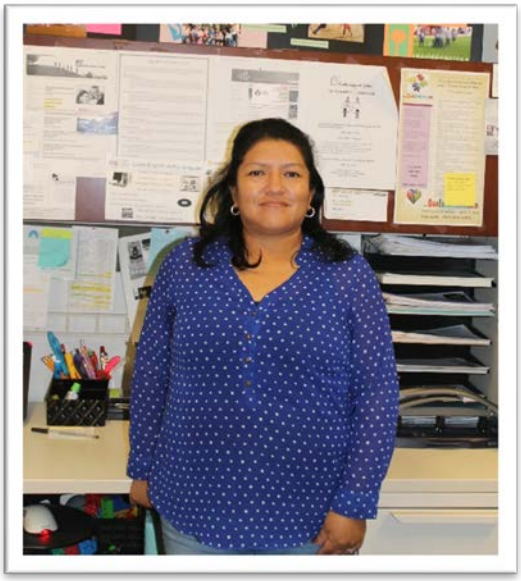
Understanding Community Health Workers



Raquel defines a CHW as “someone who works out in the community; who understands the challenges of their community and who is there to listen, help, refer and be present for their community members.”

She became a CHW after first receiving assistance from a CHW personally. In 2010, Raquel needed support in finding a job, as well as helping enroll her children in public programs they were eligible for. Raquel connected with a woman who helped her access affordable food, housing, and health care, and additionally helped her find a job that matched her interests. This experience impacted Raquel and her family; she felt like this woman not only helped her, but really understood her situation. This allowed for a trusting relationship that enriched Raquel’s life and pushed her to long term success.

Raquel initially began working with AmeriCorps, but knew after her impactful experience with a CHW, she wanted to help others in the same way. She has been working as a CHW ever since, and currently works at Holy Cross Ministries and South Main Clinic.

Direct Impact -

“I was working with a mother whose daughter just went to prison. She had to take care of the daughter’s children while she was in prison. I was able to help the woman connect with resources for the children and to provide the social support and friendship for her dealing with her daughter being in prison. I was present for all stages of the process, from when she was feeling afraid when she found out her daughter was going to prison, to when she started to feel supported after her daughter had gone to prison. I was able to help the entire family on a number of levels, **not just the one woman**.” - Raquel

Improving Efficiency and Eliminating Barriers

Oreta M. Tupola was born in Honolulu, Hawaii. With the help of Community Health Workers in the state of Hawaii, Oreta graduated with a Master's Degree in Social Work while she raised her young family. Oreta moved to Utah in 2016 after working in Hawaii for many years as a CHW.

Oreta currently works as a CHW in both the Maliheh Free Clinic and the University of Utah South Main Clinic. Oreta's work focuses on people from the Pacific Islands who have diabetes or are prediabetic and are not accessing healthcare through a traditional provider. Over the many years that Oreta has been working as a CHW she sees how CHWs "fill the gap."

Oretal knows that sometimes health care professionals are so busy doing their jobs that things can get missed. CHWs are an extension of various health professionals and fill the gaps that occur between time spent in the hospital, clinic, and home. CHWs are oftentimes from communities that they work within. They understand the issues and barriers that people face and they know how to link people to the necessary resources to help.

Oreta credits her success to the CHWs that helped her as a young mother trying to get an education. That experience pushed her into this line of work and helps make her more effective.

"Typically, unless it is life threatening, community members do not attend routine monthly or annual check ups and will access the Emergency Department for care. The focus of this work is to connect Pacific Islander's to a primary care provider and provide education so the patient will return to that same provider for all of their healthcare needs." – Oreta

➡ **Oreta's goal is <u>prevention</u>**

A Day in the Life

Esperanza has been a CHW for almost twenty years. She has a strong passion for the work and currently works at the South Main Clinic and Holy Cross Ministries.

"A Community Health Worker is someone out in the community; someone who is ready for any possible situation that their community member is going through and who is able to be present with their client. It is our job to listen, to refer, to be a face in the community. We help educate and connect our clients to resources. We cannot solve all the issues, and we do not have all the answers, but we can be in the moment with our clients and provide support to make it easier. **My door is always open.**" - Esperanza

"I received a referral from a doctor that a patient needed a home visit. The child was sick, and when I arrived I also realized that there was emotional and physical violence in the house and the mother and child were suffering. The mother had severe depression due to the domestic violence. I allowed her to call me whenever she needed and helped her work through some of her problems. She later told me how much that had meant to her. I was able to be there for her during the most critical moments, and I was able to help the child find safety, too." - Esperanza

As a CHW, Esperanza provides prenatal classes to pregnant women and runs weekly health classes. She also run classes parenting classes and helps families connect and communicate better. She provides support to people with a range of issues, including diabetes, domestic violence, child abuse, depression, immigration, and more.

"Informing someone is not the same as training/building capacity within someone. We do not just inform, we help build capacity.

Community Health Workers see the intricacies of culture and how that impacts health. They don't focus solely on health like other providers. They specialize in the big picture and what is happening on the ground.

Meeting People Where They Are

Elizabeth Izampuye is a student at the University of Utah and is majoring in Health Society and Policy. Elizabeth heard about Connect 2 Health through a University of Utah internship program and now works for the University of Utah Health Plans as a CHW.

Elizabeth's passion is public health and by working as a CHW she can better "help individuals by research and patient care."

- CHWS are a **liason** between the medical provider and patient. If a patient has a specific concern, the CHW can provide resources beyond their immediate health concern.
- They are a friendly face and support system for patients. CHW's educate patients **before they get sick.**
- Culture competency, tolerance and empathy are key parts of a CHW's work. They are sensititive to client's beliefs and work to **meet people where they are at.**

What Makes A CHW Effective?

