

More than Words: Towards a Development-Based Approach to Language Revitalization

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Existing models for language revitalization focus almost exclusively on language learning and use. While recognizing the value of these models, we argue that their effective application is largely limited to situations in which languages have low numbers of speakers. For languages that are rapidly undergoing language shift, but which still maintain large vital communities of speakers, a model for revitalization is currently lacking. We offer the beginnings of such a model here, arguing that in these communities doing language revitalization must primarily mean addressing the causes of language shift, a task that we argue can be undertaken in collaborative efforts with social development organizations. The model contrasts strongly (though complementarily) with existing models in that it focuses on work in which explicitly language-focused activities are undertaken only as intentional support for social development projects. Where successful, we argue this approach achieves language revitalization goals in organic and sustainable ways that are much more difficult for language-focused programs to achieve. It therefore has the potential to stop and potentially reverse language shift in specific ways. We offer our experiences with Wuqu' Kawoq|Maya Health Alliance, a healthcare NGO in Guatemala, which attempts to follow this model, as evidence for the model's viability.

1. INTRODUCTION.¹ Almost exclusively, existing models for language revitalization engage efforts that explicitly focus on language learning and use.² While recognizing the effectiveness of these models in certain situations, we argue that their application is largely

¹ We wish to thank the staff of Wuqu'Kawoq, interns, students, local partners, and advisors whose collaborative work we describe here. We would also like to thank the Linguistics and Cognitive Science department at Pomona College, the Christian Student Center of Gainesville, FL, and the University of Florida Linguistics Department for sponsoring talks where earlier versions of this work were presented.

² Sometimes the term 'language maintenance' rather than 'language revitalization' is used when the communities involved are large and vital. As Grenoble & Whaley (2006:13) point out, however, the conceptual distinction really has to do with whether one is seeking to reverse language shift and extend domains of use (revitalization) or maintain current levels and domains of use (maintenance). We are explicitly concerned with the former here, though as these authors continue, "in practical terms the distinction is often unimportant." Hinton (2001:5) takes a similarly broad approach using the term 'revitalization' for any efforts to turn around decline, even in situations when "almost all families are still using a language at home." We adopt this broad use of the term throughout this paper.

limited to linguistic situations in which languages are strongly endangered. There are many languages, however, which are rapidly undergoing language shift, but which still maintain large vital communities of speakers. In these communities, we contend, doing language revitalization must primarily mean addressing the causes of language shift. Unfortunately, a model for addressing these causes is currently lacking.

This paper outlines such a model. The model contrasts strongly (though complementarily) with existing models in that it focuses on collaborative work in which explicitly language-focused activities are undertaken only as intentional support for institutional social development projects. We argue that this approach, where successful, achieves language revitalization goals in organic and sustainable ways that are much more difficult for language-focused programs to achieve. It also directly addresses the causes for language shift, something language-based programs do not explicitly do. It therefore has the potential to stop and potentially reverse language shift in specific ways.

As the model is outlined, we illustrate the success of the model using experiences from our collaborative work involving Wuqu' Kawoq: Maya Health Alliance, a non-government organization (NGO) active in Kaqchikel-speaking communities in rural Guatemala that is concerned with healthcare development. This is not incidental, as a second goal of this paper is to convince the reader that in order to achieve the sorts of sustainable language revitalization goals described here, it is necessary for linguists to collaborate with social development organizations in innovative ways.³

Certain aspects of what we have to say will be particular to our experience with the Guatemalan Maya context; however, we attempt to extract general principles from our specific experiences that we believe may apply more broadly, especially in contexts in which there are relatively large vital communities of speakers which are nonetheless highly marginalized in their greater social and linguistic context and undergoing language shift. Hundreds of such communities exist worldwide. With that in mind, it should be clear that we are using the term 'language revitalization' here not in the narrow sense of re-establishing a language that no longer functions as an active language of communication, but in the broader sense of turning around the decline of language use in particular communities.

2. LANGUAGE REVITALIZATION AS LANGUAGE DEVELOPMENT. As Obiero (2010) points out, there is currently no consensus methodological approach to language revitalization, and no consensus for how to evaluate such efforts. Thus, approaches vary widely according to the specifics of community needs and resources available. In general, however, we think it is fair to say that the models which do exist take a *development approach to language* (Henderson & Rohloff to appear). Such approaches see language as an aspect of human experience that can be quasi-isolated, focused on, and developed as a social good apart from other aspects of social society. Activities and outcomes of these approaches thus (naturally) focus on linguistics and language-related issues such as orthography development, literacy, and the development of language education programs, or as Reynher

³ By 'development organizations' we mean especially non-government organizations (NGOs) and charities that work to improve under-developed social institutions such as healthcare, education, agriculture, and others. We refer to this work generally as 'development' or 'social development' throughout the paper.

et al. (1999:v) put it “the importance of motivating language learners and using teaching methods and materials.”

