

JOSH GREEN, M.D.  
GOVERNOR OF HAWAII  
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
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KENNETH S. FINK, M.D., M.G.A., M.P.H.  
DIRECTOR OF HEALTH  
KA LUNA HO'OKOLE

**Testimony in SUPPORT of HCR71  
REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A  
STAKEHOLDER WORKING GROUP TO MAKE RECOMMENDATIONS TO  
ENHANCE MEANINGFUL ACCESS TO HEALTH CARE IN THE STATE  
THROUGH THE PROVISION OF LANGUAGE ASSISTANCE SERVICES.**

REP. DELLA BELATTI, CHAIR  
HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

Hearing Date: March 20, 2024

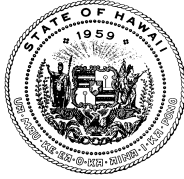
Room Number: 329

1 **Fiscal Implications:** N/A.

2 **Department Testimony:** The Department of Health (DOH) supports the intent of HCR71,  
3 which is to request DOH to convene a working group to make recommendations to improve  
4 language interpretation and translation services within healthcare settings.

5 DOH acknowledges that Limited English Proficiency (LEP) individuals and individuals living  
6 with physical disabilities face barriers in equitably accessing healthcare when language and  
7 translations services are not provided. A [2023 meta-analysis](#) found that LEP persons risk having  
8 poor perioperative care and outcomes, and another; and a [qualitative study published in 2018](#) in  
9 the Journal of Clinical Nursing concluded that language barriers, in any country or setting, can  
10 negatively affect nurses' ability to communicate effectively with their patients and thereby have a  
11 negative impact on the provision of appropriate, timely, safe, and effective care to meet patient's  
12 needs.

13 While Medicaid beneficiaries have access to translation services, privately insured LEP persons,  
14 including those in the ALICE cohort (Asset Limited, Income Constrained, Employed) likely do  
15 not. A discussion of stakeholders in from government, industry, and non-profits convened by  
16 DOH is a prudent investment in assuring all Hawaii residents have a fair and just opportunity to  
17 achieve optimal health and well-being. Thank you for the opportunity to testify.



**STATE OF HAWAII  
OFFICE OF LANGUAGE ACCESS**

1177 Alakea Street, Room B-100  
Honolulu, HI 96801-3378  
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**Testimony in SUPPORT of HCR71/HR56  
REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A  
STAKEHOLDER WORKING GROUP TO MAKE RECOMMENDATIONS TO  
ENHANCE MEANINGFUL ACCESS TO HEALTH CARE IN THE STATE  
THROUGH THE PROVISION OF LANGUAGE ASSISTANCE SERVICES.**

REPRESENTATIVE DELLA AU BELATTI, CHAIR  
REPRESENTATIVE JENNA TAKENOUCI, VICE CHAIR  
HOUSE COMMITTEE ON HEALTH AND HOMELESSNESS

Hearing Date: 3/20/2024

Room Number: 329 & Videoconference

- 1 **Agency's Position:** The Office of Language Access (OLA) supports the House Concurrent
- 2 Resolution (HCR) 71 and the House Resolution (HR) 56 and defers to the Department of Health
- 3 (DOH) on implementation and resource needs.
  
- 4 **Purpose and Justification:** These resolutions request the Department of Health (DOH) to
- 5 convene a stakeholder working group to study and assess language access in health care settings
- 6 across the State and on each island in the State; to make recommendations to enhance
- 7 meaningful access to health care in the State for individuals requiring language assistance
- 8 services; and to submit a report of the Stakeholder Working Group's study, findings, and
- 9 recommendations, including any proposed legislation, to the Legislature no later than twenty
- 10 days prior to the convening of the Regular Session of 2025.
  
- 11 OLA appreciates the Legislature's continued commitment to ensuring language access in
- 12 government programs, services, and activities. OLA notes that the aspirational and exploratory
- 13 goals of both resolutions are in line with OLA's mission, which is to address the language access
- 14 needs of persons with Limited English Proficiency (LEP). OLA is tasked with providing
- 15 technical assistance and coordinating resources to reduce the burden of meeting language access
- 16 obligations.