Learning about the health insurance system is complicated and really understanding it is a challenge for many. Health policy changes often and so Elizabeth tries hard to stay up to date on her patients' options so she can provide them with the most current information.

Elizabeth sees many patients who experience confusion in the health care system. She said, "*They may be eligible for health insurance at one time then not eligible the next time. Dealing with patients with certain disabilities is a challenge.*"

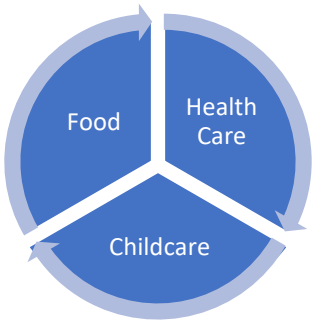
Elizabeth notes the important role CHWS have in disseminating information to patients in a variety of languages. CHWs represent a vast amount of cultures, and languages. Elizabeth priorizes educating her patients on always requesting an interpreter if needed**. This enables long term success for her clients.**

"Public Health is so big. It is important to follow-up with patients to see if they are satisfied or dissatisfied with the health care they received, and assist if they're not happy. We give patients a resource to voice concerns. I work with patients often that are happy when I follow up with them; they appreciate the personal phone call."

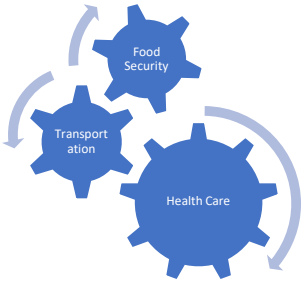
CHW's in Action

Addressing the Social Determinants of Health

- A single mother with behavioral health diagnoses was referred to a CHW for help accessing dental care. The CHW quickly recognized that the patient had other needs such as food insecurity, childcare, and problems with medication management. The patient was not feeling well on her prescribed medication, and the CHW encouraged her to inform her provider so they could adjust as needed. The patient successfully advocated for herself by communicating openly with her provider about her negative side effects, which subsided once they switched her prescription. The CHW connected the patient with a resource that offers free dental X-rays and cleaning, a food bank, and a childcare resource for her son with special needs. By identifying multiple social determinants of health, the CHW was able to address the patient as a whole person and support her as she became more self-sufficient.



- A middle-aged female was referred to a CHW for help care coordination. The patient needed assistance with pharmacy services and food insecurity. The patient has multiple chronic conditions which limit her mobility and access to transportation. She struggles to navigate the healthcare system and thoroughly communicate with her providers. The CHW encouraged the patient to convey her needs to her provider and helped connect her with a specialist. The CHW was able to transfer the patient's prescriptions to a mail-order pharmacy service so her medications are delivered to her house each month and helped her get connected to multiple food pantries. As a result of the CHW intervention, the patient feels empowered to share her concerns with her provider and has fewer lapses in medication adherence.



Addressing Effective Utilization of Health Care

- A middle-aged male patient who struggles with depression, anxiety, and diabetes was referred to a CHW for help with scheduling and adhering to medical appointments. Another challenge this patient experiences is frequent falls, resulting from insufficient footwear, for which he often seeks care at the emergency department (ED). The CHW listened to the patient's concerns, helped him establish care with mental health and primary care providers, and educated the patient on propped ED use. The CHW was able to obtain a pair of diabetic shoes to help with stability. The patient now feels equipped with tools to stay healthy and schedule appointments without overutilizing the ED.

CHW's Help Open Doors and Create Bridges to Resources

- A pregnant woman in her third trimester was referred to a CHW. The client is excited about her first pregnancy but stressed about finances as her family is solely relying on her husband's income at this time. The CHW met with the couple to identify needs and create a plan to prepare for the baby. On the same day as the intake, the CHW assisted them as they applied for WIC and visited a couple local organizations. One included a pregnancy resource center and the other was a nonprofit which provides supportive services for children and families. The CHW also connected the client with several housing resources and contacted the client's church, which may be able to support her with rental assistance and food. As the client nears her due date, the goal is for her and her husband to become more self-sufficient and able to provide an environment in which their baby can thrive.

- A female client was referred to a CHW for assistance with transportation and care coordination. She struggles with keeping her medications organized, attending medical appointments, and understanding how to navigate the healthcare system. It became clear that the client was experiencing frequent delusions and hallucinations. The client was resistant to suggestions to pursue mental health services. However, after developing trust with the CHW she agreed to meet with a case manager and nurse within her hospital system's community care team. The CHW also connected the client to a primary care provider, an OBGYN, and plans to collaborate with her care team to further encourage engagement in mental health services.

CHWs are an Investment into Prevention

Isabella Lesa works for the University of Utah Health Plan as a CHW. She works primarily with the Wellness Bus, a bus that travels throughout various communities and provides free screenings for diabetes, blood pressure, blood glucose, and cholesterol. Isabella was in school majoring in exercise science and did an internship that made her intersted in this work. She wants to help her community have equal access to health care and good health education.

Isabella's Goals:

- To help Samoan people to get health education to improve their lives
- Prevention! She goes into underserved communites to help and meet people to make a difference in preventive health.
- Creating a bridge between health care professionals and regular people

COMMUNITY HEALTH WORKERS

Who Are CHWs?	• *Someone who works with people in the community to educate and assist them with health care issues and needed resouces.*
What are skills that make CHWs effective?	• *Knowing the community that you are serving. Also knowing what their needs are to them in an appropriate way.*
Why are CHWs important to Utah communities?	• *CHWs are a bridge between health care professionals and regualr people in community that need help. CHW can assist people that need help that is approporate to their community. CHWs do not wear doctor coats, they look like they people in the community they are serving.*

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