A perusal of some of the most-cited works on language revitalization confirms our conclusion. For example, Grenoble & Whaley 2006 focus solely on orthography, literacy, and creating language programs. Hinton & Hale 2001 includes chapters on case studies involving language policy, planning, teaching, literacy, teacher training, and media and technology. The case studies in Fishman 2001 and Bradley & Bradley 2000 are similarly focused on language development issues. We do not point this out to be critical of this general approach for revitalization. Indeed, in many of these cases there is no doubt that language-focused activities are likely the only way the speaker population might be increased enough to make communication in the threatened language viable. We simply want to note here the almost exclusive focus on language-focused activities and the absence of a model meant to address the causes of language shift and loss (more on this below).

This general approach of language development is reflected explicitly in the widely-cited ‘stage model’ of Fishman (1991), modified somewhat in Hinton (2001) to apply to a larger set of languages. We list Hinton’s model below in a somewhat abbreviated form. It should be emphasized that this model (and others like it) are not meant as a precise road map to be followed, but simply as a means of thinking through the steps of language revitalization systematically and identifying what a community may or may not require in order to achieve some level of revitalization. It is also not meant to be comprehensive or minimal, such that “for many small communities, a realistic goal might be no more than to reach step 3 or 4” (Hinton 2001:6).

(1) **Hinton’s Nine Stage Model**

Step 1: Language assessment and planning. Assess speaker-community factors and devise realistic goals for revitalization.

Step 2: If the language has no speakers, use available materials to reconstruct it and develop language pedagogy.

Step 3: If the language has only elderly speakers; document their language

Step 4: Develop a second-language learning program for adults. These will be important leaders in later steps.

Step 5: Redevelop or enhance cultural practices that support and encourage use of the endangered language at home and in public by first and second-language speakers.

Step 6: Develop intensive second-language programs for children, preferably with a component in the schools. When possible, use the Endangered Language as the language of instruction.

Step 7: Use the language at home as the primary language of communication, so that it becomes the first language of young children. Develop classes and support groups for parents to assist them in the transition.

Step 8: Expand the use of indigenous language into broader local domains, including community government, media, local commerce, and so on.

Step 9: Where possible, expand the language domains outside of the local community and into the broader population to promote the language as one of wider communication, regional or national government, and so on.

Hinton's stages, like Fishman's, can be broken down into two broad categories. One is the development of the language itself so that it is viable for social use and teaching (steps 2–4). Such efforts might include documentation and description of the language, as well as the creation of pedagogical materials and the initiation of language programs or classes for learners to attend. The second category of the steps in (1) involves expanding the domain of language use (steps 5–9). These include much more complicated and, one presumes, longer-term efforts such as 'enhancing cultural practices' to encourage use of the language, getting the language used in the official education system, developing support groups for use of the language at home and encouraging its use in media, commerce, government, etc.

As Obiero (2010) points out, (self-)evaluations of the success of language revitalization and support programs are often under-developed or even non-existent, making it difficult to know what methods have higher success rates. We hypothesize, however, that while many language revitalization programs succeed in language development efforts (Steps 2–4 on Hinton's scale), very few succeed in actually expanding the domains of language use (Steps 5–9) in ways that represent significant shifts in social structures. We suggest this is because the steps/stage models present a false sense of continuity between language program efforts meant to increase the number of speakers of a language and domain expansion efforts meant to increase the viability of the language for a broad range of social uses. Take, for example, Step 6, which mandates the program to 'expand the use of the indigenous language into broader local domains, including community governance, media, local commerce, and so on.' This sounds wonderful, of course, but how exactly does a community go about achieving such goals? If commerce is conducted in a regional lingua franca, for instance, or in the official national language, how does one get local merchants to switch to using the indigenous language? One might succeed in some limited fashion in convincing speakers that using their native language is better for the good of the community or to preserve the language, but such efforts focused on principled 'language attitudes' does not reflect the pragmatic values that often underlie language choice. Conducting business in the native language might be good for the language, but it is almost certainly bad for business.

One area where domain expansion is often achieved by language-focused efforts is in the domain of bilingual education or even primary education in indigenous languages. These achievements are significant, because they often increase the symbolic capital of indigenous languages, as, for example, they clearly have for Mayan languages in Guatemala in the last 15 years (Maxwell 2009, 2011). In some cases they may also greatly expand knowledge and use of the language, for example through the creation of neologisms designed for use in classroom settings (Tummons et al. 2011). There are also, however, reasons to doubt the effectiveness of bilingual education as a primary tool for 'saving languages' (Hornberger 2008), chiefly because its goals are often undermined by poor teacher training or inefficient pedagogy (Marshall 2009, Greebon 2011), or by difficulties in transitioning beyond the 'pilot' or experimental phase.