- 1 The establishment of a working group is an important step toward information sharing and the
- 2 development of ideas and action steps to address the language needs in our state. These
- 3 resolutions will allow OLA to work closely with other partners to further improve language
- 4 access in our state. If the measure is passed, OLA is committed to collaborating with the DOH
- 5 and other members to further improve language access for all.
  
- 6 Thank you for the opportunity to testify on these resolutions.

To: The Honorable Della Au Belatti, Chair  
The Honorable Jenna Takenouchi, Vice Chair  
House Committee on Health & Homelessness

From: Paula Arcena, External Affairs Vice President  
Mike Nguyen, Public Policy Manager

Hearing: Wednesday, March 30, 2024, 10:30 AM, Conference Room 329

RE: **HCR71/HR56 – Requesting the Department of Health to convene a stakeholder working group to make recommendations to enhance meaningful access to health care in the state through the provision of language assistance services.**

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AlohaCare appreciates the opportunity to provide testimony in **strong support of HCR71 and HR56**. This resolution requests the Department of Health to convene a stakeholder working group to make recommendations to enhance meaningful access to health care in the state through the provision of language assistance services.

Founded in 1994 by Hawai‘i’s community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 84,000 Medicaid and dual-eligible health plan members on all islands. Approximately 40 percent of our members are keiki. We are Hawai‘i’s only health plan exclusively dedicated to serving Medicaid and Medicaid-Medicare dually-eligible beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality, whole-person care for all.

AlohaCare is committed to improving access to high-quality care for all people—regardless of their ethnic and cultural background, their immigration status, or their language. In fact, Hawai‘i has a rich diversity of cultures and languages. According to the American Community Survey, approximately 25 percent of the population aged 5 and over that have a language other than English spoken at home.<sup>1</sup> We know that access to communication and language assistance for patients and consumers is important to the delivery of high-quality care for all populations. Conversely, communication and language barriers are associated with decreased quality of care and poor clinical outcomes, longer hospital stays, and higher rates of hospital readmissions.<sup>2</sup>

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<sup>1</sup> <https://www.hawaiihealthmatters.org/indicators/index/view?indicatorId=6397&localeId=14>

<sup>2</sup> <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Lessons-from-the-Field.pdf>



AlohaCare is a proud member of the Hawai'i Coalition of Immigrant Rights, and we are grateful to have championed this resolution among coalition members, stakeholders, and the Department of Health, reaching unanimous consensus and support among the many stakeholders involved on this very important topic.

We urge your favorable consideration of these resolutions, as establishing a stakeholder workgroup to assess language access in healthcare would be helpful to addressing health disparities and improving healthcare outcomes for our communities. By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

Mahalo for this opportunity to testify in **strong support** of **HCR71 and HR56**.



Wednesday, March 20, 2024 at 10:30 am  
Conference Room 329

**House Committee on Health and Homelessness**

To: Chair Della Au Belatti  
Vice Chair Jenna Takenouchi

From: Paige Heckathorn Choy  
AVP, Government Affairs  
Healthcare Association of Hawaii

Re: **Submitting comments**  
**HCR 71/HR 56, Requesting the Department of Health to convene a stakeholder working group to make recommendations to enhance meaningful access to health care in the state through the provision of language assistance services**

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 30,000 people statewide.

We are submitting **comments** on this measure, which seeks to bring together a group of stakeholders to assess language access in healthcare settings, and to make recommendations as necessary to the legislature. We appreciate the focus on the need for a robust workforce and would also suggest that the committee include considerations of any additional funding needed to implement measures that the group may recommend.

This measure does note that providers should be included in any working group—however, we suggest that our organization, which is an association of members, could be a good inclusion to the group and would encourage the addition of other similar types of organizations in the working group. This could include associations that represent plans or other providers, such as community health centers. Thank you for considering our comments on this measure.

