



Lost in translation



Laura Serrani perceives multilingualism as the 'Cinderella of diversity' and says it hasn't received the attention it deserves

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Multilingualism is the global norm. According to UNESCO, between half and two-thirds of the global population speaks more than one language.¹ In England, the number of children and young people (CYP) with English as an additional language (EAL) more than tripled between 1997 and 2024, reaching 44.3% in London in 2023.² Most therapists will therefore encounter multilingual CYP, or be multilingual themselves. I identify as multilingual. I grew up in Italy, was raised and educated in Italian, which is the 'language of my heart',³ and learnt French and English at school. French was the language through which I expressed my adolescent self, while English is the language through which I became an adult after moving to London in my 30s.

Multilingualism is defined as the ability to use multiple languages with varying degrees of competence in different contexts.⁴ It is a phenomenon that has been part of human existence for centuries, as demonstrated by the Rosetta

Stone (196 BC), and has been shaped by factors such as migration, trade, colonisation, war and religion. Globalisation has further amplified its role in everyday life and identity, challenging our ideas of communities as separate individuals. 'Third culture' kids who grew up across cultural and language differences, 'will soon become the norm even for those who never physically leave their home country'.⁵ CYP are shaped by global, diverse and

multilingual dynamics that influence their identity and sense of self, mostly unconsciously. Despite multilingualism being a defining feature of contemporary societies, it has received less attention in conversations on equality, diversity and inclusion (EDI) than race, gender and sexuality, which is why I think of it as the 'Cinderella of diversity'. This article encourages self-reflection on multilingual competence, highlighting its clinical significance, and opening dialogue relevant to therapeutic work with CYP.

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We do not have enough knowledge about how multilingualism affects the therapeutic relationship with CYP, and I wonder what is driving clinical decisions when there is a multilingual component if there is little knowledge to inform those decisions.

I have noticed that multilingualism is often perceived as a challenge to overcome when promoting inclusion and access to mental health services, which often rely on translation to communicate effectively with diverse communities. Barkin's study, on the limits of translation in multilingual AI, helped me reflect.⁶ The author argues that large language models such as ChatGPT appear linguistically fluent while still embedding assumptions about personhood, agency, responsibility and wellbeing. Technology companies have developed automatic translation features, such as Apple's 'live translation' feature on AirPods which allows real-time, in-ear translation of conversations in some foreign languages. Anecdotaly, I have heard about Google Translate and ChatGPT increasingly used in therapy. It is important that we remain aware of the risks associated with the use of AI translation and critically examine whether its use empowers or disempowers CYP. I do not believe that technology, without an understanding of cultural context, promotes inclusivity. We need to reflect on whether it functions as a neutral tool for language conversion, or a means of engaging with the complexity and diversity that exist in the space between languages.

Interpreter-mediated therapy can improve access to mental health support, although it is costly. The use of untrained interpreters, including family members or school staff, can undermine the confidentiality needed for effective therapy and limit the client's ability to speak openly.⁷ Training to work with interpreters is necessary, and free resources are available from the Pásalo Project, a UK-based organisation that develops multilingual approaches to psychotherapy and social care through training and research (www.pasaloproject.org). Although the use of translation may overcome some language barriers and aims to promote inclusion, translation alone is like trying to catch a rainbow. Over 7,000 languages are spoken worldwide and the world's 20 largest languages are spoken natively by more than 3.7 billion people, meaning that just 0.3% of the world's languages account for nearly half of the global population.⁸ Therefore, many are likely to remain excluded from translation. When we treat language diversity

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self-reflect, process my feelings and self-advocate. I dream and sometimes write poems in English and my creativity has reached its fullest expression in English. English for me is not just a skill; it is an important part of my identity. Nevertheless, it has affected my Italian identity and sense of self, to the point where I started longing for my heritage language. This personal example

primarily as a problem to be solved through translation, some are prioritised and others are left out. Languages are not just tools for communication; they carry symbolic meaning. As therapists, we need to own the clinical responsibility for helping CYP explore these meanings within the therapeutic process. If we delegate our clinical responsibility to interpreters and translation engines, we deny that responsibility.

Multilingualism as a resource

Multilingualism advocacy frames it as an asset rather than a barrier, supported by institutions like UNESCO and research-led networks such as Bilingualism Matters (www.bilingualism-matters.org), and organisations like Bilingual Families (www.bilingualfamily.org). I wondered how to embrace multilingualism as an asset in therapy and researched this topic during my training, drawing from a personal question: Will I ever be able to be a good therapist in English?⁹ The answer became less important than the journey of exploring the question.

My self-esteem speaks accented English. It is the language I speak 90% of my time to work, socialise,

shows how multilingual competence could be used to explore rich aspects of the self, embedded in the language CYP speak. Exploring questions about how different aspects of language relate to one another, and how language is used to explore and integrate could be valuable ways to enhance awareness, agency and self-actualisation in our work.

Multilingualism embeds diversity at its core. The Irish-British linguist Maher says 'Languages are signs of belonging' and 'multilingualism is languages crossing the boundaries of nations, continents and cultures.'¹⁰ Language is often hidden inside categories such as nationality, ethnicity or culture, as reflected in the Social GGRRAAACCEEESSS Framework,¹¹ a reflective tool that classifies aspects of identity linked to power and privilege. Each letter corresponds to an aspect of identity: gender, geography, race, religion, age, ability, appearance, class, culture, ethnicity, education, economics, sexuality, sexual orientation, spirituality – but does not explicitly include L for language. A multilingual context may be a site where dynamics of power, control and discrimination are triggered. In classrooms and playgrounds, multilingual CYP might be subjected to bullying and abuse because of

their accents, mispronunciation or because they sound different to English peers. In some families, language can be used as a means of exercising power and control. This might go unseen if we don't acknowledge the importance of language, and if we are not aware of the power dynamics that are enacted in multilingual contexts.

Language diversity is part of human life and multilingualism is how this reality is expressed. Maher says we need many languages, not just one, to truly understand the world and each other.¹⁰ As multilingualism continues to rise, more research and conversations are needed to bring collective and individual unconscious dynamics into awareness. Professional translation can be a valuable tool in therapeutic work, but when conducted through AI it does not necessarily make therapy more inclusive. We need guidelines that regulate how translation and interpreter-mediated therapy are used. Multilingualism can be a valuable resource for understanding ourselves and others more deeply. Bringing it into awareness means working together towards more inclusive societies that don't flatten diversity, but value it and keep the needs and best interests of CYP at the centre of therapeutic interventions. ■

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