We suggest that underlying all of the difficulties with achieving domain expansion for indigenous language use is the problem that:

Causes for language endangerment are largely political, social, and/or economic...have to do with ... social upheaval that were caused by inequalities

between the users of languages ... that is, the causes are in the main neither sociolinguistic nor linguistic.” (Tsunoda 2005:57).

Given Tsunoda’s assessment, which we think few would argue with, we contend that the nonlinguistic causes of language endangerment cannot be chiefly addressed with linguistic solutions like the ones in the Steps model above. We suggest, in fact, that language revitalization efforts can do very little to address language decline if such efforts focus solely on language development. Though language development (with the standard outcomes of language training programs and pedagogical materials) is certainly a necessary activity of long-term language maintenance, it cannot be the primary activity and be expected to result in language sustainability. This is partially because such efforts depend upon large-scale community buy-in to the idea that the language is valuable for its own sake, as well as a long-term stream of (often outside) resources to sustain language development efforts. But even more fundamentally, we contend that such efforts are insufficient to address language maintenance and revitalization because they *fail to address any of the causes of language endangerment*. Though details vary widely from place to place, these causes are well known, namely the political, economic, and social marginalization of (even large) minority groups within some political context. The forces that give rise to such marginalization are what also give rise to the pressures for language shift wherein speakers find social, economic or political value in using languages other than their native language in an increasingly greater number of social domains (domain expansion). Often, this process results in the native language being used in fewer and fewer domains, until it is only used in the home, and even there perhaps in limited ways (domain contraction).

At this point the linguist must ask: if language shift and decline are caused primarily by non-linguistic social, economic and political factors, how can these causes be addressed as a concern for language survival? If we are right that language development and teaching programs are not a solution for the question of language sustainability, then what is? What, in other words, is the linguist to do? Below we suggest an answer: linguists must get directly involved in more general social development efforts, ensuring that development organizations undertake their mandates in linguistically-responsible ways and offering language development in service to broader social development goals. We offer more specific suggestions in our model, presented in §5. First, however, some general background on the culture of development organizations is required.

3. DEVELOPMENT ORGANIZATIONS AND LANGUAGE. Before detailing our model for language revitalization, we wish to make the case that now more than ever before it is vital for linguists to engage with development organizations. The reason is that, over the past few decades, the move toward market-based neo-liberal policies of shifting public development funds into private hands has led to an explosion of such organizations worldwide. For example, in Guatemala, although precise counts are not available, the number of non-governmental organizations now likely exceeds 10,000, a ten-fold increase in the last decade (Rohloff et al. 2011). Similar trends are observable around the world. For example, the number of United Nations-accredited NGOs (which represent an extremely small sub-

section of the sector overall) has increased more than 80-fold in the last 60 years (United Nations 2013).

The end result of this is that, at the local level, development organizations are now major players in shaping social structures in Guatemala and elsewhere, in some cases far more influential than official government policy. Crucially (and unfortunately), it is highly uncommon for such organizations to see local languages as essential tools for the success of their projects. Rather, language is typically seen as a minor implementation issue, a mere communication problem, easily overcome with bilingual translators. Development workers themselves rarely learn a local language and issues of language and culture are almost never considered in the initial planning stages of development projects. Because these organizations often offer highly desirable key social services, their presence in local communities potentially serves to reinforce existing pressures for language shift. Indeed, in the case of Guatemala such organizations are likely accelerating language shift since they may negate the official support for local languages offered by the government. The latter may be in many instances symbolic, but symbolic support can be important. Most development organizations lack even symbolic recognition of the importance of linguistic vitality. Given all of this, it may very well be the case that the community of development organizations is one of the greatest threats to indigenous language vitality in Guatemala and elsewhere. It is therefore vital for linguists to engage these organizations in meaningful and productive ways.

The relationship between language revitalization and development work should now be obvious: the causes of language shift and endangerment are exactly the social, economic, and political inequities that development organizations are seeking to address. It is therefore crucial for vitality of the languages of the communities that they are working in that development workers address these issues in linguistically and culturally responsible ways. Otherwise, their work is likely to contribute to language endangerment. Given the high value most people put on their native language and the pride they have in their indigenous culture, these organizations find themselves in the ironic position of working to save people's lives while at the same time actively destroying much of what people find to be worth living for. In the model we outline below, however, we suggest ways that linguists and language activists might engage and collaborate with the development community to reverse this trend.