To: House Committee on Health & Homelessness  
Re: **HCR 71 / HR 56 – Requesting the Department of Health to convene a stakeholder working group to make recommendations to enhance meaningful access to health care in the state through the provision of language assistance services**  
Hawai'i State Capitol & Via Videoconference  
March 20, 2024, 10:30 AM

Dear Chair Belatti, Vice Chair Takenouchi, and Committee Members,

On behalf of Hawai'i Children's Action Network Speaks!, I am writing in **SUPPORT of HCR 71 / HR 56**. This resolution asks the Department of Health to gather a group of people involved or interested in healthcare to discuss how to make it easier for people who are not yet proficient in English to access healthcare and create a report with ideas on how to improve access

During the pandemic, non-profit organizations worked hard to help limited English proficiency (LEP) families in Hawai'i access the benefits that they were qualified for. We learned that our state lacks resources to provide meaningful language access for LEP families, and the federal government does not provide translations<sup>1</sup> in many languages that are the most spoken by LEP families in Hawai'i.<sup>2</sup>

The urgency of this issue was highlighted again after the Lahaina wildfires. According to the language services coordinator for FEMA, who coordinated language access response after both the Lahaina and Paradise, California, fires, "the diverse cultures of Maui and the fact that many people did not feel comfortable dealing with government agencies, made the response in Lahaina unique."<sup>3</sup>

The working group proposed by this resolution would provide valuable insights and recommendations for enhancing meaningful language access to healthcare in our state by examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters.

As one of the states with the highest portion of foreign-born residents,<sup>4</sup> combined with the lack of resources for translations into many of the languages that are spoken most here, Hawai'i needs to devote more resources to language access than other states do.

Mahalo for the opportunity to provide this testimony. Please pass this resolution.

Thank you,  
Nicole Woo  
Director of Research and Economic Policy

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<sup>1</sup> United States Department of Agriculture Food and Nutrition Service, <https://www.fns.usda.gov/cn/translated-applications>

<sup>2</sup> Hawai'i Data Exchange Partnership, [https://hawaiiidxp.org/quick\\_data/datastory/el](https://hawaiiidxp.org/quick_data/datastory/el)

<sup>3</sup> <https://www.civilbeat.org/2024/03/people-who-dont-speak-english-lost-money-and-help-in-lahaina-response/>

<sup>4</sup> Statista, <https://www.statista.com/statistics/312701/percentage-of-population-foreign-born-in-the-us-by-state/>



**Testimony to the House Committee on Health and Human Services  
Wednesday, March 20, 2024; 10:30 a.m.  
State Capitol, Conference Room 329  
Via Videoconference**

**RE: HOUSE CONCURRENT RESOLUTION NO. 071, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A STAKEHOLDER WORKING GROUP TO MAKE RECOMMENDATIONS TO ENHANCE MEANINGFUL ACCESS TO HEALTH CARE IN THE STATE THROUGH THE PROVISION OF LANGUAGE ASSISTANCE SERVICES.**

Chair Belatti, Vice Chair Takenouchi, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** House Concurrent Resolution No. 071.

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

This measure, as received by your Committee, would request the Department of Health to convene a Stakeholder Working Group to study and assess language access in health care settings across the State and on each island in the State. The Working Group would be further requested to make recommendations to enhance meaningful access to health care in the State for individuals requiring language assistance services, and submit a report to the 2025 Hawaii State Legislature.

Language barriers impede communication between healthcare providers and patients and contribute to decreased quality of care, poor clinical outcomes, and disparities in patient-provider interactions. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, highlight the inadequacies and risks associated with such practices.



**Testimony on House Concurrent Resolution No. 071**  
**Wednesday, March 20, 2024; 10:30 a.m.**  
**Page 2**

Establishing a stakeholder workgroup to assess language access in healthcare is crucial to addressing these disparities and improving healthcare outcomes for our communities. By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

Accordingly, the HPCA urges your favorable support of this measure.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or [eabe@hawaiiipca.net](mailto:eabe@hawaiiipca.net).



