

We Make the Road by Walking: CHWs' Stories of Utilizing Roles to Promote the Health of Their Communities

July 28, 2021

Unity Conference

Breakout 1: Workshop D

National Association of Community Health Worker (NACHW)

Cultural Mediation among Individuals, Communities, and Health and Social Systems



Transforming and Expanding Access to Mental Health in Urban Pediatrics for Children (TEAM-UP for Children, TEAM UP CHWs)

Autism Spectrum Disorders Mini Workbook by Yaminette Diaz-Linhart.

Boston Medical Center & Lowell Community Health Center
Funded by the Smith Family Foundation



Niem Nay-Kret
Community Health Worker
Lowell Community Health Center (LCHC)
www.lchealth.org

REACH LoWELL Program - Made possible with funding from
the Centers for Disease Control and Prevention



Cultural Mediation among individual, communities and health and social systems

Health Care Services & Social Services Systems	CHWs	Individuals & Communities
<ul style="list-style-type: none">• Laws & Regulations• Policies & procedures• Professional practices & productivity• Performance• Processes & guidelines• Criteria & requirements• Health Insurance• Evaluation• Outcome	<ul style="list-style-type: none">• Bring about a beneficial interaction between individual, family, and their health care services providers• What will help individual has better health outcome?• Professional ideas vs individual practices• Health ideas vs individual practices• SDOH – food, employment status, housing, transportation, etc.	<ul style="list-style-type: none">• Rituals & Routines• Customs, Traditions, & Practices• Patient, Client, Family, & extended family• Diverse communities• Local & regional services• States, National & Global
Overarching - Structure to resources, ability to access resources, information received, individual decision making, beliefs, individual roles, health expectations & competencies, language access (tech, methods, languages, etc.)		



“Cultural -- relating to the ideas, customs, and social behavior of a society” Google

How can one become a good “Cultural Mediation among Individuals, Communities, and Health and Social Systems”?

- Health Care Providers
- Health Care Specialists
- Health Insurance
- Parents/Guardian/Family
- Autism Spectrum Disorders (ASDs) are a group of developmental disabilities that can cause significant social, communication and behavioral challenges (mild -severe)
- Pre-diagnosis, diagnosis, treatment, specialists
- School

Blessed strings



Establishing a Patient Care Navigation System



NACHW, Unity Conference, July 28, 2021

S. Kim Bush, MPA, CHW-Instructor, CHW



UTHealth

The University of Texas
Health Science Center at Tyler

CHW Roles & Responsibilities

- Medication Assistance
 - Extra Help for Medicare recipients
- Insurance Assistance
 - Health Insurance Marketplace
 - Your Texas Benefits
 - TANF
 - SNAP
- Medicaid, CHIP, and/or Medicare Savings Program Application Assistance
- Disability Assistance
 - Social Security and/or Supplemental Security Income (SSI)
- DME Assistance
- Assistance with finding medical home and referrals
- Health Education & Literacy
 - Individual and/or group classes/workshops



UTHealth

The University of Texas
Health Science Center at Tyler

CHW Roles & Responsibilities

- Conduct Home Visits to uncover emotional, social, environmental, or other barriers to care
Chronic Disease/High Risk patient assessment for health needs and barriers to care (completed using EMR template)
- Pre-Visit Planning Calls
 - Remind Clients of Health Maintenance Items
 - Collect information regarding ER visits or recent hospital admissions
 - Assistance with transportation
- Community Outreach



UTHealth

The University of Texas
Health Science Center at Tyler

Lessons Learned

- Communication is Critical
- CHW Scope of Practice
- Continued Mentoring and Support
- Selection Process
- Cultural Sensitivity
- Silos vs. Teams
- Stakeholder Education