4. THE SIX QUESTION MODEL. We outline here our model in terms of a progressive set of questions meant to lead to greater engagement with the social causes of language shift and ways of addressing them. For each step given, we will share experiences to illustrate. These are based upon the authors' experiences collaborating together (and with many others) for more than six years to bring better healthcare to rural Maya communities in Guatemala in linguistically and culturally responsible ways through the NGO Wuqu'Kawoq! Maya Health Alliance.⁴

⁴ A reviewer asks for details regarding Wuqu'Kawoq's (WK) organizational structure. At the core of the organization are partnerships between WK and local, self-organized groups in each community that we work in. WK staff work with these grassroots organizations, which include midwives or other trained health promoters, to determine what projects are needed and practical to initiate for the community. WK staff include Guatemalan social workers, nurses, coordinators, and others, (most of

Question 1: How healthy is the local language ecology?

The vast majority of languages are spoken not in isolation, but by multilingual speakers in complex social and political settings. We may refer to the way languages are used in such settings as their language ecologies. Given the dominance of such settings, it is misleading to speak, as so much of the literature does, of language endangerment and revitalization as concepts that apply primarily to individual languages. Doing so has led to widespread misunderstandings, including the development of misguided diagnostic tools for defining what is and what is not an endangered language (see, for example, Vigouroux & Mufwene 2008 and Lüpke to appear for critiques of the standard UNESCO criteria for diagnosing language vitality).

We find it much more helpful to talk about the health of language ecologies rather than the health of individual languages (see Mühlhäusler 1992). Doing so has at least two advantages. First, it does not imply that there are always 'loser languages' in any multilingual situation. Multilingual ecologies do not necessarily result in one or more of the languages being 'on the way out' just because its use is restricted to particular domains. Second, it frees us from obsessing over the number of speakers of a language when we talk about endangered languages. While speaker counts can be very important, especially when dealing with nearly extinct languages, many have pointed out that while low numbers of speakers might strongly imply a language's vulnerability, they do not necessarily imply anything about whether or not the language is headed toward lower or higher vitality. The same is true for languages with high numbers of speakers, which may be much more vulnerable than their numbers would suggest.

In Guatemala, for example, the majority of the population speaks one of 21 Mayan languages. Kaqchikel, the language most central to our work, is one of the three largest with around half a million speakers (Richards 2003). It would not be considered threatened or endangered by any of the most popular diagnostic tools offered in the literature. Yet even a cursory examination of the language ecology that Kaqchikel speakers live in reveals unhealthy signs. For example, younger speakers of Kaqchikel often place much higher values on speaking Spanish than their native language; in larger local towns especially, it is common to find young families in which parents have only passive knowledge of the language and in which their children are no longer acquiring the language. Opportunities for use of the language in educational settings, short of the first few years of primary school, are very limited. Use of the language in professional or business contexts is virtually nonexistent, despite national legislation in theory guaranteeing access to a wide range of social and professional services in Mayan languages on a human rights basis (Maxwell 2011). In short, signs of trans-generational language shift from Kaqchikel to Spanish are apparent. And though the language is not in danger of disappearing any time soon, if the goal of language

whom hail from one of the communities we are active in) as well as directors, interns and coordinators who are US-based. Our US staff members spend significant amounts of time in-country and speak Kaqchikel as well as Spanish. Even interns and students are required to go through intense language training. Finally, WK is governed chiefly by a US-based Board of Directors that works for the financial and organizational sustainability of WK, and works with directors to set future goals and directions. An advisory board and a Guatemalan Board of Directors offer key insights and support. See www.wuqkawoq.org for more information.

revitalization is the long-term sustained use of the language, the situation of Kaqchikel—and languages of similar size—deserves attention.

Question 2: What are the specific causes of ongoing language shift?

As we discussed above, the causes of language shift are seldom linguistic. They involve, rather, social, political, and economic factors. While this is widely recognized, seldom are in-depth evaluations of specific situations conducted. We think this is a necessary step in identifying the most productive ways to address language shift.

It is important to emphasize that addressing this step cannot be done simply through a sociolinguistic evaluation of the domains of language use. Nothing can be said about the health of a language ecology simply by noting whether a particular language is or is not used, say, at the market or in local schools. What is required is an analysis of the effect of language use on the lives of particular communities of speakers. Paul Farmer’s notion of ‘structural violence’ (borrowed from liberation theology) is relevant here (Farmer 2003). The term refers to situations in which social structures or institutions cause harm to people by preventing them from meeting their basic needs. The question for us, then, is to what extent does being a Kaqchikel speaker (whether or not one is bilingual) make one more likely to suffer harm and why? Answering such questions is likely to involve not only a survey of language use domains, but in-depth interviews with community members about their perceptions of why language shift is taking place. It also requires a deep knowledge of the social and historical context of the area.