## Testimony in SUPPORT of HR56/HCR71

COMMITTEE ON HEALTH & HOMELESSNESS

Representative Della Au Belatti, Chair

Representative Jenna Takenouchi, Vice Chair

Hearing Date: March 20, 2024

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

The Hawai'i Coalition for Immigrant Rights (HCIR) is in **full support of HR56 & HCR71**, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

HCIR is a statewide coalition of immigrant and migrant-led and-serving organizations working to advance the full inclusion and equal justice of immigrants and migrants through advocacy efforts. During the COVID-19 pandemic, at a time when Filipinos and Pacific Islanders, including COFA communities, were disproportionately affected, HCIR was refounded in 2020 to address the urgent needs of communities, particularly focusing on the limited English proficient communities (who comprise the groups disproportionately impacted<sup>1</sup>). We recognized language access earlier on as a critical issue, stressing the necessity for comprehensive support and services to ensure equitable access to healthcare and other essential resources.

Prior to the pandemic, language barriers impeded communication between healthcare providers and patients and contributed to decreased quality of care, poor clinical outcomes, and disparities

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<sup>1</sup> "State Language Data." *Hawaii*, Migration Policy Institute, [www.migrationpolicy.org/data/state-profiles/state/language/HI](http://www.migrationpolicy.org/data/state-profiles/state/language/HI).



in patient-provider interactions. Delays in treatment, inadequate care, medical errors, and underutilization of healthcare services are also consequences of language barriers<sup>2</sup>. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, also highlight the inadequacies and risks associated with such practices.

With over 25.9 percent of persons aged five years and older speaking a language other than English at home, language barriers pose a substantial obstacle to effective healthcare access. This barrier will continue unless we ensure language access as a necessity and a right our state must uphold and maintain.

Establishing a stakeholder workgroup to assess language access in healthcare is crucial to addressing these disparities and improving healthcare outcomes for our communities. It would provide a platform for comprehensive discussions and recommendations for enhancing meaningful access to healthcare.

Thank you for your support and consideration,  
Maria Rallojaj  
Policy and Communications Coordinator

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<sup>2</sup> Rasi, Sasan. "Impact of Language Barriers on Access to Healthcare Services by Immigrant Patients: A systematic review." *Asia Pacific Journal of Health Management*, vol. 15, no. 1, 2020, pp. i271. doi: 10.24083/apjhm.v15i1.271.

**Testimony in SUPPORT of HR56 & HCR71**  
COMMITTEE ON HEALTH & HOMELESSNESS

Representative Della Au Belatti, Chair  
Representative Jenna Takenouchi, Vice Chair

Hearing Date: March 20, 2024

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

I am writing **in support of HR56 & HCR71**, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

Waipahu Safe Haven Immigrant/Migrant Resource Center supports this resolution to identify the areas of gaps in our health care system for especially the COFA community who have been struggling with accessing services largely due to the limitation of language access.

With over 25.9 percent of persons aged five years and speaking a language other than English at home, it is evident that language barriers pose a substantial obstacle to effective healthcare delivery. Furthermore, in light of the unprecedented challenges posed by the COVID-19 pandemic and the recent Lahaina fire, we have witnessed firsthand the impact of language barriers on access to healthcare. As we move forward, it is essential to ensure language access as a necessity and a right that our state must uphold and maintain.

Language barriers impede communication between healthcare providers and patients and contribute to decreased quality of care, poor clinical outcomes, and disparities in patient-provider interactions. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, highlight the inadequacies and risks associated with such practices.

Establishing a stakeholder workgroup to assess language access in healthcare is crucial to addressing these disparities and improving healthcare outcomes for our communities. By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

I urge you to support this resolution and take proactive steps to establish the healthcare language access workgroup.

