

RETHINKING LANGUAGE ACCESS

An analysis of the history, significance, implementation challenges, and improvements to language support services in California

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Master's Degree in Public Policy and Administration Culminating Project

May 29, 2021

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“The Legislature hereby finds and declares that the effective maintenance and development of a free and democratic society depends on the right and ability of its citizens and residents to communicate with their government and the right and ability of the government to communicate with them.” California Code, Government Code - GOV § 7291

ABOUT THE AUTHOR

People often ask me why I am passionate about language accessibility. My response has evolved over the years, as has my role and level of expertise on the topic. I am one of relatively few people who have had the privilege and opportunity to experience being an immigrant and learning English as a second language late in life. Additionally, I worked persistently to acquire a fluency level of English sufficient to then become a translator and interpreter, helping other fellow non-English speakers. In my career, I have had the opportunity to work at an urban school district to help newcomers and limited proficient families and students. I worked at a large health system where it became further apparent that quality language services are vital. My experience is valuable and has motivated me on many levels. I can empathize with linguistic minorities and this guides my scholarly, professional, and community work.

For over a decade, I actively attended language industry conferences and took relevant translation and interpretation courses, I learned about core fundamentals such as the code of ethics and standards of practice that credible trained professionals abide by. I learned about the types of certifications and reputable organizations that support language access. I earned prestigious certifications from the National Board of Certified Interpreters and U.S. Department of State. I pursued a BA degree in intercultural communication from Sacramento State University and completed seminars on the theory and practice of intercultural communication from the Intercultural Research Institute in Milan, Italy. I later had the honor to serve as a Governor appointee when I was appointed by Governor Jerry Brown to serve as Language Access Manager for the California Complete Count – Census 2020 Office. In 2011, I started a small company to provide translation and interpretation services in the Sacramento region.

Throughout my career in the language access industry, I have observed and learned about the political and administrative fragmentation, lack of awareness, fiscal and political factors, and data gaps that influence the provision of language support services. Language services are about more than words—they are about making sense of entire cultures. I have concluded that the way we speak shapes the way we think. Culture and language go hand-in-hand. Translators and interpreters travel across cultural and linguistic borders. They must know the most basic and most sophisticated register of two or more languages. It is a superpower. This is how I know that language access cannot be taken lightly. Meaningful language access is not realized without quality. I have learned about the importance of training for those providing language services. I am writing this paper as part of my culminating project for a master's degree in Public Policy and Administration. I aim to leverage all of the above referenced experience and conduct a careful analysis of challenges of coordinating language accessibility in California.

EXECUTIVE SUMMARY

California is home to the largest share of individuals with limited English proficiency (LEP) in the country. The State is home to roughly 7 million LEPs, which is equivalent to 19 percent of California's population. To help put these numbers in perspective, California's LEPs represent a share of 28 percent of the overall national LEP population, according to the most recent 2019 Census estimates. In 2015, the Census Bureau reported at least 350 languages are spoken in the U.S. and there are 185 different languages spoken in Los Angeles County alone.

A substantial number of LEP Californians who live, work, and pay taxes in their state are unable to communicate with their government and, likewise, the government is not able to communicate with a large segment of its residents. The communication barrier creates a subset of the population who is significantly cut off or excluded from mainstream society. LEPs are a protected class under state and federal laws.

Under Title VI of the Civil Rights Act of 1964 failure to provide language access represents discrimination on the basis of 'national origin'. The provision of language support services is, therefore, a civil right. Administrators at local, state, and federal levels of government are charged with delivering language support services to LEPs in their jurisdiction. Because LEPs have the same rights as monolingual English speakers to access public services and vital information, the provision of language access services is not optional. Language access are those services necessary to ensure LEPs have equal access to information and activities.

The legal mandates vary from county to county, state to state, and sector to sector. The lack of coordination in the delivery of language access services results in duplication of efforts, increased costs, and loose or unclear guidelines that are not enforceable. Too many laws that do not communicate with each other to regulate language access creates unpredictability in the quality and level of service. The lack of coordination of services negatively impacts recipients of services.

Although language access is not a new phenomenon, there is scant available research. In the course of this analysis and literature review, I found six common challenges related to the underlying challenges of implementing language access services in California. The six challenges are funding, legislation, race and ethnicity, universal certification, program measurement and evaluation, and accountability and reporting. In this paper, I provide a comprehensive analysis of the history and significance, challenges to implementation, and possible solutions to streamlining language support services in California.

INTRODUCTION

Should the language you speak determine your mortality and quality of life? Unfortunately, this is the case for a substantial number of Californians who live, work, and pay taxes in their state. These individuals who have limited or no English proficiency are

known as Limited English Proficient (LEP). LEPs are unable to communicate with their government and, likewise, the government is not able to communicate with a large segment of its residents. The communication barrier creates a subset of the population who is significantly cut off or excluded from mainstream society. In this paper, I will focus on analyzing the challenges of coordinating language access in such a large and diverse state as California.

WHAT IS LANGUAGE ACCESS?

Language access are those services necessary to ensure LEPs have equal access to vital information and activities. When and how these services are rendered is a complex issue requiring a multidisciplinary approach. The U.S. Census Bureau classifies individuals who speak a language other than English, as their primary language in the home, or speak English *less than very well* as Limited English Proficient or LEP¹.

LEPs are a protected class under state and federal laws. The law says that failure to provide language access represents discrimination on the basis of 'national origin'. The provision of language support services is, therefore, a civil right. Administrators at local, state, and federal levels of government are charged with delivering language support services to LEPs in their jurisdiction. Because LEPs have the same rights as English only speakers to access public services and vital information, the provision of language access services is not optional.

However, the legal mandates vary from county to county, state to state, and sector to sector. The lack of coordination in the delivery of language access services results in duplication of efforts, increased costs, and loose or unclear guidelines that are not enforceable. Too many laws that do not communicate with each other to regulate language access creates unpredictability in the quality and level of service. The lack of coordination of services negatively impacts recipients of services. I will explain this in more detail later in the paper.

Administrators charged with the responsibility of creating and executing a language access plan may not have sufficient

Translation

- Written documents
- Websites

Interpretation

- Bilingual staff
- In house interpreters
- Independent contractor interpreters
- Community grassroots
- Volunteer interpreters
- Over-the-phone interpreters
- Video remote interpreters

¹ The U.S. Census Bureau (Census Bureau) collects self-reported language proficiency data in the American Community Survey every five years. There are two definitions of LEP according to the Census Bureau. An *LEP individual* is anyone 5 years and older who speaks English less than very well. An *LEP household* is one where no member 14 years old and over speaks only English at home or speaks a language other than English at home and speaks English very well.

guidance on how to comply. These managers have little incentive to comply for various reasons such as loose enforcement, limited resources, excessive responsibilities, incomplete data, or widespread organizational resistance to adapting to what may be perceived as a burden or nuisance.