For example, discussions of the vitality of Kaqchikel require a deep knowledge of Guatemalan society, which is marked by a sustained history of state-sponsored violence against the indigenous population. For example, during the 20th century Guatemalan civil war, which ended in 1996, hundreds of indigenous communities were specifically targeted by the Guatemalan military using genocidal “scorched earth” tactics, and more than 200,000 individuals—more than 80% of whom were indigenous—were killed in the sustained conflict (Oficina de Derechos Humanos del Arzobispado de Guatemala 1998). Since the end of the civil war, the situation for Kaqchikel and other Mayan languages in Guatemala has improved marginally, largely through improved access to bilingual education for children. However, members of Maya communities, especially those who do not speak Spanish, continue to experience overt racist attitudes and treatment from non-Maya Spanish speakers. Furthermore, abandoning Maya language and culture in favor of Spanish often remains a pre-requisite for accessing all that modern society has to offer, such as adequate healthcare, education, salaried jobs, and media that engages broader society.⁵

Take healthcare, for example, the area we have the most experience with. Although Guatemalan policy makes healthcare technically available to its citizens for free, and though access to these services in indigenous languages is a legal right, in practice, medical facilities rarely if ever comply with this legislation, meaning that health care is essentially only available in Spanish. Dismissive and racist attitudes toward rural Maya are also likely to be present in such institutions (Rohloff et al. 2011). Therefore, most Mayan language speakers see these facilities as destinations of last resort, not wanting the experience of a long expensive trip to a facility, only to be seen by a Spanish-speaking provider who does not

⁵ Primary education is offered in indigenous Mayan languages in many places, but see Greebon 2011 for evidence that such efforts are doing little to sustain the use of Mayan languages.

understand them, and then dismissed with instructions that are difficult to understand and a prescription for medications difficult to afford. The results of this dynamic are two-fold: poorer health for rural Maya, who are less likely to seek professional medical assistance for their problems; and a reinforcement of the idea that one must abandon one's Mayan language and culture in order to gain access to healthcare and a chance at a healthier life.

This brief examination of the historical and social context of trying to get adequate healthcare in rural Guatemala, then, has led us to identify a specific cause of language shift: lack of access to healthcare services that are linguistically and culturally appropriate.

Question 3: What are the best ways to address the causes of language shift?

For any particular cause of language shift, a variety of ways might be identified for addressing it, and choices will have to be made regarding what the most promising and pragmatic approaches might be. Again, we want to reiterate a focus on long-term sustainability and emphasize that solutions are unlikely to be focused specifically on language development activities. For example, one possible way of addressing the problem with healthcare access discussed above might be to engage with government policies that guarantee linguistic rights and initiate an interpreter program that seeks to place Maya-Spanish interpreters in all healthcare facilities in order to mediate communication between clinical staff and patients. Such a program might in fact lead to some improvement in healthcare access and outcomes. However, it would not address the widespread cultural racist ideas that Maya are 'backward' and 'ignorant,' which is likely to continue influencing provider-patient interactions. Nor would it really address the Maya perception that government healthcare institutions and the solutions they offer are primarily the properties of Spanish-speaking elites. It would also be vulnerable to government policy and funding whims. In short, even though communication in clinics (and perhaps even some health outcomes) would be better, it is not clear at all that this solution addresses the underlying causes of language shift as it relates to healthcare.

On the other hand, a much more comprehensive response to the problem would involve modifying or creating innovative healthcare institutions in which adequate healthcare can be accessed by rural Maya without the marginalizing experiences described above. By definition, these would have to be institutions in which it is normative for staff and patients alike to speak Kaqchikel and to have an appreciation for and understanding of Maya culture. This has been the approach taken by Wuqu' Kawoq and we share some of the results of this work below in the discussion regarding Question 5.

Question 4: Who has the capacity?

It should be obvious by now that the model we are advocating here is not one that can be followed by a linguist, even a team of linguists, alone. Linguists cannot be expected to understand the complex dynamics of government healthcare policy, health management systems, medical anthropology, and a whole host of other issues that clearly must be addressed in the present model, in addition to doing language development work. The model we are advocating here is necessarily one in which linguists not only collaborate with anthropologists and cultural experts (which is common in language documentation work), but

also with doctors, nurses, midwives, civil engineers, economists, and others traditionally involved in development work.

In our opinion, the typical lack of collaboration between linguists and development actors is a tragedy of missed opportunities. It has led linguists to the conclusion that the only possible approach to language revitalization is language development. Similarly, it has led to the widespread perception in development work that ‘foreign’ languages are minor implementation barriers to be overcome rather than essential tools for the long-term sustainability of their development efforts. Thus, “while language choice is of general concern, it is not linked in rural development thinking with intervention *strategies*, nor are choices in particular multilingual situations explained” (Robinson 1996:30).

