).

Table 2a
Correlations among social exclusion variables in Finnish speakers
living as a minority in bilingual municipalities (n=637)

	1	2	3	4	5
Don't try to get service in own language					
Low satisfaction with health care services	-0.040				
Low satisfaction with social services	0.086	0.717**			
Poor knowledge of language rights	0.026	0.105*	-0.024		
Language rights of low importance	0.241**	-0.105*	-0.024	0.263**	
Been harassed and/or discriminated against due to language	-0.033	0.111*	0.256**	0.011	-0.047

Correlations are Pearson's r

** $p < 0.01$, * $p < 0.05$

Table 2b
Correlations among social exclusion variables in Swedish speakers
living as a minority in bilingual municipalities (n=826)

	1	2	3	4	5
Don't try to get service in own language					
Low satisfaction with health care services	0.076				
Low satisfaction with social services	0.142	0.574**			
Poor knowledge of language rights	0.079*	0.060	-0.046		
Language rights of low importance	0.407**	-0.047	-0.127	0.180**	
Been harassed and/or discriminated against due to language	-0.052	0.150**	0.160	0.017	-0.130**

Correlations are Pearson's r

** $p < 0.01$, * $p < 0.05$

Table 2c
Correlations among social exclusion variables in bilingual Finnish speakers living as a minority in bilingual municipalities (n=205)

	1	2	3	4	5
Don't try to get service in own language					
Low satisfaction with health care services	-0.022				
Low satisfaction with social services	-0.002	0.710**			
Poor knowledge of language rights	0.241**	-0.029	0.029		
Language rights of low importance	0.290**	-0.102	-0.197	0.245**	
Been harassed and/or discriminated against due to language	0.005	0.103	0.168	-0.014	0.087

Correlations are Pearson's r

** $p < 0.01$, * $p < 0.05$

Table 2d
Correlations among social exclusion variables in bilingual Swedish speakers living as a minority in bilingual municipalities (n=362)

	1	2	3	4	5
Don't try to get service in own language					
Low satisfaction with health care services	0.06				
Low satisfaction with social services	-0.19	0.562**			
Poor knowledge of language rights	0.172**	-0.003	0.037		
Language rights of low importance	0.367**	-0.010	-0.208	0.327**	
Been harassed and/or discriminated against due to language	-0.125*	0.047	-0.026	-0.018	-0.182**

Correlations are Pearson's r

** $p < 0.01$, * $p < 0.05$

In all language groups, a strong correlation was found between lower satisfaction of health care services and social services. Also, a correlation between language rights considered not as important ("don't try to get service in own language") and "poor knowledge of one's language rights", respectively, was found in all language groups. Among the unilingual Swedish and Finnish speakers, a correlation was seen between language-based harassment/discrimination and lower satisfaction with health care services. Among Finnish speakers, a correlation was also found between discrimination and satisfaction with social services.

For Swedish speakers and both bilingual groups, language rights considered not as important had a positive correlation with the item “don’t try to get service in own language”. Lastly, experienced harassment and/or discrimination inversely correlated with language rights among unilingual and bilingual Swedish speakers, indicating that those who have experienced discrimination also report that language rights are important. Also, having experienced harassment and/or discrimination inversely correlated with the item “don’t try to get service in own language” among bilingual Swedish speakers. Thus, those who have experienced discrimination or harassment also report to a greater extent that they try to get service in their own language.

Service exclusion

Table 3a
Do not try to get service in own language (n=1938)

		Model 1			Model 2		
		OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>
<i>Language group</i>	Finnish	1.00			1.00		
	Swedish	3.31	(2.54-4.32)	***	3.87	(2.76-5.43)	***
	Finnish - bilingual	10.72	(7.45-15.43)	***	11.34	(7.83-16.44)	***
	Swedish - bilingual	18.82	(13.55-26.15)	***	20.27	(13.70-29.98)	***
<i>Gender</i>	Female				1.00		
	Male				1.45	(1.17-1.78)	**
<i>Age group</i>	60-69				1.00		
	70-84				0.95	(0,77-1,18)	
<i>Education level</i>	Lower secondary				0.69	(0.54-0.87)	**
	Upper secondary				1.00		
<i>Region</i>	Uusimaa				1.00		
	Southwest Finland				1.36	(0.90-2.05)	
	Ostrobothnia				1.10	(0.81-1.49)	

*** $p < 0.001$, ** $p < 0.01$

Table 3b
Lower satisfaction with social services (n=382)