The term *language access* encompasses, but it is not limited to, a variety of language support services such as translation of written materials, interpretation, multilingual websites, and bilingual over-the-phone or video support. The provision of language access makes it possible for LEP communities to learn about vital information related to emergencies and threats to health and public safety in their primary language (i.e., COVID-19, wildfires, etc.). All language access services fall under two overarching categories: translation and interpretation. However, in California, language access includes hiring bilingual staff² “wherever a substantial language community exceeds 5 percent of those served by a state agency that has 26 or more employees, the agency is required to have staff fluent in that language.”

LANGUAGE ACCESS IS NOT NEW BUT LANGUAGE JUSTICE ADVOCATES ARE DRIVING THE CONVERSATION

Language accessibility is not a recent development. Although laws around language access were enacted six decades ago, a decisive force has been the work of advocacy groups. The world and demographics have shifted but legislations have not changed much since the 60s. Lawsuits and complaint filings have raised the issue of *language justice* as well as shaped and provided clarity for both LEPs and publicly funded entities on the issue. Advocacy groups defending the civil rights of linguistic minorities have contributed to the amendment of existing laws, exerted political pressure, and actively engaged communities to raise awareness of the rights to which they are entitled. For example, the *Center for Participatory Change* created a *Language Justice Curriculum*³ that can be used by organizations to create multilingual spaces where LEPs can fully participate.

The grassroots advocacy led to actions at the state level. In 2019, California invested over \$100 million, the largest amount in state history for census outreach efforts. The CA Census Office developed a groundbreaking language access plan. Initially, the State was to require subcontracting Community Based Organizations (CBOs) to provide language access in the top six languages spoken for each county/region. The limitation of a one-size-fits-all approach is that some metropolitan areas' overall share of LEP populations excluded was equivalent to the entire population of some smaller counties in rural or Northern California. Los Angeles county could skew the thresholds for the entire state due to its density. The end result was a methodology that consisted of the median number of only the LEP population in the state, a number/percentage threshold, and a *Safe Harbor*. A safe harbor is provision to safeguard smaller linguistic groups who do not

² <https://www.calhr.ca.gov/Documents/ocr-bsp-language-survey-and-implementation-plan-report-2016-2017.pdf>

³ <https://www.cpcwnc.org/lj-curriculum/>

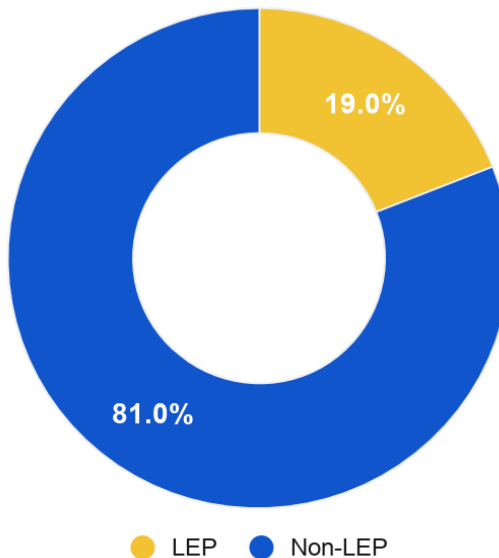
meet the standard percentage or numeric threshold, it is a fixed number (i.e., 1,000 Mien speakers minimum).

WHY DOES LANGUAGE ACCESS MATTER?

California is home to the largest share of LEPs in the country. The State is home to roughly 7 million LEPs, which is equivalent to 19 percent of California's population. The national figure is even greater at 25.6 million, which is equivalent to 8.4 percent of the overall U.S. population. To help put these numbers in perspective, California's LEPs represent a share of 28 percent of the overall national LEP population, according to the most recent 2019 Census estimates. One common misconception is that LEPs are all immigrants. In fact, about 27 percent⁴ of Californians are foreign born. Moreover, California enjoys the highest level of linguistic diversity. In 2015, the Census Bureau reported there are at least 350 languages spoken in the U.S. and there are 185⁵ different languages spoken in Los Angeles County.

California LEP Population

2019 American Community Survey 5-year estimates from US Census Bureau



Research indicates diversity is a strong predictor of economic development. Diversity⁶ is said to foster creativity and promote the quest for novel information and perspectives, and lead to better decision making and problem solving. Diversity drives innovation and changes the way we think. How does California manage and leverage its diversity? What are the challenges of coordinating consistent language access for a large diverse state such as California?

⁴ <https://www.census.gov/quickfacts/fact/table/CA,US/POP815219>

⁵ <https://www.census.gov/newsroom/press-releases/2015/cb15-185.html>

⁶ https://greatergood.berkeley.edu/article/item/how_diversity_makes_us_smarter

In addition to language barriers, LEPs face stigma, discrimination, and systemic social disadvantages. LEPs can be both U.S. and foreign-born individuals who possess limited fluency in the English language. It is not uncommon for LEPs to speak some English but lack sufficient fluency to understand, speak, read, or write in English to take care of official business. Being unable to communicate freely can have negative consequences. A 2020 study in the *Annals of Epidemiology*⁷ found that COVID-19 diagnoses were associated with counties with greater monolingual Spanish speakers and also emphasized that occupational exposure plays a vital role in Latino COVID-19 cases and deaths.

Think about going to the doctor without knowing whether someone will speak your language. What if you have an exchange with law enforcement but you are not fluent in English and do not understand what is happening? What if your child is struggling in school but you cannot communicate with their teacher? What if you are a victim of domestic violence? How do you find someone to help in your language?

METHODS

I wrote this paper using a meta-analysis. I reviewed different types of sources from relevant sectors, news media, and engaged in fact-finding interviews. In California, language access services are governed primarily by the Dymally-Alatorre Bilingual Services Act of 1973, Gov. Code §§ 7290 – 7298. I had the chance to interview John Hering, Manager of the Bilingual Services Program at California Department of Human Resources (CalHR), about the challenges of coordinating language access efforts in California. Mr. Hering leads the Bilingual Services Program (BSP) statewide, a state program that provides oversight and guidance as required by the Dymally-Alatorre Bilingual Services Act.