Despite this divide, we think many development organizations, local and international, are likely to be open to collaboration with linguists, even on language development projects, if linguists can adequately demonstrate the practical values of doing so for the goals of the organization. In other words, linguists must convince development actors that conducting their work in linguistically and culturally responsible ways is likely to result in more effective and more sustainable outcomes for development work. In fact, many development organizations focus rhetoric on putting development into the hands of the community, effecting change ‘from the inside’ in sustainable ways. What is lacking in many cases, however, is the recognition (or perhaps more often, lack of capability) on behalf of development organizations that using local languages is a necessary part of this model. This, it seems to us, is something linguists can bring to the discussion.

An important object lesson is provided by considering the experience of Maya midwives over the previous two decades, discussed in more detail in Chary et al. (2013). Recognizing that more than 70% of births in Guatemala take place in the home rather than in government healthcare facilities, the government of Guatemala has had a series of initiatives, some dating back to the 1950s, that have sought to reduce maternal mortality rates (MMRs) by providing training to local lay midwives. The training itself has been carried out by a wide range of actors, including the Ministry of Health (MOH) itself as well as numerous NGOs. However, such training activities have failed to reduce MMRs significantly. This has led to recent policy shifts, advocated through the United Nations’ Millennium Development Goals (United Nations 2007), away from lay midwife training. Rather, resources have been steered toward increasing obstetrical services at regional hospitals and policies have shifted toward near-universal referral of patients to these hospitals (Berry 2006, 2010). Similar shifts are taking place in other developing countries.

These policy shifts beg the question, why have midwife training sessions not been more successful? One of the first significant partnerships Wuqu’ Kawoq entered into in Guatemala was with a local self-organized Maya midwife NGO. In order to investigate ways in which our collaboration would be most effective, members of our organization conducted in-depth interviews with midwives and leaders in the organization, all of whom had attended MOH and/or NGO-led training workshops. We also attended MOH-led midwife training workshops (conducted in Spanish) as well as workshops conducted by the NGO (conducted in Kaqchikel). These findings are reported in detail in Chary et al. 2013. The following statements summarize these findings:

- (2)
- a. Nearly all interviewees reported the Kaqchikel-Spanish language barrier as a major detriment to the training sessions they had attended. A leader of the NGO cited this as one of the major motivations for their self-organization.
 - b. Participants in the MOH/Spanish-led workshops rarely spoke up to ask questions or for clarification. Participants in the NGO/Kaqchikel-led workshop (some of whom were the same individuals) freely asked questions and interrupted the instructor to ask for clarification.
 - c. Some midwives who no longer thought it worth it to attend MOH/Spanish-led workshops expressed delight at attending the NGO/Kaqchikel-led workshop.
 - d. Midwives expressed experiencing racism and feelings of inferiority in interactions with the local MOH Health Post and at training sessions. Leaders of the local midwife NGO recounted overt opposition from MOH officials when they first began self-organizing.
 - e. Midwives emphasized training and professional development as keys to success in their chosen vocation.

While the evidence from this study is qualitative and to some extent anecdotal, it suggests that one reason for the ineffectiveness of midwife training programs is that such programs have failed to take local languages (as well as other cultural, social, and historical factors) seriously. The value of input from linguistics (as well as anthropology) should be obvious. Indeed, Wuqu' Kawoq's partnership with the Maya NGO mentioned above has been fruitful and productive. Medical professionals on our team have worked with midwife leaders to determine the greatest training and medical support needs while linguists and anthropologists have worked with the community in determining the best formats for instructional material, publishing training literature in Kaqchikel, and other aspects of community relationships. It is too early yet to know whether this model is lowering MMRs locally in significant ways; we can attest, however, to the eagerness of these midwives to learn and adopt the latest methodologies and their joy at finally having access to it in meaningful ways.

For the linguist concerned with a particular linguistic community, then, we recommend identifying and collaborating with other actors who may also be working in the community on other development outcomes, rather than focusing on establishing a stand-alone language development effort. Such attempts at collaboration might not always be met with welcome arms; however, if specific areas can be identified in which informing practices with insightful linguistic knowledge will be beneficial to the goals of development workers, we suspect many more collaborations of this kind could take place than are presently happening.

Question 5: What should be done?

Once collaboration between linguists and development actors are established, specific projects can be outlined that address the causes of language shift identified in Step 2 of Hinton's model. Again, these will not primarily be language development projects. The linguists' job is to ensure that the institutions targeted by development organizations are developed in a culturally and linguistically responsible manner.

We wish to emphasize that this role is not merely one of providing 'good advice,' but is an active practice of language revitalization. Development organizations are often doing nothing less than building social institutions from the bottom up that did not exist previously. These new institutions thus constitute new social domains for language use. Establishing them in ways informed by sociolinguistic considerations may therefore not only contribute to the success of the project, but also has the potential to achieve some of the most significant goals of language revitalization efforts, namely expanding the social domains in which a declining language is used. As discussed above, very few language revitalization programs achieve this.