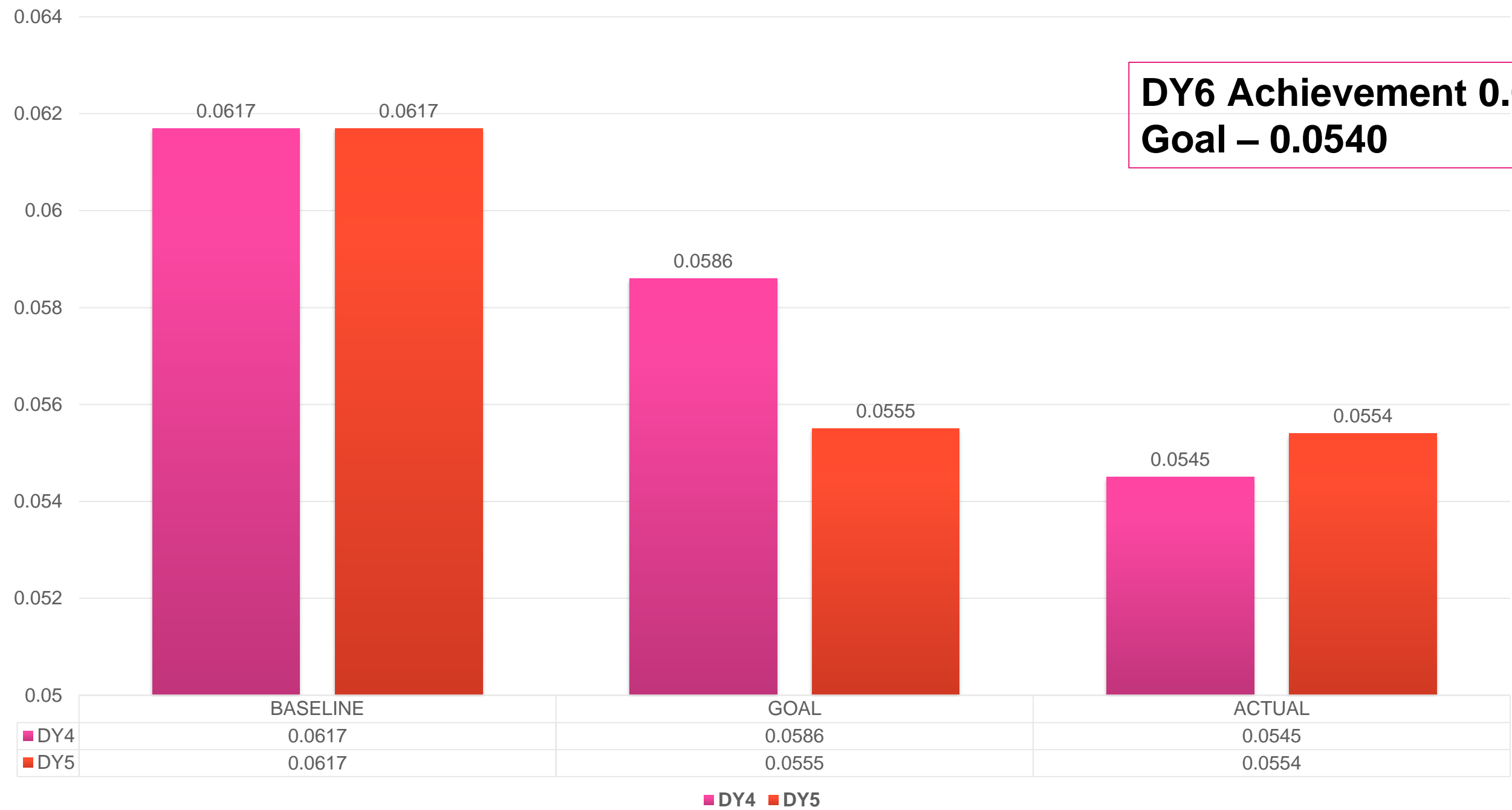


UTHealth

The University of Texas
Health Science Center at Tyler

Example: ED Outcomes

Reduce ACSC ED Visits



DY6 Achievement 0.0522
Goal – 0.0540



UTHealth
The University of Texas
Health Science Center at Tyler

Questions & Answers

Thank You!



UTHealth

The University of Texas
Health Science Center at Tyler

Community Health Representatives (CHRs)



**Direct Service Providers in
Native American Communities**

“When the Pavement Ends, the Dirt Road to Patient Care Begins”



- CHRs are **frontline public health** workers who are **trusted members** of the community with a close understanding of the **community**, language, and traditions.
- They serve as a **link** between **clinical settings** and the **community** to facilitate access to services and improve the quality of cultural service delivery
- CHRs aka as **Community Health Representatives**, sometimes “**Community hell raisers**” when they encounter health inequity.