Additionally, I collected the insights from Elena Morrow, Manager, Medical Interpreting Services at UC Davis Health System in Sacramento. Ms. Morrow has decades of experience in the language access industry in various capacities as an interpreter and manager. UC Davis' Health System has the largest interpreter department in Northern California with translators and interpreter in over 16 languages. She serves on the Language Accessibility Advisory Committee for the Sacramento County Elections office. I attempted to conduct an interview with a federal representative, but they were unable to provide comment. However, they recommended the same guidance documents I reviewed.

For a more detailed description of sources used for this paper, please see APPENDIX A.

⁷ Risk for COVID-19 infection and death among Latinos in the United States: examining heterogeneity in transmission dynamics <https://www.sciencedirect.com/science/article/abs/pii/S1047279720302672>

| Type | Number of Articles |
|--|---------------------------|
| Local and State Government | 15 |
| Federal Government | 20 |
| Medical Journal Articles | 11 |
| Court and Legal Research | 9 |
| Fact finding interview with California Subject Matter Expert | 2 |
| Fact finding interview with Federal Subject Matter Expert | 1 – Declined interview |
| Industry Specific Organizations | 5 |
| Non-Profit/Advocacy | 12 |
| Non-Partisan Research Reports | 3 |
| Academic Research | 3 |
| News Articles | 6 |

CHALLENGES AND SOLUTIONS TO COORDINATING LANGUAGE ACCESS IN CALIFORNIA

Language access is not new to healthcare providers and those in the justice system. Heads of hospitals and courts have known and studied language accessibility over several decades. Challenges in the coordination of language access are not industry exclusive. The Dymally-Alatorre Bilingual Services Act requires state agencies and local governments serving a substantial number of LEPs to employ qualified bilingual staff in public contact positions and translate documents explaining services into LEP's primary language. The 'substantial number of non-English speaking people' threshold is met when speakers of any given language comprise 5 percent or more of the people served.

Research and reports between produced by court and medical experts reveal common roadblocks across industries and sectors. In the literature review phase, I identified six primary challenges, described in more detail below. The challenges are funding, legislation, race and ethnicity, universal certification, program measurement and evaluation, and accountability and reporting.

Funding

Most of the sources reviewed for this paper and the fact-finding interview point to funding as a core issue impacting the delivery of language accessibility services. When agencies are asked to do more with the same amount of money it is understandably challenging. For instance, local government and state agencies have to hire additional bilingual staff, training staff, contracting interpreters and translators, pay ethnic media, and invest in new software and technology. It is costly to develop and oversee an operation for which there is little precedent.

Mrs. Morrow reported concerns regarding funding. She mentioned that language services in healthcare are not funded by state or federal government dedicated dollars. Language access services are required by a number of laws, bills, executive orders, but only one of the mandates in California spells out funding for language services, that is SB 853 of 2010 pertaining to commercial health insurance paying for interpreters for their LEP members. For the rest of patients, with or without insurance, hospitals must find ways to pay for language services on their own.

Mr. Hering shared similar concerns over funding. It is increasingly challenging for state agencies to provide services in a digital era. It is difficult to invest in new technologies when there are always many competing priorities. Hiring bilingual staff is also difficult due to budgetary and capacity limitations. Establishing more streamlined systems could help reduce costs and increase efficiency.

| Challenge | Solutions/Actions | Limitations and special considerations |
|---------------------------|--|---|
| Not enough funding | Leverage technology advancements: <ul style="list-style-type: none"> • Translation Memory Tools, Computer Assisted Translation, and Machine Translation can automatically translate content in seconds. • Remote interpretation is a mode of interpretation that has also been on the rise prior to COVID-19. This may involve over-the-phone interpretation (OPI) or Video Remote interpretation (VRI). | Agencies would still need a human translator to review documents for minor edits. This approach saves money, increases efficiency, quality, accuracy, and consistency. Whenever hiring linguists, take steps to ensure a bilingual holds training/certification from a state, federal, or national entity. For example, hiring remote interpreters is convenient, but you want to ensure these interpreters are trained on protocols, standards, relevant laws (i.e., HIPAA), etc. |
| | Avoid duplication of efforts: <ul style="list-style-type: none"> • Do not pay for the same thing twice. Administrators can share materials with other groups or agencies and consider crowdsourcing or establishing a clearing house. For example, templates which counties can adapt and customize would avoid each of the 58 counties spending funds to | For the sharing of materials, a Language Access Coordinator and support staff could help filter low quality translations and help keep an organized flow. |

| | | |
|--|---|--|
| | <p>translate agendas, flyers, etc.</p> | |
| | <p>Leverage human capital:</p> <ul style="list-style-type: none"> • Administrators should take steps to train staff to properly act as interpreters for non-medical or legal encounters. • Leverage community organizations and view them as allies rather than an obstacle or nuisance. • One existing model to explore is the SF language access ordinance⁸ and language access network⁹. • Administrators might also contract with ethnic media in strategic ways. | <p>Fiscal and human capital (staff time)</p> |
| | <p>Dedicated language access budget items</p> <ul style="list-style-type: none"> • For example, Mrs. Morrow suggested there should be a separate reimbursement by the state/federal government for language services to healthcare facilities because communication is a safety issue in healthcare. It is not currently viewed as such. ASL, closed captioning, deaf interpreter services should be reimbursed as services to the disabled community. | |

Legislation

In my review of existing literature, I found that there is a pressing need to not only implement and enforce current statutes, but it is also imperative to enact new legislations. Programs charged with language access are, in some instances, understaffed, underfunded, and experience high turnover. Mr. Hering also pointed to a limited administrative continuity or institutional knowledge to pull from due to leadership changes.

⁸ <https://sfgov.org/oceia//compliance-reports>

⁹ <https://caasf.org/language-access-network/#:~:text=The%20Language%20Access%20Network%20>

Due to the variability of leadership commitment and knowledge on the topic, some managers are not aware of their responsibility to provide language access and, likewise, LEPs are not always aware of their rights.

Language accessibility is routinely lost in a sea of competing priorities. For example, there have been several failed attempts to amend the Dymally-Alatorre Bilingual Services Act since 1973. California legislators have introduced language access bills on a rolling basis over the last few decades with little to no success. However, each time a new bill has been introduced, it is not significantly different from previous iterations. Additional limitations for California legislators are federal mandates and the fact that language access laws vary from state to state.

The lack of universally accepted laws results in a patchwork of legal obligations which vary from state-to-state, from language-to-language, from condition-to-condition, and from institution-to-institution. Laws vary in scope and impact, leaving key areas unprotected. A state may mandate translation of information about cancer but not mandate such services related to abortion, HIV, etc., depending on the political ideology of the ruling majority.