		Model 1			Model 2		
		OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>
<i>Language group</i>	Finnish	1.00			1.00		
	Swedish	1.74	(1.09-2.79)	*	1.73	(0.91-3.28)	
	Finnish - bilingual	0.49	(0.24-0.99)	*	0.45	(0.22-0.94)	*
	Swedish - bilingual	3.61	(1.88-6.90)	***	3.58	(1.62-7.90)	**
<i>Gender</i>	Female				1.00		
	Male				1.57	(1.00-2.45)	
<i>Age group</i>	60-69				1.00		
	70-84				0.65	(0.42-1.01)	
<i>Education level</i>	Lower secondary				0.79	(0.49-1.25)	
	Upper secondary				1.00		
<i>Region</i>	Uusimaa				1.00		
	Southwest Finland				0.59	(0.27-1.31)	
	Ostrobothnia				1.18	(0.64-2.20)	

*** $p < 0.001$, ** $p < 0.01$, * $p < 0.05$

Table 3c
Lower satisfaction with health care services (n=1498)

		Model 1			Model 2		
		OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>
<i>Language group</i>	Finnish	1.00			1.00		
	Swedish	3.39	(2.65-4.32)	***	3.43	(0.67-4.42)	***
	Finnish - bilingual	0.48	(0.31-0.75)	**	0.48	(0.31-0.76)	**
	Swedish - bilingual	5.13	(3.69-7.14)	***	5.27	(3.76-7.37)	***
<i>Gender</i>	Female				1.00		
	Male				1.05	(0.84-1.31)	
<i>Age group</i>	60-69				1.00		
	70-84				0.79	(0.63-0.99)	*
<i>Education level</i>	Lower secondary				0.75	(0.62-0.98)	*
	Upper secondary				1.00		
<i>Region</i>	Uusimaa				1.00		
	Southwest Finland				0.71	(0.46-1.09)	
	Ostrobothnia				1.17	(0.85-1.61)	

*** $p < 0.001$, ** $p < 0.01$, * $p < 0.05$

Sociocultural exclusion

Table 3d
Poor knowledge of one's language rights (n=1916)

		Model 1			Model 2		
		OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>
<i>Language group</i>	Finnish	1.00			1.00		
	Swedish	0.95	(0.75-1.21)		0.99	(0.77-1.27)	
	Finnish - bilingual	0.55	(0.37-0.84)	**	0.56	(0.37-0.86)	**
	Swedish - bilingual	1.84	(1.39-2.43)	***	1.86	(1.40-2.48)	***
<i>Gender</i>	Female				1.00		
	Male				1.27	(1.03-1.56)	*
<i>Age group</i>	60-69				1.00		
	70-84				1.02	(0.82-1.26)	
<i>Education level</i>	Lower secondary				1.81	(1.46-2.26)	***
	Upper secondary				1.00		
<i>Region</i>	Uusimaa				1.00		
	Southwest Finland				0.97	(0.64-1.47)	
	Ostrobothnia				1.15	(0.85-1.55)	

*** $p < 0.001$, ** $p < 0.01$, * $p < 0.05$

Table 3e
Language rights are not considered as important (n=1928)

		Model 1			Model 2		
		OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>
<i>Language group</i>	Finnish	1.00			1.00		
	Swedish	0.83	(0.62-1.13)		0.86	(0.59-1.26)	
	Finnish - bilingual	1.36	(0.90-2.06)		1.43	(0.94-2.18)	
	Swedish - bilingual	4.25	(3.13-5.77)	***	4.00	(2.73-5.87)	***
<i>Gender</i>	Female				1.00		
	Male				1.72	(1.36-2.18)	***
<i>Age group</i>	60-69				1.00		
	70-84				1.10	(0.87-1.40)	
<i>Education level</i>	Lower secondary				1.11	(0.78-1.43)	
	Upper secondary				1.00		
<i>Region</i>	Uusimaa				1.00		
	Southwest Finland				1.21	(0.78-1.88)	
	Ostrobothnia				0.91	(0.64-1.29)	

*** $p < 0.001$, ** $p < 0.01$, * $p < 0.05$

Table 3f
Been harassed and/or discriminated against due to one's language (n=1930)