Primary Service Scope of CHRs



- Health Education/Counseling
- Monitor Client/Community
- Case Management/Coordination
- Case Finding/**Screening**
- Non-Emergency Care
- Health Promotion/ Disease Prevention
- Translation/Interpretation
- Transportation/Delivery

CHRs engaging with community in the Home and on Zoom



Stories from the field:



In the snowy area of the Chilchiltah, Navajo community, the CHR walked on foot for about a mile up to the Grandma's home, and she found the Grandma home, alone. The CHR was able to bring wood into the home and start a fire for the grandma. Grandma was so thankful; she stated that she would not have known what to do if she spent another night without wood and her medications. Grandma stated she felt better and was able to warm up, and the CHR assisted Grandma to warm some food.

She also fed grandma's dogs and cats.



A day in the life of a **CHR**

- **New Mexico Pueblo community** On a raining Friday afternoon in ,, a 69-year-old female community resident came to our CHR office to get assistance and help understanding a letter regarding her visit to the Dr's office. I listen to her concerns, issues, and questions. Knowing her, level of understanding, **"I wanted to make sure she understood and proceeded to read the letter out loud to the patient and explained the purpose of the letter, translated in our native language KERES. KERES is our spoken language, which most of our Elders understand either by showing visuals or hand gestures."**

Conducting Outreach: Diabetes Outreach in Rural North Georgia

Gabriela Boscán, MPH
Senior Director of Program Services and Development
National Rural Health Association



Verizon Global Corporate Citizenship Partnership

Goal

To demonstrate how the use of handheld technology and access to education and CHWs can improve Type 2 Diabetes disease management and outcomes in patients living in rural Murray County, Georgia.

- **Group 1 – No Intervention**
 - pre/post knowledge test
 - a1c level readings at month 1, 6 and 12
- **Group 2 – CHW Education Intervention**
 - pre/post knowledge test
 - a1c level readings at month 1, 6 and 12
 - educational trainings
 - access to local CHWs
- **Group 3 – Technology & CHW Education Intervention**
 - pre/post knowledge test
 - a1c level readings at month 1, 6 and 12
 - educational trainings
 - access to local CHWs
 - physical activity tracker through Fitbit
 - daily glucose readers available through tablet
 - CHW video conference access

Verizon Global Corporate Citizenship Partnership

Phase 1 –

Advisory Board Meeting – February 2015 in Washington DC
IRB approval – still pending (submitted in March 2015)
CHW Curriculum development – April 2015
CHW Education Training – May 11 & 12, 2015
Patient recruitment – pending IRB approval

Phase 2 –

Patient recruitment & enrollment
Pre/post knowledge test
a1c reading at month 1, 6 and 12
Physical activity and glucose reading tracking for Group 3
every 3 months
Continuing education for patients in Group 2 and 3

Phase 3 –

Focus Groups
Final collection of data for final report
Final Report

Sustainability

No new technology
Tracking apps

Verizon Global Corporate Citizenship Partnership

Reflections and Lessons Learned

Long study and low attrition

Missing health data/medical records

Materials available in multiple languages

Knowledge transfer between groups

Technology

Quotes from our Focus Groups

“it’s not like you are a burden to them, they answer everything you ask.... It’s been amazing for me.”

“Yeah. It is different when it’s on paper than when you’re working with actual people”

“Yeah. If they have a need, then obviously our heads – even your hearts – it’s like, ‘Hey, I’m gonna help you. Even though I know I’m supposed to leave you alone, it’s just: I’m gonna help you.’”

Acknowledgements

Partners

SC Rural Health Research Center
North Dakota State University
Texas A&M School of Public Health
NWGA Healthcare Partnership
Appalachian Regional Commission

Chapter Authors

Katherine Nimmons, Gregory J. Dent, Teresa Mendez, Amy Elizondo, Gabriela Boscan,
David Secor, Janice Probst, and Myriam Torres

Contact Information

Gabriela Boscán, MPH
Senior Director of Program Services and Development
National Rural Health Association
gboscan@nrharural.org