

February 19, 2002

Merrily Friedlander
Chief, Coordination and Review Section
Civil Rights Division
U.S. Department of Justice
950 Pennsylvania Ave., NW
Washington, DC 20530

Via fax: 202-307-0595

Via email: Christine.Stoneman@usdoj.gov and Sebastian.Aloot@usdoj.gov

**RE: Request for Public Comment: Title VI's Prohibition Against National Origin
Discrimination Affecting Limited English Proficient Persons**

Dear Ms. Friedlander:

Along with the undersigned organizations, the National Health Law Program (NHeLP) submits these comments in response to the Department of Justice (DOJ)'s request for public comment on Title VI's prohibition against national origin discrimination as it affects limited English proficient (LEP) persons [67 Fed. Reg. 2671 (Jan. 18, 2002)]. The undersigned organizations represent a diverse group of advocates who work in the areas of health care, cultural and linguistic access, immigrant rights, and domestic violence.

We support the requirement in DOJ's Title VI document that federal grant recipients take reasonable steps to ensure meaningful access to their services. One of the key factors to take into account is the number and proportion of LEP persons eligible to be served or likely to be affected or encountered by recipients. We agree with DOJ that federal grant recipients must collect and be guided by concrete data concerning the eligible or encountered LEP population in

the recipient's area in order to assess sensibly (i) the linguistic needs of that population; (ii) the frequency of recipient contact with LEP persons; and (iii) any material changes in the LEP population in the recipient's area for monitoring purposes.

In addition, we support the following other key aspects of the DOJ's document: 1) the encouragement that recipients go beyond mere compliance and instead create model programs for LEP access; 2) the need to consider the nature and importance of the service provided; 3) the description of what makes an effective written LEP policy; 4) the insistence upon competent oral interpreters and written translated materials [\[1\]](#) ; 5) the requirement that all staff be trained about the LEP policy; 6) the suggested ways that notice may effectively be provided to LEP persons; and 7) the requirement that recipients monitor and update their LEP policies. We further commend DOJ for the detailed Appendices to this document.

At the same time, while we endorse the document as a whole, **we recommend the following revisions:**

(1) provide more explicit instruction that every LEP person should receive oral language assistance, with a strong preference for in-person interpreters rather than telephone interpreters; with family members, friends or other inmates or detainees only used if it would not compromise the effectiveness of services and as a last resort due to the confidentiality, conflict-of-interest, and accuracy problems they pose; and with minors only used in emergency situations;

[\[2\]](#)

(2) add explicit encouragement that recipients obtain community input for all aspects of their LEP policies; and (3) provide that written notice be given in the LEP person's primary language of the right to receive free language assistance, including competent oral translation of any written materials, free of cost.

In sum, we applaud DOJ's continued commitment to ensuring that LEP persons can participate in and benefit from federally funded programs and activities. We heartily agree with DOJ that the key to meaningful access is accurate, effective communication between the recipient and the LEP beneficiary. DOJ's statements in this regard highlight in an appropriate manner the existing responsibilities of recipients to ensure fair, meaningful access to these federally subsidized services, programs, and activities.

We appreciate the opportunity to submit these comments. If we can be of further assistance, please contact us at (310) 204-6010 or (202) 289-7661.

Sincerely,

Doreena Wong
Staff Attorney
National Health Law Program

The undersigned organizations support the comments submitted by NHeLP:

Asian and Pacific Islander American Health Forum, San Francisco, CA
Asian and Pacific Islander Institute on Domestic Violence, San Francisco, CA
Asian Health Services, Oakland, CA
Asian Law Alliance, San Jose, CA
Asian Pacific American Legal Center, Los Angeles, CA
Association of Asian Pacific Community Health Organizations, Oakland, CA
Bay Area Legal Aid, Contra Costa, Alameda, San Francisco, Marin, San Mateo, and San Jose, CA
California Immigrant Welfare Collaborative, Sacramento, CA
California Pan-Ethnic Health Network, Oakland, CA
California Primary Care Association, Sacramento, CA
California Rural Legal Assistance, Inc., Marysville, CA
Cambridge Health Alliance, Somerville, MA
Center for Community Change, Washington, DC
Center for Health Care Rights, Los Angeles, CA
Center for the Pacific-Asian Family, Los Angeles, CA
Center on Disability and Health, Washington, DC
Central American Resource Center, San Francisco, CA
Central California Legal Services, Fresno and Merced, CA
Chinese for Affirmative Action, San Francisco, CA
Community Legal Services, Inc., Philadelphia, PA
Cross Cultural Health Care Program, Sebastopol, CA
East Palo Alto Community Law Project, East Palo Alto, CA
Florida Legal Services, Miami, FL
Immigrant and Refugee Rights Project, Washington Lawyers' Committee for Civil Rights and Urban Affairs, Washington, D.C.
Inland Counties Legal Services, Riverside, CA
International Institute of San Francisco, San Francisco, California
L.A. Health Care, Los Angeles, CA
Law Center For Families, Oakland, CA
Language Line Services, Monterey, CA
Language Rights Project of the Legal Aid Society - Employment Law Center and ACLU

Foundation of Northern California, San Francisco, CA
Legal Aid Foundation of Los Angeles, Los Angeles, CA
Legal Aid Services of Oregon, Hillsboro, OR
Legal Language Access Project c/o Family Bridges, Inc., Oakland, CA
Massachusetts Immigrant and Refugee Advocacy Coalition, Boston, MA
Maryland Disability Law Center, Baltimore, MD
Michigan Legal Services, Detroit, MI
National Coalition for Asian Pacific American Community Development, Washington, DC
National Council of La Raza, Washington, DC
National Council on Interpreting in Health Care, Madison, WI
National LEP Advocacy Task Force, Portland, MN
National Puerto Rican Coalition, Washington, DC
North Carolina Justice and Community Development Center, Raleigh, NC
Orange County Asian and Pacific Islander Community Alliance, Garden Grove, CA
Pacific Asian Language Services For Health, Los Angeles, CA
Protection & Advocacy, Inc., CA
Public Justice Center, Baltimore, MD
Services, Immigrant Rights, and Education Network, San Jose, CA
South Asian Network, Los Angeles, CA
Summit Health Institute for Research and Education, Inc., Washington, DC
Universal Health Care Action Network, Columbus, OH
Western Center on Law & Poverty, Los Angeles, CA

1. With regard to the terms "interpretation" and "translation," professional interpretation associations use the term "interpretation" to refer to oral language interpretation and "translation" for translation of written materials. We recommend that DOJ adopt this terminology.

2. See *e.g.*, "Translating for Parents Means Growing Up Fast," NY Times (August 26, 2001)