Thank you for your support and consideration,

Barbara Tom, Director  
Waipahu Safe Haven Immigrant/Migrant Resource Cent





March 18, 2024

**Testimony in SUPPORT of HR56 & HCR71**  
**COMMITTEE ON HEALTH & HOMELESSNESS**

Representative Della Au Belatti, Chair  
Representative Jenna Takenouchi, Vice Chair

Hearing Date: March 20, 2024

Aloha Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

On behalf of Kula no na Po'e Hawaii o Papakolea, Kewalo, Kalawahine (KULA), I am writing **in strong support of HR56 & HCR71**, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

KULA is a native Hawaiian beneficiary serving organization that exists to promote cultural, educational, environmental and health equity for all. During COVID, KULA worked closely with Pacific Islander community-based organizations and have come to understand the language barriers that continue to prevent our PI families from receiving effective health care.

With over 25.9 percent of persons aged five years and older speaking a language other than English at home, it is evident that language barriers pose a substantial obstacle to effective healthcare delivery. Furthermore, in light of the unprecedented challenges posed by the COVID-19 pandemic and the recent Lahaina fire, we have witnessed firsthand the impact of language barriers on access to healthcare. As we move forward, it is essential to ensure language access as a necessity and a right that our state must uphold and maintain.

Language barriers impede communication between healthcare providers and patients and contribute to decreased quality of care, poor clinical outcomes, and disparities in patient-provider interactions. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, highlight the inadequacies and risks associated with such practices.

Establishing a stakeholder workgroup to assess language access in healthcare is crucial to addressing these disparities and improving healthcare outcomes for our communities. By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the

workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

KULA urges you to support this resolution and take proactive steps to establish the healthcare language access workgroup.

Thank you for your support and consideration,

*B. Puni Kekauoha*

B. Puni Kekauoha  
Sr. Vice-President



# HAWAI' APPLESEED

CENTER FOR LAW & ECONOMIC JUSTICE

**Testimony in SUPPORT of HR56 & HCR71**  
COMMITTEE ON HEALTH & HOMELESSNESS

Representative Della Au Belatti, Chair  
Representative Jenna Takenouchi, Vice Chair

Hearing Date: March 20, 2024

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

On behalf of Hawai'i Appleseed Center for Law & Economic Justice, I am writing **in strong SUPPORT of HR56 & HCR71**, which would establish a stakeholder workgroup to assess language access in healthcare within our state. We need to ensure that all individuals in Hawai'i, from all cultural backgrounds, have access to affordable and equitable healthcare. Language access is the key to this.

I worked with hundreds of COFA families when I was at Family Promise of Hawai'i years ago. While accompanying one of our pregnant mothers to her medical appointment, it became so clear to me that there was an insensitivity on behalf of the medical staff while communicating with her about a serious medical situation. It really bothered me for days. I am convinced that this workgroup would have such a positive impact on all of our residents with limited English proficiency.

By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

We urge you to support this resolution and take proactive steps to establish the healthcare language access workgroup.

Mahalo for your support and consideration.



**HCR-71**

Submitted on: 3/18/2024 5:19:04 PM

Testimony for HLT on 3/20/2024 10:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
amy agbayani	Hawai'i Friends of Civil Rights	Support	Written Testimony Only

Comments:

I am testifying on behalf of Hawaii Friends of Civil Rights. (HFCR).We strongly support this resolution requesting DOH to convene a working group to provide needed information and recommendations to improve health care for limited English proficient members of our community.. HCIR sees language access as a civil right and need to meet federal and state mandates. DOH and the proposed stakeholders working group will be able to provide a report that will assist the legislature, DOH and health care providers .to improve health care for immigrant communities.

We respectfully request you approve this resolution.

Amy Agbayani and Patricia McManama, co-chairs

Hawai'i Friends of Civil Rights

**HCR-71**

Submitted on: 3/18/2024 1:39:30 PM

Testimony for HLT on 3/20/2024 10:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Nanea Lo	Individual	Support	Written Testimony Only

Comments:

Hello

Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

I am writing in support of HR56 & HCR71, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

With over 25.9 percent of persons aged five years and older speaking a language other than English at home, it is evident that language barriers pose a substantial obstacle to effective healthcare delivery. Furthermore, in light of the unprecedented challenges posed by the COVID-19 pandemic and the recent Lahaina fire, we have witnessed firsthand the impact of language barriers on access to healthcare. As we move forward, it is essential to ensure language access as a necessity and a right that our state must uphold and maintain.