At the national level, for example, a new administration can set the pace for initiatives. In 2018 Attorney General Jeff Sessions under the Trump Administration rescinded 24 guidance documents for language access prohibiting the Department from making rules without following the procedures required by Congress. In contrast, in 2011, Attorney General Eric Holder under the Obama Administration wrote a memorandum to heads of agencies communicating the Federal Government's Renewed Commitment to Language Accessibility.

The differing levels of requirements depend on whether an agency is state or federally funded, or both. In some cases, agencies may receive various streams of funding. Consequently, there are disparities across institutions and variability in services. California has differing laws for state agencies. There may be more specific language access laws for elections and government programs (i.e., Medi-Cal, Medicaid, welfare, etc.) that require public contact.

In California, government units are required to self-report in a survey every other year, where they collect data for a period of ten days. When it comes to Federal funding, all recipients of federal dollars are required to observe Title VI of the Civil Rights Act, and if they pass down funds to states or local governments, those recipients would be bound by the same requirements. The same principle applies to any program or activity funded by state tax dollars; they are bound by the Dymally-Alatorre Bilingual Services Act of 1973.

California is the state with the most language access laws in the nation. Thresholds, be it figures or percentages, are helpful to some extent but pose limitations as well. More specifically, only a limited number of laws specify a threshold (number or percentage) that triggers language access and a list of actions, such as translating a

website or offering a 24-hour phone hotline. Numerous legal and advocacy publications by subject matter experts suggest there is a consensus on the need to address gray areas in the language access laws, which are too vague and easily open to interpretation. For example, relevant laws say, “reasonable efforts” or “meaningful communication” in reference to language access. To the general public such phrases can be interpreted in more than one way. I was able to find one official definition that can serve as a starting point.

The Refugee Health Technical Assistance Center defines *meaningful access*¹⁰ as “language assistance that results in accurate, timely, and effective communication at no cost to the LEP individual.” The office is funded by the U.S. Refugee Resettlement Office and The Refugee and Immigrant Health Program, Massachusetts Department of Public Health. An updated U.S. Department of Homeland Security Language Access Plan further specifies, “for LEP individuals, meaningful access denotes access that is not significantly restricted, delayed or inferior as compared to programs or activities provided to English proficient individuals.”

For a list of most common laws governing language access in California and nationwide see APPENDIX B.

| Challenge/s | Solutions/Actions | Limitations and special considerations |
|---|---|---|
| Legislations were introduced too long ago and need to be revised or replaced There are too many competing priorities There is a lack of clear unified guidance from state government | Leverage existing institutional knowledge | Sectors who do not collaborate organically could benefit from <i>nudging</i> . |
| | Listen to experts <ul style="list-style-type: none"> To fix language access, you need people who understand the ins and outs of its complexities | There is a limited supply of experts. |
| | Invest in further research | Research should be strategic. |
| | Create a multi-state consortium. | Determining who leads the consortium can require intervention. Each state has their own set of laws ruling language access. |
| | Provide clear guidance for implementation. | This may require new legislative measures. |
| | Create manager and coordinator positions at state level. | California has more than 100 language access statutes or regulations that clarify or |

¹⁰ <https://refugeehealthta.org/access-to-care/language-access/>

| | | |
|--|---|-------------------------------------|
| | | broaden federal requirements. |
| | Streamline language access laws in California | Legislative implications |
| | Incentivize cities and counties to work with CBOs in strategic ways without compromising accountability and quality | Fiscal and legislative implications |

Race and ethnicity

Linguistically isolated populations experience disparate adverse health and economic outcomes due to their inability to freely and equitably access and utilize public services that are available to the general public. Without language accessibility, a large segment of the population is unable to enjoy the same civil rights protections afforded to all other citizens. Language barriers exacerbate LEPs access to life-saving information. In 2021, research published by a *Journal of the American Medical Association*¹¹ (JAMA) underscored the various social and demographic factors linked to higher incidence (21.7% higher) and mortality (16.9% higher) rates of COVID-19. These factors include limited English proficiency, race, and disability.

Speaking English *less than very well* is a status that intersects with multiple barriers such as cultural, economic, and other social determinants of health. There is also a stigma attached to being a monolingual non-English speaker. Often times, having an accent¹² or not speaking the language can lead to racial profiling or discrimination. LEPs do not know about their right to an interpreter in many instances. LEPs may also experience other barriers such as low literacy rates that exacerbate the language barrier. In 2019, the San Joaquin Census Research Project¹³ found that 65% of Latinos in the San Joaquin Valley have elementary or middle school education in their native language.

Race and ethnicity are a challenge category because treating everyone the same and failing to provide language access constitutes facially neutral policies/practices. *Facially neutral policies* or practices are those that treat English-only speakers and LEPs the same, but negatively affect LEPs. These practices result in *disparate impact* or discrimination for the LEP protected class on the basis of 'national origin'. Disparate harm is a term used for discrimination that is unintentional. Language barriers result in exclusion from public programs, delays or denials in services, and inaccurate or incomplete information. This gap in access has real life consequences for everyone involved, including non-LEPs. Not only is it a violation of the law, but language barriers prevent LEPs from fully integrating and contributing to society. Take for example, an LEP parent who is unable to be involved in their child's education because they cannot freely

¹¹ <https://www.languagemagazine.com/2021/02/21/study-highlights-importance-of-language-access-services-during-pandemic/>

¹² <https://www.pbs.org/newshour/show/we-stigmatize-accent-but-language-belongs-to-everyone>

¹³ https://www.shfcenter.org/assets/SJVHF/SJVCRP_Survey_Findings_Report_011819_Web.pdf

communicate with teachers and other school staff. Another example of how language access affects entire communities became more obvious with COVID-19. Hundreds of news articles in 2020 reported cases where LEPs did not know about the pandemic, did not know where to go for services, or how to prevent the spread. Getting the information to linguistically isolated communities became a public health issue with life-or-death consequences.