In Wuqu' Kawoq's work, for example, we have established several primary care health clinics in Kaqchikel communities. Note that there is nothing particularly special about this on the surface; establishing healthcare clinics in local communities is a very typical thing for a healthcare NGO to do. In these particular cases, however, intentional care was taken to ensure that Kaqchikel was used in the clinics as the default language. From conversations in the waiting room to doctor-patient consultations, Kaqchikel is the language of regular exchange between clinic staff and between staff and patients. It is *normal* to use it. A visitor who enters the clinic and starts with a Spanish greeting (as sometimes happens) is met with a Kaqchikel response, an exchange with a great deal of symbolic meaning. Moreover, years of conducting clinic activities in these ways have resulted in a situation in which the local community *expects* to receive medical care in Kaqchikel (Tummons et al. 2011).

Note that in the establishment of these clinics, not only has a new institutional domain been created in which use of Kaqchikel is normative, but one of the causes of language shift from Kaqchikel to Spanish has been removed. Speakers no longer have to see a shift from Kaqchikel to Spanish as essential in order to access adequate healthcare, nor are healthcare institutions exclusively the properties of Spanish-speaking elites. This impetus for language shift has not just been removed, however, *it has been reversed*. The clinics are institutions in which language revitalization is taking place, as new vocabulary and expressions are organically developed in order to accommodate the new institutional setting (more on this below).⁶

We have focused here on our work establishing healthcare clinics, but other development institutions could be developed in similar ways. One thinks of organizations that work to establish agricultural co-ops, small business institutions, or clean water initiatives. Many of these involve the establishment of long-term institutions that could serve as new domains for local language use.

⁶ We say nothing here of the fact that patients who are instructed in their own language are more likely to follow medical advice better, resulting in better health outcomes.

Question 6: What language development is necessary?

We have detailed above how language revitalization can be achieved by working toward social development goals in linguistically responsible ways. In the process of doing that, however, it will likely be useful and sometimes necessary to undertake projects with specific language development goals. We have mentioned, for instance, creating literature for use in midwife training (and potentially literacy initiatives to go along with them). We wish to emphasize again, however, that such language development work is most productively undertaken if it is a necessary and useful step in more general social development work. Such projects will therefore always be quite practical.

A great illustration of what we mean here comes from projects to form neologisms. Neologism projects are commonly undertaken in language development work in response to the perceived need to keep a particular language ‘modern’ in hopes that it will be better equipped to engage in wider discourses. Unfortunately such undertakings are often carried out in a top-down manner by institutional language bodies or other groups concerned with language development for its own sake. The results of such projects are often word lists for pedagogical uses. This has been the case in Guatemala, for example (e.g., Chacach et al. 1995). The problem with such efforts is that, since there is no practical context for creation of the lexical items, lexical choices are typically made based on what is perceived as being the best for language development. In the case of Kaqchikel, previous neologism efforts often sought to revive dormant terms or roots that had fallen out of use, using colonial Kaqchikel manuscripts as source material.

Rather than developing neologisms for their own sake, Wuqu’ Kawoq’s initiation of a neologisms project grew out of a concrete need for useful medical terminology to use with patients in clinics and house visits.⁷ Typically, borrowed Spanish terminology would be used for such purposes; however, the problem is that for many Kaqchikel speakers such terms are semantically opaque, a foreign language label for what may be a set of complex medical concepts. Using Spanish thus actually becomes a barrier to better healthcare, often convincing a patient that understanding their own condition is beyond them and that they are powerless to combat it.⁸ The project was carried out in partnerships with Kaqchikel Cholchi’, the Kaqchikel arm of the Guatemalan Academy of Mayan Languages.⁹ The first set of neologisms grew directly out of interactions in patient care from the practice of

⁷ In the broader context of maintaining relevance for marginal languages, Amery (2006) advocates developing medical terminology for Australian aboriginal languages for the same reasons (better health for speakers), and discusses the development of neologisms in a similar spirit to the one we describe here. As Amery (2006:176) puts it, “The way forward to ensure the continued survival of indigenous languages is for in-depth collaboration between native speakers, vocational specialists and linguists to work out ways of talking in terms that are meaningful to speakers of the language in the non-traditional domains that have become such an important part of peoples’ lives.”

⁸ Trudgen (2000) reports on similar situations in Australia. As Amery (2006:170) recapitulates, Trudgen discusses the case of an educated, intelligent Yolŋu man who spoke English and could repeat the details of his diabetes and kidney disease condition, but for 13 years failed to adequately understand it. It was only after his condition was explained to him in his own language that he was able to understand why he should change his lifestyle (and did so).