		Model 1			Model 2		
		OR	95% CI	<i>p</i>	OR	95% CI	<i>p</i>
<i>Language group</i>	Finnish	1.00			1.00		
	Swedish	3.06	(2.38-3.93)	***	3.06	(2.35-3.93)	***
	Finnish - bilingual	1.17	(0.78-1.76)		1.18	(0.79-1.78)	
	Swedish - bilingual	2.42	(1.70-3.28)	***	2.38	(1.74-3.21)	***
<i>Gender</i>	Female				1.00		
	Male				1.13	(0.93-1.39)	
<i>Age group</i>	60-69				1.00		
	70-84				0.79	(0.64-0.97)	*
<i>Education level</i>	Lower secondary				0.85	(0.67-1.07)	
	Upper secondary				1.00		
<i>Region</i>	Uusimaa				1.00		
	Southwest Finland				0.91	(0.61-1.36)	
	Ostrobothnia				0.79	(0.59-1.07)	

*** $p < 0.001$, ** $p < 0.01$, * $p < 0.05$

Tables 3a–f show the results from the multivariate logistic regression models of the six selected social exclusion indicators among older people living in bilingual municipalities. The results for the service exclusion variables show that unilingual and bilingual Swedish speakers were less satisfied with the service as compared to the reference category of Finnish speakers, whereas bilingual Finnish speakers were to a greater extent more satisfied than unilingual Finnish speakers. The association between unilingual Swedish speakers and satisfaction with the social service item weakened in Model 2 and was no longer statistically significant. Further, the service indicator estimates showed that more Swedish speakers and bilingual Swedish and Finnish speakers do not try to get service in their own language. The odds were particularly high for the bilingual groups.

Regarding the variable “poor knowledge of one's language rights”, the results showed that the odds were higher among bilingual Swedish speakers and lower among bilingual Finnish speakers as compared to the reference category of Finnish speakers. Also, the odds for bilingual Swedish speakers were higher for the indicator measuring the lack of knowledge of language rights. Lastly, the odds of experiencing language-based harassment and/or discrimination were higher for unilingual and bilingual Swedish speakers.

Discussion

Social exclusion was broadly defined in this study and referred to the inability of various linguistic groups to fully participate in society. We analyzed two social exclusion domains: service exclusion and sociocultural exclusion among Swedish and Finnish speakers living as linguistic minorities in bilingual municipalities in Finland. By dividing Swedish and Finnish speakers into unilingual and bilingual groups, a comprehensive discourse on the social exclusion of older people was analyzed. The results showed that a relatively large group of Swedish and Finnish speakers was classified as bilingual in our study – a categorization that has been ignored in previous social and health research conducted among older people in Finland. The main finding from this study is that the unilingual and bilingual Swedish speakers experienced greater social and health care service exclusion compared to Finnish speakers. The Finnish and Swedish bilinguals were, on the other hand, less likely to use their first language in service encounters. A more complex picture was seen for the sociocultural exclusion domain, where bilingual Swedish speakers reported a lack of knowledge of language rights and didn't consider language rights as important. However, the unilingual and bilingual Swedish speaking respondents were more likely to experience language-based harassment or discrimination. In the next section, we address possible explanations for these findings.

In our analyses, Finnish speakers, even those living as a regional minority, generally attempted to receive service in Finnish to a greater extent than the other linguistic groups included in our study. Unilingual and bilingual Finnish speakers were also more satisfied with social and health care services from a linguistic perspective. This suggests that being part of the majority linguistic group on a national level (even if belonging to a regional linguistic minority at the municipal level) is likely to make one less vulnerable when it comes to service exclusion. Linguistic rights seem therefore to be achieved in the most egalitarian way in bilingual municipalities where Swedish is the majority language. It is worth noting that more bilingual Finnish and Swedish speakers did not try to receive service in their own language. This is likely related to language status and the possibility of interacting in both languages. How the status and competence experience of older people contributes to preventing social exclusion is therefore an interesting issue that warrants further investigation.

Nonetheless, language is not only about language proficiency; it is also about identity and culture and the sense of being treated as a full and equal member of society (McRae, 1999). As with other Nordic countries, Finland is characterized by relatively high socioeconomic equality, a large public sector and a large public care sector for older adults (Kuisma & Nygård, 2015). The universal provision of social and health care services to all citizens is one of the fundamental features of the Nordic welfare model. When it comes to linguistic rights, it can be argued that the rights and policies of Finnish and Swedish speakers living

in bilingual municipalities are stabilized and maintained (*Language Act*, 2003; Tallroth, 2012). However, as observed in this study, in practice, rights and policies are not always protected and implemented. For example, the analyses showed that unilingual and bilingual Swedish speakers were more likely to experience language-based discrimination and harassment as compared to Finnish speakers.

