University of Vermont Health

Golisano Children's Hospital

Testimony for S.243

February 4, 2026

Dear Rep. Lori Houghton,

My name is Andrea Green. I am an outpatient pediatrician, the Director of the Pediatric New American Program at Galisano Children's Hospital at the University of Vermont (UVM) and a Professor of Pediatrics at the Larner College of Medicine at UVM. I have cared for children in immigrant families in Vermont for the past 22 years. I am a national expert on pediatric immigrant health and the Past President of the American Academy of Pediatrics Council on Community Pediatrics. I am submitting testimony today in very strong support of S.243.

Access to accurate health information saves lives—but only when people can understand it. Approximately 5.5-6% of Vermonters speak a language other than English in their home. Although we are a small state, Vermont ranks 6th per capita in refugee resettlement and our governor has recognized the important role immigrants play in our Vermont economy. When health information is available in only one language and only in written format, it creates barriers that lead to confusion, delayed care, medication errors, and preventable illness. Multilingual video health information is not a luxury or a courtesy—it is a public health necessity.

When patients receive information in a language they understand, they are more likely to follow medical instructions, attend follow-up appointments, manage chronic conditions effectively, and seek care early instead of waiting until emergencies arise. Clear communication improves outcomes, reduces hospital readmissions, and lowers overall healthcare costs. In contrast, language barriers increase strain on emergency services and deepen existing health inequities.

Multilingual health information also builds trust. Communities are more likely to engage with healthcare systems when they feel seen, respected, and included. Providing translated materials, interpretation services, and culturally appropriate messaging sends a powerful message: that everyone deserves the same chance to be healthy, regardless of the language they speak.

This issue becomes especially urgent during public health emergencies. We saw during recent crises of COVID or the VT floods, that delays or gaps in translated information can leave entire communities vulnerable. Timely, accurate, multilingual communication ensures that critical guidance—about vaccines, treatments, prevention, and available services—reaches everyone at the same time.

Investing in multilingual health information is an investment in equity, safety, and effectiveness. It strengthens our healthcare system for everyone, not just those who speak English. Ensuring language access is one of the most practical and impactful steps we can take to improve public health outcomes and uphold the principle that healthcare should be accessible to all.

Furthermore, video materials are especially important as they are accessible for everyone regardless of literacy level or language spoken. Around 46% of adult Vermonters struggle with intermediate to low health literacy which means that almost half of Vermonters have difficulties understanding complex, written health information. While we are emphasizing multilingual materials, it is important to recognize that VLJPs videos are in English as well as other languages. When information is accessible in plain

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English everyone benefits. Videos eliminate the need to read in any language and can be viewed again and again by everyone regardless of their preferred language.

As a member of multiple national immigrant and refugee health organizations, I consistently hear colleagues across the country express strong admiration for the quality and effectiveness of VLJP's materials. VLJP's reach is international, and their work is grounded in collaboration. Every script is rigorously vetted by medical professionals and content experts, ensuring accuracy, cultural relevance, and trust.

During the COVID-19 pandemic, I volunteered with VLJP to help produce multilingual videos in real time so that communities could receive life-saving public health information without delay. I have since secured grant funding to partner with VLJP to create a multilingual video explaining "What Is Autism," and I am currently working with them on a video that demonstrates proper use of a metered-dose inhaler for asthma management.

These resources simply do not exist elsewhere. They fill a critical gap in patient education, particularly for families with limited English proficiency, and they are essential tools for improving health outcomes while reducing preventable emergency visits and overall health care costs in our state. In our clinical setting, we actively encourage families to enroll in iFY so they can access VLJP's trusted library of health information in the language they understand best.

In summary, multilingual health related videos improve health and reduce healthcare costs by providing timely, relevant and important health information for all Vermonters by addressing health literacy barriers.

Thank you for recognizing the importance of this issue and for taking steps to support inclusive, language-accessible healthcare.

Sincerely,

Andrea Green, MD.

Andrea E. Green, MDCM, FAAP
Professor of Pediatrics
Director Pediatric Global Health
Larner College of Medicine at the University of Vermont
Director Pediatric New American Program
Pediatric Primary Care
Galisano Children's Hospital, University of Vermont Health
1 South Prospect St, Burlington, VT
Andrea.green@uvmhealth.org
Ph. (802) 847-4696
F (802) 847-4612