⁹ The final product of the project has recently been published by the Academy of Mayan Languages, Kaqchikel Cholchi and Wuqu’ Kawoq as *Kaqchikel Choltz’ij: Kolon Chuqa’ K’ak’a’ Taq Tz’ij*. The volume is available from Kaqchikel Cholchi headquarters in Chimaltenango.

explaining health concepts and conditions solely in Kaqchikel. This set of core terms was then brought to Kaqchikel Cholchi as a model with the linguists there helping to fill in gaps in the field set and making suggestions when the semantic nuances seemed to be somewhat off. Any corrections would then be taken back to the field to test out in real consultations. Terms were developed in a manner such that they would be (i) immediately intelligible to native Kaqchikel speakers of all ages and (ii) could easily replace Spanish loan words. The medical staff could subjectively ascertain the effectiveness of the new terms as they assessed patient responses during consultations. Staff were trained on the neologisms and encouraged to use them in health education classes with the public where they would have a useful and immediate context that would not require explicit language instruction.

New terms that were seen as being particularly effective could then be used as a model by staff and Kaqchikel linguists for expanding the set in a more top-down manner. This was the case with cancer-related terminology. Though Wuqu' Kawoq did not have a cancer program at the time, medical staff felt it was important to have a word list for cancer-related topics. Given a list of English and Spanish terms, Kaqchikel Cholchi worked up a list of neologisms that was then submitted to our medical director (Rohloff) a doctor who speaks English, Spanish, and Kaqchikel. The director then vetoed or modified the terms based on his knowledge of medicine and experience using Kaqchikel in a clinical setting. The final list sat dormant and undistributed until the need for them arose just this year, when Wuqu' Kawoq initiated a cancer program. The list is now being employed as a core set of terms that can be modified and added to as further clinical needs arise.

As for the neologisms development process itself, the most common approaches were to create novel compounds or provide other common words with a natural semantic extension. We provide a few of these below for illustration:¹⁰

- | | | |
|-----|---|--|
| (3) | a. ru-tz'et-b'äl k'ux-aj
E3S-see-INST heart-UNPOSS
'myocardiograph' | b. kam-isa-b'äl oköx
kill-CAUS-INST fungus
'fungicide' |
| | c. r-eles-ik te-pam-aj
E3S-remove-NMLZ mother-stomach-UNPOSS
'hysterectomy' | d. tz'aq-pipospo'y
closed-lungs
'asthma' |
| | e. ru-qul te-pam-aj
E3S-throat mother-stomach-UNPOSS
'cervix' | f. q'at-b'ey kik'
break-way blood
'ebolism' |

Importantly, because these neologisms are semantically transparent and serve a direct practical purpose they have an immediate functionality that makes new conversations about crucial healthcare issues possible. One we have had particular success with is the term *kab'kik'el* 'sweet blood,' which we adopted to replace the semantically opaque Spanish term *diabetes*. The new term says something right away about the cause of the disease itself that is immediately intelligible to any Kaqchikel speaker. Moreover, the term im-

¹⁰ List of Abbreviations: E = ergative; 3 = third person; S = singular; INST = instrumental; UNPOSS = unpossessed; CAUS = causative; PAS = passive

mediately positions the discourse between patient and healthcare provider for a discussion about how to make the blood less sweet through diet and other interventions. Terms like this are thus being directly imported from our clinics into homes as patients use them to explain to friends and family members the details of their diagnoses and treatments. Thus, language development is being undertaken, by linguists, but in the context of a clear need that imbues the results of the project with a high degree of pragmatic social value. The success of a project like this one depends very little upon language attitudes, activism and valuing language for its own sake.

5. CONCLUSIONS. In this paper we have attempted to articulate a new model for language revitalization that is based upon collaboration between linguists and development workers (in addition to anthropologists, local organizations, and other actors). The approach sees typical development activities as effective vehicles for expanding the domains of language use as well as motivating classic language development activities such as publishing, literacy, and pedagogy. The success of the approach, however, depends upon two cultural changes that may be difficult to realize. The first is that linguists, in some cases, must give up direct control of language revitalization activities such that, in general, non-linguistic activities (e.g., better healthcare, better roads, etc.) are primary. As we have pointed out, it is these activities that actually target the causes of language shift and will be most effective at combating language loss, if they are carried out in linguistically and culturally responsible ways. Second, development agents must stop seeing local languages as a barrier to their work and instead see them as an essential ingredient in the long-term success of their work. This involves, among other things, convincing development organizations that the up-front costs in time and money required for learning local languages and carrying out language development activities as their work requires are investments that will pay off in the long-term success and sustainability of their work. Both of these changes, we think, will likely only take place when more fruitful partnerships like the ones we have discussed here have taken place and their successes have become well-known.

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