A study titled *Racial/Ethnic Differences In COVID-19 Screening, Hospitalization, and Mortality in Southeast Wisconsin* showed the way structural racism influences environmental exposures for people of color, the biological consequences of those exposures, *access to information* about health, and health outcomes themselves. Blacks and Hispanics are three times more likely to test positive for COVID-19 and two times more likely to die from it. Social factors contribute to poorer health in minorities; thus, hospitalization and mortality rates are higher in these populations.

| Challenge/s | Solutions/Actions | Limitations and special considerations |
|---|--|--|
| Race and ethnicity are a challenge category because treating everyone the same and failing to provide language access constitutes facially neutral policies/practices. | Incorporate new policies that address structural racism to mitigate disparities <ul style="list-style-type: none"> For example, HHS Office of Minority Health issued Cultural and Linguistically Appropriate Services¹⁴ (CLAS) OR Using a Health Equity Lens in the Transportation and Quality Strategy¹⁵ (TQS) | Agreement for public and private sector as to how to best address this issue. Pay attention to whose voice is elevated in this conversation. <ul style="list-style-type: none"> Who gets to decide what appropriate services are? What represents culturally and linguistically appropriate services? |
| | Hire staff that is representative of LEP communities | Ensure decision makers are representative of the populations directly being impacted. |

Universal Certification

Another major roadblock to cohesive and coordinated language access is the lack of a universally accepted standard to measure interpreter qualifications and abilities. There is no agreement as to how much training is appropriate and there are no universally accepted benchmarks by which to judge the proficiency of interpreters in California or

¹⁴ <https://thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedNationalCLASStandards.pdf>

¹⁵ <https://www.oregon.gov/oha/HPA/dsi-tc/Documents/TQS-Health-Equity-Lens-Guidance.pdf>

nationwide. Conveying meaning from one language to another requires an unusual command of the language. Bilingual staff is routinely pulled to perform translation or interpretation work without additional pay, particularly those frequently engaging in public contact such as front office staff.

Interpreter competency is a core component for meaningful communication to take place. Any form of communication facilitated by *ad hoc* interpreters (i.e., family, friends, or untrained bilinguals) is likely to contain errors and have adverse far-reaching consequences. Being bilingual is only a minimum first step. The knowledge of terminology, code of ethics, and standards of practice are of the utmost importance. Interpreters need to know their role in an encounter and be familiar with particular laws they must abide by. For example, medical interpreters receive in-depth training about the intricacies of the Health Insurance Portability and Accountability Act (HIPAA).

There are no formal uniform protocols to notify LEPs of their rights to an interpreter or in-language support/resources. Using bilingual staff who are not certified/trained can represent a liability. To give you an idea, an 18-year-old baseball player was taken to a South Florida hospital in a coma. Family members used the word '*intoxicado*' when speaking about the patient. Though '*intoxicado*' and '*intoxicated*' may sound similar, they are deeply different in meaning. In Spanish, '*intoxicado*' simply means you ingested something that made you sick. Medical staff quickly jumped to the diagnosis of drug overdose. A few days later, the health team realized Willie Ramirez had a bleeding in the brain. Mr. Ramirez suffered lasting consequences. He ended up quadriplegic as a result of a miscommunication and the case settled for 71 million¹⁶.

The Robert Wood Johnson Foundation (RWJF) funded sites of *Hablamos Juntos*. This is a 10-million multi-year study to improve access to healthcare for LEP Latinos and explore cost-effective ways for healthcare organizations to provide language access services. The study found interpreter proficiency standards were not clearly specified. Another finding was that in-house interpreter jobs tended to be low-wage jobs with little in the way of career advancement. Another point was how other staff members regarded interpreters and paid them little respect. The research suggested there is little incentive to invest in a college education or a highly specialized program to get a low-wage job as an in-house interpreter. This study focused on medical interpreters of a particular program. There are elite positions that a select few interpreters reach such as working at the United Nations or European Union¹⁷ where salaries range between USD 70,000-94,000.

There is a perception of low incentives to join the profession, which results in limited capacity in certain languages. Increasing the interpreter workforce represents another major challenge. There are not enough interpreters and translators to meet California's demands. Efforts to attract, train, retain, and better compensate interpreters

¹⁶ https://www.shfcenter.org/assets/SJVHF/SJVCRP_Survey_Findings_Report_011819_Web.pdf

¹⁷ [https://www.europarl.europa.eu/interpretation/en/the-interpreter.html#:~:text=The%20European%20Parliament%20uses%20staff,Personnel%20Selection%20Office%20\(EPSO\).](https://www.europarl.europa.eu/interpretation/en/the-interpreter.html#:~:text=The%20European%20Parliament%20uses%20staff,Personnel%20Selection%20Office%20(EPSO).)

have not succeeded in expanding the pool of trained professional interpreters. The use of *ad hoc* interpreters can have terrible consequences for LEPs (i.e., jeopardize a court's ability to guarantee due process, result in longer hospital stays and greater risk of medical complications due to difficulty understanding instructions, etc.).

There is no federal or state standard for governing certification for interpreters. Certainly, there is a short list of certifications available: state court, federal court, and two medical interpreter certifications. There is not one certification that is accepted by all government units in California. For translators, a certification is obtained and available only via the *American Translators Association*.

Professional standards, roles, ethics, and expectations for interpreters are as variable as the laws themselves. For example, the National Council on Interpreting in Health Care developed *National Standards of Practice for Interpreters in Healthcare*, but these have not been adopted across sectors. There are existing standards or certifications that could be used as models. Coordination and streamlining of interpreter/translator certifications across state lines could help improve access and expand the supply pool. This could be especially important for the increasing number of languages of lesser diffusion such as indigenous languages in California, which may not have a written system.

Certification is a mechanism to assure the quality of interpreting. A standard certification can guarantee that meaningful communication takes place as intended by the law. There is no universally accepted certification at the state or federal level. Translators, those who perform written work, can become certified via the American Translators Association (ATA). Interpreter certifications are available for state and federal courts. Medical interpreters can seek certification via the National Board of Certification for Medical Interpreters (NBCMI) or the Certification Commission for Healthcare Interpreters (CCHI). However, agencies should avoid certification exams that are too stringent and have too high of an expectation because it may further shrink the pool of qualified professionals.

| Challenge/s | Solutions/Actions | Limitations and special considerations |
|--|---|---|
| There is no universally accepted certification at the state or federal level. | Create a state standard certification based on existing models with the help of referenced certifying bodies. | The test should be reasonably priced or free of cost. Prerequisite criteria should not deter applicants. |

Program Measurement and Evaluation

In California, there is no systematic way to track 'public contact' encounters and outcomes. There is no tracking system to quantify a return on investment when it comes to dollars spent on language access in the State. *Public contact* is the primary basis to

trigger language access services. Many challenges with this process stem from the statutes that do not provide clear guidance. It is not sustainable to spend taxpayer dollars on language access without the ability to evaluate and measure for success and efficiency. One way to address this would be to include language access as a separate budget allocation. Consider creating a language access policy that clearly outlines framework, strategies, responsibilities, resources, and expectations.

| Challenge/s | Solutions/Actions | Limitations and special considerations |
|--|--|---|
| There is no tracking system to quantify a return on investment when it comes to dollars spent on language access in the State | Provide clear and concise guidance of language such as LEP, meaningful communication, and reasonable efforts | Existing systems area a result of statutes enacted decades ago. Legislative action may be required to introduce new bill proposals or amend current laws. |
| | A robust investment in strategies and systems to prevent far-reaching errors | California could leverage innovative technologies to track data. |
| | Systematic cross agency and sector data collection | |
| | Universal state frameworks to measure quality and efficacy | |

Accountability and Reporting

In California, there is no enforcement body for failure or subpar language access services. The State has no way of verifying if agencies are leaving information out. Under the Dymally-Alatorre Act agencies are required to report documents they distribute. With the transition to the digital age, agencies upload documents on the web; hence, reporting small numbers of documents, and there is no reliable way to know if they are leaving anything out. There have been numerous attempts to amend the law in California. Translation services are only triggered based on the number of public contacts.