Also, sociocultural exclusion encompasses ageism and symbolic exclusion (Walsh *et al.*, 2017). An example of symbolic exclusion includes public statements where older people are portrayed as an economic burden, or without value for the society. These facets of exclusion were not included in our data set. We considered knowledge of language rights, as well as the importance of language rights as proxy measures of sociocultural exclusion. Awareness of language rights could be seen as compliance with core norms and values around being an active and equal member of Finnish society. Interestingly, diverging patterns for the bilingual Finnish and bilingual Swedish speaking groups were seen for the indicator assessing knowledge about language rights. Whereas bilingual Swedish speakers were more likely to be excluded in this area, more bilingual Finnish speakers reported being informed about language rights.

Based on our results, we argue that the Finnish bilingual and Swedish bilingual groups may serve as important intermediaries between older adults and service providers, since their bilingualism may contribute to the perceived importance of language by service providers in a bilingual community. As long as the cognitive capacity of bilingual older adults functions well and both languages are maintained without attrition in either language, they benefit from their bilingualism, which allows them to interact effectively in both languages within their community. These individuals are less concerned about language rights, since they are able to communicate in both languages. Our quantitative data is not detailed enough to highlight how bilingualism is manifested in service situations, but it is likely that the bilingual speaker is flexible in communicatively-challenging situations. We can assume that there are a variety of multifaceted, flexible bilingual practices being employed by bilingual older adults in language service situations. In forthcoming studies with greater qualitative data, we will continue to examine how this dynamic bilingualism (see Garcia, 2014) manifests itself at an individual level.

In relation to the unilingual groups of the study, the bilingual behaviour of the Finnish bilingual and the Swedish bilingual group may be biased. On the one hand, a growing group of bilingual Finnish-Swedish older adults who seamlessly switch between both languages may signal to interlocutors in service situations that there is no real need for them to use another national language. On the other hand, our data indicates that the bilingual groups of our study view language services more critically. They seem to be more informed and more aware of language service as a whole, since they have access to services provided in

both languages. In this position, bilingual older adults can truly serve as intermediaries for unilingual older adults, by informing and raising critical views related to service expectations that should be met regardless of language.

Limitations

There are several limitations to this study. As discussed in the introduction, every Finnish citizen must list only one language as her or his native tongue. This dichotomy initially guided our stratification of language in the analyses. However, previous reports show an increasing number of ethnolinguistically mixed marriages and increasing numbers of people fluently speaking and reading the other language (Herberts, 2008). Consequently, we tried in this study to distinguish between unilingual and bilingual older people by using proxy measures of language used in childhood or at home (Skutnabb-Kangas, 1984; Skutnabb-Kangas & McCarty 2008). Ideally, people would have identified themselves in the survey as bilingual or unilingual to be used in our analyses. Also, we studied Finnish and Swedish speakers, thereby excluding other linguistic groups such as the indigenous Sami. Although the Sami hold official legal status in the northernmost municipalities of Finland, the Sami are a relatively small group of people and encompasses only about 9,000 individuals (Anaya, 2011). Furthermore, there is no agreement on how to operationalize social exclusion (Walsh, 2017); so, for the purposes of this study, we decided to assess two domains: service and sociocultural exclusion including domain specific indices. With the available data, our operationalization of sociocultural exclusion lacked information about ageism and symbolic exclusion. Nonetheless, given these limitations, our study has produced some novel findings regarding old-age social exclusion from a linguistic perspective and offers several potential areas for future research on how language serves to promote social inclusion or enforces social exclusion in older age.

Conclusion

The results imply that the *Language Act* has been implemented to various degrees in bilingual municipalities in Finland. Living in a regional language minority situation poses more challenges for the Swedish minority, including the bilingual Swedish-speaking minority, than it does for the Finnish-speaking minority. Our results revealed the importance of distinguishing between various language groups to gain a more comprehensive picture of old-age exclusion. Our study has highlighted the specific needs for unilingual and bilingual minorities that should be taken into consideration in national language policy implementation strategies, particularly in light of the fact that old-age exclusion is a considerable challenge for our ageing societies.

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Mots-clés

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Asiasanat

ikäntyneet aikuiset, kielellinen vähemmistö, kaksikielinen, sosiaalinen ulkopuolisuus, Suomi

Correspondance

fredrica.nyqvist@abo.fi

marina.lindell@abo.fi

siv.bjorklund@abo.fi

mikael.nygard@abo.fi