



Dear Friends,

I am writing to let you know that it is with great hope and optimism for the future that I have retired from the post of the Executive Director at the Cross Cultural Health Care Program (CCHCP) and moved into the position of Senior Advisor.

CCHCP has never been stronger in serving the field of cross cultural understanding, language access, equity and inclusion than today. This is the ideal time to bring in new leadership, ideas, and perspectives. So, it is with joy and admiration, that I welcome Paulina Bendaña, our new Executive Director and an excellent team of department directors.

As I review a few of the highlights of my journey with CCHCP, I am reminded of many of you who were on the same path, pushing past barriers, reaching the next milepost, ready for the challenges ahead. We did much of this work together and so my heart remains filled with gratitude for your dedication to equity, social justice and the single purpose of eliminating health disparities.

I started on CCHCP's founding board almost 30 years ago, followed by 25 years of service as the Executive Director. I have had the honor and privilege of a front row seat to history. We started with a grant from the Kellogg Foundation, with a bold mission and the *Voices of the Community*, our first 22-community study on the barriers to health care.

The *Voices* study confirmed the barriers to health care access that we had seen in our health systems while working as medical and court interpreters, which had also motivated us to form the Society of Medical Interpreters (SOMI) in Seattle. From SOMI came our outreach partners for the study. The members of the 22 communities we interviewed were diverse in their origins and included both native born as well as emerging immigrant and refugee populations. In their rich diversity they spoke with one voice to barriers of language, culture, bias both explicit and implicit, and the clear need for social justice in health and human services. To envision and implement changes, our mission had to be bold, our vision very clear and our outreach collaborative.

We found pioneers in different parts of the country who were just as concerned about the quality of services their communities were receiving. Like us, they were initiating programs to improve language access, utilization and outcomes. We all had a long way to go. One of the first steps was to unite our efforts in professionalizing medical interpreters by defining roles, setting standards of practice, establishing training and finally establishing the need for national certification.

CCHCP brought together the trailblazers across the nation and the globe. The first meeting was held in Seattle during June 1994, funded by CCHCP, and cosponsored by SOMI. There were almost 30 attendees who came from across the nation, the Netherlands, Canada and a good number from the local interpreting community. Difficult conversations happened, new understandings emerged, and quiet progress came about. The group was named 'The National Working Group' which had four follow up meetings over the next four years. CCHCP was able to procure funds for the meetings from our original grantor, Kellogg.

Innovative programs emerged across the country and at CCHCP from the efforts of the national working group. The National Council on Interpreting in Health Care (NCIHC) was created, The Massachusetts Medical Interpreters Association (MMIA) morphed into the International Medical Interpreters

Association (IMIA) and new statewide interpreter organizations were founded to support the needs of the growing profession of medical interpreting.

CCHCP's Bridging the Gap (BTG) Medical Interpreter training program, created by a team of dedicated staff and an advisory board, grew to become recognized nationally and internationally as a standard training program for medical interpreters. Over two decades, CCHCP's Equity and Inclusion training, assessment and consulting services program, has been training health and human service professionals to provide equitable patient centered services. Our systems and community needs assessment program pinpoint the gaps in service and highlights recommendations and remedies. CCHCP's Patient Guide training program provides a remarkable career ladder for experienced interpreters, training them to provide patient guidance and navigation throughout the continuum of care for both Limited English Proficient (LEP) and English speaking patients with low health literacy. CCHCP's growing publication department continues timely resource support for our network of licensed agencies teaching CCHCP's training curricula. Our medical glossaries in 27 languages and research documents are all universally available from our online store.

I am thankful for all that we have accomplished together with our network of licensed agencies, partners in health care systems, Federal programs, and state and nationwide communities. Together we have built a phenomenal organization and a team that represents and cares deeply about the communities we serve. Your living words of encouragement; your testimonials on successful replication of our programs in your community; your constructive recommendations, and your unfailing support, have always been my strength.

Friends, it has been my privilege to work with each of you in fulfilling CCHCP's mission to serve as a bridge between communities and health care institutions to advance access to quality health care that is culturally and linguistically appropriate. The mission has never waned and in its steadiness, our partnership will continue to grow in the service of the most vulnerable among us.

In closing, please allow me to share a gift of wisdom from Maya Angelou, that has been my guide in life and living.



With much love and gratitude, my very best is with you, always. Please stay connected.

Ira

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