I think this is a critical area that needs attention. The state lacks information because data is not reported. Under Dymally-Alatorre, there is a survey report that takes place every other year. However, this is not the best source of data. Agencies track public contact over a period of 10 days whenever they choose in between reports. The state could follow existing models such as the Local Control and Accountability Plan (LCAP) that school districts are required to conduct and submit. The California Department of Education sums up what the LCAP is as follows: "The LCAP is a tool for local educational agencies to set goals, plan actions, and leverage resources to meet those goals to improve student outcomes." The monitoring, evaluation, accountability and reporting of

language access activities funded directly with dedicated state dollars can follow a similar model as LCAP.

| Challenge/s | Solutions/Actions | Limitations and special considerations |
|---|--|--|
| The State has no way of verifying if agencies are leaving information out or enforce language access | Establish enforcement/ management body or unit to provide guidance and support to state agencies | Special considerations may include fiscal, legislative, and political. |
| | Require annual reports on specific criteria or elements to aid the legislature to pass budget | |
| | Guidance for implementation, enforcement, and accountability | |
| | Connect specific language access efforts to budget allocation items in order to track outcomes | |

WHAT IS MISSING FROM THE CONVERSATION?

Up until this point, I have presented six overarching challenges applicable to all industries. I provided broad options to consider. However, I want to add a few more elements to the conversation that are worthy of consideration.

Thresholds and Data

If laws mandate language access when and only if a threshold is met, then thresholds *must do no harm*. In other words, thresholds that only rely on a percentage may inadvertently exclude sizable segments of LEPs. As previously mentioned, the data used to inform the threshold may not be accurate. Data gaps exist. Data is not perfect.

In the 2020 Census, only 69.9 percent¹⁸ of Californians completed the census. This is problematic because already isolated groups may not participate in the decennial census at the same rate as the rest of the population. Assessing and anticipating negative consequences points to thinking creatively about this area and not adopting a one size fits all approach. At the national level, the Office of Civil Rights complaints have been critical to improving access across the country and remains the most important driver for

¹⁸<https://cacensus2020.maps.arcgis.com/apps/webappviewer/index.html?id=93a548b625334e438bbb89dcf1de5d10>

legislative change. What can be the driver at the state level? Future research could attempt to answer this question.

The California Census Office 2020 used Public Use Microdata Areas (PUMAs) data in 2019-2020 during census outreach efforts. They used the most detailed data available, courtesy of the California Department of Finance. The methodology considered the size of the smallest to the most densely populated geographic areas in California. The median LEP population at the time was 54,000, grouping the state into three groups/categories. If data is the basis for triggering services, then disaggregated data is fundamental.

The California Census Office developed and deployed an unprecedented methodology by placing Los Angeles in its own category. Then, the state Census Office calculated the State's LEP median figure as an indicator to divide geographies based on LEP density. Next, they set a numeric and percentage threshold, as well as a *Safe Harbor*. A safe harbor is a provision to protect the smallest linguistic minority groups that do not meet standard thresholds. The methodology consisted of the following three parts. First, PUMAs or geographies with LEP populations below 54,000 were required to provide language access for any single language spoken by more than 1,500 people. Providing a *Safe Harbor*. Second, Geographic areas with LEP populations equal or greater than 54,000 were required to provide language support mechanisms for any language spoken by either 3 percent or 3,000 members; whichever was greater. Third, Los Angeles county was required to provide language support in the top 12 non-English languages: encompassing over 95% of the LEP population.

Compliance Requirements

As mentioned earlier in this paper, most language access laws have loose requirements. Indeed, those who work in the legal and medical fields see language access on a regular basis. Agencies managing public services either at city and state levels, occasionally have to translate materials or help someone who walks through their door. Not surprisingly, the sectors I have listed do not seem to communicate between one another. The lack of coordination present in our current system can be due, in part, to public and private sectors not engaging in cross-sector collaboration.

Election officials have an advantage in the sense that elections laws are unique. Election codes such as Section 203 of the Voting Rights Act and California Election Code 14201 explicitly outline the required measures to address language access at polling centers, ballots, and mailers. However, these clear requirements are non-existent for blanket anti-discrimination state and federal law.

Community Outreach and Education Campaigns

I include *outreach and education campaigns* because I was unable to find substantial research or knowledge on outreach to non-English communities. This issue intersects with statewide public information campaigns on a variety of topics. For

example, emergency preparedness, COVID-19, public safety, among others. LEPs are not always aware of their rights and services available to them. It is not uncommon during election season for political campaigns scramble to conduct outreach to eligible LEP voters in a last-minute attempt to earn votes. Relationships and trust cannot happen overnight.

Culturally Appropriate Communication

State officials would do well to consider working in lockstep with *intercultural experts* during the development and implementation of language access efforts. Increased access is of little consequence if ineffective or inadequate services are a result. Additionally, new research could focus on other intersectional factors such as low literacy, social determinants of health, cultural barriers when planning/developing language access guidelines and regulation.

In-House Translators and Interpreters

In the European Union and United Nations, there are in-house translators and interpreters. This means these individuals are vetted and screened via exams, both oral and written. Translators and interpreters for these inter-government bodies are employees. California could adopt a model in which bilinguals are trained, vetted, and state employees to remove barriers and mitigate the challenges presented in this paper.

Silicon Valley is in California!

California is home to the largest tech companies in the world. As such, we should continue to ask ourselves, how well are we leveraging technology? For example, Duolingo, a free language learning app with over 300 million users claims significant impact in supporting language access. English is the most popular language among learners worldwide. However, in Sweden nearly a third of Duolingo users are learning the native language. This phenomenon is linked to the fact that immigration to Sweden skyrocketed in recent years, with one in six Swedish residents in 2015 being born outside the country. The fastest growing foreign-born groups are from Syria and Afghanistan. Applications such as Duolingo may help LEPs in California improve their English fluency.