Language barriers impede communication between healthcare providers and patients and contribute to decreased quality of care, poor clinical outcomes, and disparities in patient-provider interactions. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, highlight the inadequacies and risks associated with such practices.

Establishing a stakeholder workgroup to assess language access in healthcare is crucial to addressing these disparities and improving healthcare outcomes for our communities. By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

I urge you to support this resolution and take proactive steps to establish the healthcare language access workgroup.

me ke aloha 'āina,  
Nanea Lo, Mō'ili'ili, O'ahu

**HCR-71**

Submitted on: 3/18/2024 3:20:25 PM

Testimony for HLT on 3/20/2024 10:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Thaddeus Pham	Individual	Support	Written Testimony Only

Comments:

Aloha Chair Belatti, Vice Chair Takenouchi, and Members of the HLT Committee,

As a public health professional and child of refugees, I am writing **in support of HR56 & HCR71**, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

My parents were Vietnamese refugees who were lucky enough to find resources and professional opportunities, despite language barriers. Before my father passed from preventable chronic disease, we were mired in healthcare challenges even though all five children spoke English as a first language. I can only imagine how prohibitively challenging for those with less English language proficiency.

With over 25.9 percent of persons aged five years and older speaking a language other than English at home, it is evident that language barriers pose a substantial obstacle to effective healthcare delivery. Furthermore, in light of the unprecedented challenges posed by the COVID-19 pandemic and the recent Lahaina fire, we have witnessed firsthand the impact of language barriers on access to healthcare. As we move forward, it is essential to ensure language access as a necessity and a right that our state must uphold and maintain.

Language barriers impede communication between healthcare providers and patients and contribute to decreased quality of care, poor clinical outcomes, and disparities in patient-provider interactions. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, highlight the inadequacies and risks associated with such practices.

Establishing a stakeholder workgroup to assess language access in healthcare is crucial to addressing these disparities and improving healthcare outcomes for our communities. By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

I urge you to support this resolution and take proactive steps to establish the healthcare language access workgroup.

Mahalo for your consideration,

Thaddeus Pham (he/him)

**Testimony in SUPPORT of HR56 & HCR71**  
COMMITTEE ON HEALTH & HOMELESSNESS

Representative Della Au Belatti, Chair  
Representative Jenna Takenouchi, Vice Chair

Hearing Date: March 20, 2024

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

I am writing **in support of HR56 & HCR71**, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

As a first-generation immigrant, I have experienced the challenges that language barriers can present in accessing healthcare services. I grew up in a household that mainly spoke Ilokano. Although we were lucky to have a primary care physician who spoke Tagalog and understood our culture, my family often struggled to genuinely communicate their health effectively with other healthcare providers. Some words in Ilokano that we may use to describe our feelings may translate poorly into English. Simple tasks such as scheduling appointments, understanding medical instructions, and discussing treatment options also became daunting, especially if you are 12 years old, having to translate for your grandma or father, like how I had to do. Too often, my family relied on my imperfect translations, sometimes leading to misunderstandings and confusion.

Language barriers impede communication between healthcare providers and patients and contribute to decreased quality of care, poor clinical outcomes, and disparities in patient-provider interactions. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, highlight the inadequacies and risks associated with such practices, as with my family.

With over 25.9 percent of persons aged five years and older speaking a language other than English at home, including many of my family members, it is evident that language barriers pose a substantial obstacle to effective healthcare access. As we move forward, it is essential to ensure language access as a necessity and a right that our state must uphold and maintain.

I urge you to support this resolution and take proactive steps to establish the healthcare language access workgroup.

