

Submitter: Fanning Lin
On Behalf Of:
Committee: House Committee On Early Childhood and Human Services
Measure, Appointment or Topic: HB2976

Chair Hartman, Vice-Chair Nguyen, Vice-Chair Scharf, and Members of the Committee,

My name is FANNING LIN and HAVING SPENT OVER 4 YEARS AND MY PROFESSIONAL MEDICAL TRAINING IN PORTLAND, OR I strongly support HB 2976.

All Oregonians deserve to be understood and have others understand them. But that is not the reality for the 50,000+ Oregonians who speak an Indigenous language from present-day Mexico, Central, or South America.

With limited exceptions, credentials are required by some state entities to provide interpretation services. But, in order to obtain a credential, an interpreter must demonstrate they are qualified. The best way to demonstrate qualifications is by passing a formal language proficiency exam. These exams don't currently exist for many Indigenous languages from these regions, which hinders the ability of interpreters to provide their services in a variety of settings.

HB 2976 would allocate funding to develop language proficiency evaluations, recruit and retain a qualified workforce, and coordinate appointments across many different entities, helping remove significant barriers for individuals needing interpretation services in some of life's most critical moments.

As a primary health provider whose patient population consists of majority migrant farmworkers, my ability to provide quality health care is daily threatened by a potential language barrier.

Among even native English speakers, the nuances of medical literacy are challenging to grasp - from understanding the pathology of your illness to the breakdown of the costs of visits/medicine/procedures in the hospital to even correctly pronouncing prescription medicine names!

Professional, vetted interpretation is not a luxury but a first step in the most basic human right for ANY patient to understand their illness enough to make a fully informed decision about their care.

In my consultation rooms, I have witnessed the helplessness of a family, uninsured, when delivering a complicated cancer diagnosis in rudimentary words because we lacked the resources or personnel to explain it in their first language; who must then question the risk vs benefit of spending their life savings on a treatment that may not cure.

I have observed the frustration and confusion on faces of the elders of our community, struggling to hear a glitchy tablet video interpreter in their second or third language because no indigenous language interpretation is available.

I have been forced to speak through daughters not even yet teenagers, born in the US, who try their best using the words they know in their native language to explain to their diabetic parents how insulin works and why it's necessary to prick themselves every day.

This must end today.

No Oregonian should be faced with language access barriers in emergency rooms, nor if they need to seek legal assistance after becoming a victim of crime. HB 2976 will help close these barriers and we urge your support of this important bill.

Sincerely,

Fanning Lin PA-C, family medicine