CONCLUSION

Understanding the significance of language access, its history, and core areas should drive us to answer important questions and identify innovative solutions to benefit California residents. We have learned the significance and history of language access. We know the magnitude of the issue at hand. Nearly 7 million California residents or 19% of the state population faces an insurmountable barrier, which affects most of us regardless of the language we speak. LEPs inability to climb the social ladder means they are not able to contribute at their full potential.

The demand for language access services is on the rise. Take for example the increased in demand for interpreters in civil cases, which almost doubled from 35,213 in FY 2014-2015 to 67,645 in FY 2017-18. In 2007, the California Institute for Rural Studies¹⁹ placed the population of indigenous people from Oaxaca, Mexico alone at 150,000; the current number for all indigenous groups from Latin America is likely to be much higher. Additionally, according to the 2010 U.S. Census, California represents 12 percent of the total Native American population (approximately 720,000). The data does not distinguish between Native American from U.S. territories and indigenous people from Mexico and Central America. One takeaway from the report is that the demand for language access is not in decline and quite the opposite it is on the rise.

Given the demographics presented throughout paper, why is language access not more prioritized by policymakers? This is a question that deserves an attentive response. Can California lead the way by streamlining the coordination of language access? State and federal guidance documents do exist, legal and medical research does exist, and language justice²⁰ advocacy groups exist. Why is it that industry-specific knowledge has not resulted in significant legislative changes? This too deserves an answer.

We learned that failure to address language access is an issue with real life consequences for those unable to access vital information and services. The last two challenges discussed help us conclude that the magnitude of this issue is unknown, and thus difficult to quantify. Without being able to assign cost to language accessibility, government is not likely to advance a more streamlined system. It is clear that more research and investment can build on the sparse knowledge currently available.

In the previous section, I pose questions and ideas of unexplored areas on this topic. California can lead the way in language access by rethinking existing frameworks and making necessary administrative, legislative, and fiscal reforms. The State can draw lessons by examining the current challenges. Each of the challenges discussed in this paper offer an opportunity to improve and rethink the way we frame and address language access. This analysis can help us leverage existing resources or solve some of the simpler obstacles that do not require legislative action.

¹⁹ Indigenous Oaxaca communities in California: An overview. http://www.safsf.org/wp-content/uploads/2015/08/2015_Aug26_IndigenousHealthWeb_Report.pdf

²⁰ Racial Equity Tools: <https://www.racialequitytools.org/resources/Plan/Issues/Language-Justice>

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APPENDIX A

Description of Publications for Meta-Analysis

| Table 2 Publications Reviewed for this Analysis | | | |
|---|--|----------|--|
| Publisher/Journal | Type | Year | Title/Description |
| City/County of San Francisco | County and City Gov | 2021 | 2021 Language Access in San Francisco Summary Report |
| California Government Code | Cal Gov Code 7290 et seq Title 2. [8000 - 22980]. Article 9.5. [11135 - 11139.8] | Multiple | Dymally-Alatorre Discrimination |
| California Election Code | [14000 - 14443], Chapter 3 | 1994 | Election day procedures |
| California Assembly Bills | CA Policy | Various | AB 1531, 3179, 2253, 1376, 305, 2408 |
| California Senate Bills | CA Policy | 2001 | SB 987, SB450 |
| CA Census 2020 Office | State Government | 2019 | Language and Communication Access Plan Language and Communication Access Standards |
| U.S. Department of Justice, Civil Rights Division | Federal Gov | 2000 | Executive Order 13166: Improving Access to Services for Persons with Limited English Proficiency |
| U.S. Department of Justice, Civil Rights Division | Federal Gov. | 2002 | Guidance to Federal Financial Recipients regarding Title VI Prohibition against national origin discrimination affecting limited English proficient persons |
| U.S. Department of Justice, Civil Rights Division | Fed Gov | 2011 | Language Access Assessment and Planning Tool for Federally Conducted and Federally Assisted Programs Department of Justice Language Access Plan Language Access Obligations Under Executive Order 13166. Office of the Attorney General, Eric Holder. Federal Governments Renewed Commitment to Language Access Obligations Under Executive Order 13166 Language Access Assessment and Planning Tool for Federally Conducted and Federally Assisted Programs. Prohibition on Improper Guidance Documents. Office of the Attorney General, Jefferson B. Sessions III. Attorney General Jeff Sessions Rescinds 24 Guidance Documents. Executive Order 13166: Improving Access to Services for Persons with Limited English Proficiency Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons. Advancing Meaningful Access for Limited English Proficient Persons. LEP. |
| U.S. Office of Gov. Accountability | Federal | 2010 | Language Access. Selected Agencies Can Improve Services to Limited English Proficient Persons. |
| U.S. Census Bureau | Federal | Various | Voting Rights Act Amendments of 2006, Determinations Under Section 203 Census Bureau Reports at Least 350 Languages Spoken in U.S. Homes |