Thank you for your support and consideration,  
Maria Rallojay

**HCR-71**

Submitted on: 3/19/2024 6:54:20 AM

Testimony for HLT on 3/20/2024 10:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Iris Mendoza	Individual	Support	Written Testimony Only

Comments:

timony in SUPPORT of HR56 & HCR71

COMMITTEE ON HEALTH & HOMELESSNESS

Representative Della Au Belatti, Chair

Representative Jenna Takenouchi, Vice Chair

Hearing Date: March 20, 2024

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

I am writing in support of HR56 & HCR71, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

These resolutions recognize the critical importance of addressing language barriers in healthcare settings to ensure that every member of our community can access the care they need. Language should never be a barrier to receiving quality healthcare, yet for many individuals with limited English proficiency, navigating the healthcare system can be daunting and often leads to disparities in health outcomes. Many first generation children face the burden of providing interpreting at extremely young ages which causes many issues down the line.

By establishing a stakeholder workgroup to assess language access in healthcare, we can identify gaps in services, develop strategies to improve language assistance programs, and promote culturally sensitive care. This proactive approach will not only enhance patient experiences but also contribute to improved health outcomes and reduced healthcare disparities across our state.

With over 25.9 percent of persons aged five years and older speaking a language other than English at home, it is evident that language barriers pose a substantial obstacle to effective healthcare delivery. Furthermore, in light of the unprecedented challenges posed by the COVID-19 pandemic and the recent Lahaina fire, we have witnessed firsthand the impact of language barriers on access to healthcare. As we move forward, it is essential to ensure language access as a necessity and a right that our state must uphold and maintain.

Language barriers impede communication between healthcare providers and patients and contribute to decreased quality of care, poor clinical outcomes, and disparities in patient-provider interactions. The experiences of individuals with limited English proficiency, who often have to rely on family and friends as interpreters in healthcare settings, highlight the inadequacies and risks associated with such practices.

Establishing a stakeholder workgroup to assess language access in healthcare is crucial to addressing these disparities and improving healthcare outcomes for our communities. By examining the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare, and the use of family and friends as interpreters, the workgroup will provide valuable insights and recommendations for enhancing meaningful access to healthcare.

I urge you to support this resolution and take proactive steps to establish the healthcare language access workgroup.

Thank you for your support and consideration,

Iris Mendoza





## KŌKUA KALIHI VALLEY COMPREHENSIVE FAMILY SERVICES

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### Testimony in SUPPORT of HR56 & HCR71 COMMITTEE ON HEALTH & HOMELESSNESS

Representative Della Au Belatti, Chair  
Representative Jenna Takenouchi, Vice Chair  
Hearing Date: March 20, 2024

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

I am writing **in strong support of HR56 & HCR71**, which would establish a stakeholder workgroup to assess language access in healthcare within our state. This resolution recognizes the critical importance of ensuring accessible, affordable, and equitable healthcare for all individuals, regardless of their language proficiency or cultural background.

Kokua Kalihi Valley Comprehensive Family Services provides an array of health, social, and cultural services to more than 11,000 patients in the ahupua'a of Kalihi. Forty-three percent of our patients are best served in languages other than English. Our staff interpret in 26 languages and dialects. We have an intimate knowledge of the impact that absent or inadequate translation and interpretation services has on the lives of our many limited English proficient patients and neighbors struggling to access specialty and hospital care, public benefits, education, judicial, and other essential services. The results can be catastrophic: worsening illness and even death; school truancy and drop out; unnecessary judicial enforcement; and a sense of exclusion and alienation from social and civic life in Hawaii, among other negative outcomes. We were especially aware of the profoundly negative effect that inadequate language services had during COVID, especially during the early months of the pandemic, and believe there is much to be learned from reflecting on the language-related successes and failures of that time. We also believe that finding more effective strategies to support and expand the language workforce should be a high priority. A stakeholder workgroup can effectively address these and other essential considerations including the experiences of individuals with limited English proficiency, current language assistance services, disparities in healthcare (especially due to inadequate language access), and the use of family and friends as interpreters.

On behalf of KKV, I strongly urge you to support this resolution and take proactive steps to establish the healthcare language access workgroup. KKV is committed to supporting its work, once it is established.

Thank you for your support and consideration,

Sincerely,

Dr. David Derauf  
Executive Director, Kokua Kalihi Valley

Michael Epp  
Special Projects, Kokua Kalihi Valley