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|--|-----------------------------------|------------------|--|
| | | | <p>ACS 5-Year Estimates – Public Use Microdata Sample: Languages other than English spoken at home.</p> <p>State Covid-19 Impact Planning Report: California.</p> <p>Office of Civil Rights and Liberties: Language Access Plan</p> <p>Section 203 Language Provisions of the Voting Rights Act.</p> <p>Language other than English Spoken at Home, percent of persons age 5 years+, 2015-2019.</p> |
| Institute for Local Government | Non-partisan research institution | 2011 | Language Access laws and legal issues: A local official's guide |
| Interagency Language Roundtable | Non-Partisan research institution | n.d. | Interagency language roundtable skill level descriptions for competence in intercultural communication. |
| Migration Policy Institute | Non-Partisan research institution | n.d. | Language Access: Translation and Interpretation Policies and Practices project, created to assist local government administrators, policymakers, and others who are looking for ways to provide high-quality and cost-effective translation and interpretation services. |
| California Department of Healthcare Services | Medical | 2014 | Frequency of Threshold Language Speakers in the Medi-Cal Population by County for December 2013. |
| Roundtable on Health Literacy | Medical | 2016 2018 | <p>Integrating health literacy, cultural competence, and language access services: Workshop summary.</p> <p>A proposed framework for integration of quality performance measures for health literacy, cultural competence, and language access services: Proceedings of a workshop.</p> |
| International Journal of Health Policy and Management | Medical | 2014 | Creating a safe, high-quality healthcare system for all: Meeting the needs of limited English proficient populations; Comment on "Patient safety and healthcare quality: The case for language access" |
| People to People Health Foundation, Inc | Medical | 2020 | Racial/Ethnic Differences in COVID-19 Screening, Hospitalization, and Mortality in Southwest Wisconsin. |
| Rand Corporation and Division of General Internal Medicine and Health Services Research, UCLA | Medical | 2007 | Language Access Services for Latinos with Limited English Proficiency: Lessons Learned from <i>Hablamos Juntos</i> |
| National Health Law Program | Medical | 2008 | The Medical Tongue: U.S. Laws and Policies on Language Access |
| International Journal of Health Policy and Management | Medical | 2014 | Creating a safe, high-quality healthcare system for all: Meeting the needs of limited English proficient populations |
| Division of Internal Medicine, San Francisco General Hospital, UCSF | Medical | 2007 | The legal framework for language access in healthcare settings: Title VI and Beyond |
| Annals of Epidemiology | Medical | 2020 | Risk for COVID-19 infection and death among Latinos in the United States: Examining heterogeneity in transmission dynamics. |
| American Journal of Public Health | Medical | 2013 | Spanish Language Community Based Mental health treatment programs, policy required language assistance programming, and mental health treatment access among Spanish speaking clients |
| Judicial Council of California | Legal | Various | <p>2020 Language Need and Interpreter Use Study</p> <p>Fact Sheet: Language Access</p> <p>California Tribal Communities</p> <p>Trial Courts: Enhancing Language Access Services for Limited-English-Proficiency Court Users</p> <p>Strategic Plan for Language Access in CA: Executive Summary</p> <p>Strategic Plan for Language Access in CA: Full Report.</p> <p>Court Language Access Survey Report: Language Access Services Program Center for Families, Children, and the Courts.</p> |

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|---|------------------------|---------|---|
| California Commission on Access to Justice | Legal | 2015 | Executive Summary: Language Barriers to Justice in California |
| Legal Aid Foundation of Los Angeles | Legal | 2017 | Client Language Access Rights. |
| UC Berkeley Greater Good Magazine | Academic | 2017 | How Diversity Makes Us Smarter, Science Based Insights for a Meaningful Life. |
| California Dept. of Ed | Academic | n.d. | Local Control and Accountability Plan (LCAP) |
| UC Davis Western Center for Agricultural Health and Safety | Academic | 2018 | Not Everyone Speaks Spanish! The Need for Indigenous Language Interpreters in California's Agricultural Workforce. |
| Industry Specific Organizations | Other relevant sources | Various | American Translators Association Certification Commission for Healthcare interpreters The Benefits of the National Board of Certification for Medical Interpreters Programs National Standards of Practice for Interpreters in Health Care |
| Non-Profit | Advocacy | Various | Asian Americans Advancing Justice Census Director Identifies Jurisdictions that Must Provide Language Assistance under Section 203 of Voting Rights Act. Election Officials' Guide to Providing Language Access in Elections. CA Partnership to End Domestic Violence Making Services Accessible to Limited English Proficiency, Deaf & Hard of Hearing DV Survivors. Health Access Providing Care Across Cultural Barriers Center for Participatory Change: Language Justice Curriculum Chinese for Affirmative Action The Language Access Network of San Francisco San Joaquin Valley Health Fund San Joaquin Valley Latino Immigrants: Implications of Survey Findings for Census 2020. The California Endowment and California Rural Legal Assistance: California's Indigenous Farmworkers. National Center for Farmworker Health: Indigenous Agricultural Workers. Refugee Health Technical Assistance Center. (n.d.) Language Access. |
| News Articles | News | Various | The Sacramento Bee Californians speak more than 200 languages. Not everybody gets the COVID facts they need TNW People in Sweden are using Duolingo to learn... Swedish. Health Affairs: Language, Culture, And Medical Tragedy: The Case of Willie Ramirez The Guardian: The power of framing: It's not what you say, it's how you say it. U.S. News: Language Access Issues a Barrier During COVID-19 |

APPENDIX B

The Most Common Laws Governing Language Access in California and the U.S.

- *United States:*
 - *“No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.” Title VI of the Civil Rights Act of 1964*
 - *“Whenever any State or political subdivision [covered by the section] provides registration or voting notices, forms, instructions, assistance, or other materials or information relating to the electoral process, including ballots, it shall provide them in the language of the applicable minority group as well as in the English language.” Section 203 of the Voting Rights Act of 1965*
- *California:*
 - *“No person in the State of California shall, on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, or sexual orientation, be unlawfully denied full and equal access to the benefits of, or be unlawfully subjected to discrimination under, any program or activity that is conducted, operated, or administered by the state or by any state agency, is funded directly by the state, or receives any financial assistance from the state.” California Government Code 11135 (a).*
 - *“All materials explaining services available to the public shall be translated into the non-English languages spoken by a substantial number of the public... A ‘substantial number of non-English speaking people’ are members of a group who either do not speak English or cannot effectively communicate in English because it is not their native language, and who comprise 5 percent or more of the people statewide or any local office or facility of a state agency.” California Government Code 7290-7299.8*
 - *In determining if it is appropriate to provide the election materials in Spanish or other languages, the Secretary of State shall determine the number of residents of voting age in each county and precinct who are members of a single language minority, and who lack sufficient skills in English to vote without assistance. If the number of these residents equals 3 percent or more of the voting-age residents of a particular county or precinct, or if interested citizens or organizations provide the Secretary of State with information that gives the Secretary of State sufficient reason to believe a need for the furnishing of facsimile ballots...” California Election Code 14201, b(1)*

California Language Access Bill Initiatives

- In 2019, AB1531 would have lowered the Dymally-Alatorre Bilingual Services Act to 3% instead of 5% - failed
- In 2018, AB3179 would have lowered the Dymally-Alatorre Bilingual Services Act to 3% instead of 5% - failed
- In 2014, AB2253 would have added requirements that agencies post on their homepage's forms and processes for filing language access complaints and that these be available in languages for which the agency meets the threshold.
- In 2013, AB1376 would have moved the interpreter program to industrial relations and would have expanded the pool of interpreters but was amended prior to passage.
- In 2011, AB305 would have created in addition to the existing 5% threshold a requirement for service provision when the number of speakers of a language in the county in which a state office is located exceeds 1,000 people - Failed
- In 2004, AB2408 would have required state agencies with bilingual staffing deficiencies and filling vacancies to hire bilingual staff unless receiving a waiver. - Vetoed
- In 2001, SB987 would have created in addition to the existing 5% threshold a requirement for service provision when the number of speakers of a language in the county in which a state office is located exceeds 10,000 people. – Vetoed