Community Health Workers (CHWs): Opportunities for Collaboration

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Objectives for Talk

• Describe community health workers (CHWs) and what they do
• Understand similarities and differences between CHWs and mobility managers
• Identify practical areas for collaboration
A CHW is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served.

This trusting relationship enables a CHW to serve as a liaison/link/intermediary between health/social services and the community.

A CHW builds individual and community capacity by increasing health knowledge and self-sufficiency.

Source: American Public Health Association CHW Section
CHWs Address Midstream/Upstream Factors and Social Drivers of Health

Source: Office of the Assistant Secretary for Planning and Evaluation, HHS
History and Evolution of the CHW Profession

Farmer scholars & Barefoot doctors—China 1920s

Community health representatives (tribal) & promotores de salud (migrant farm workers)—1960s

First formal recognition of “community workers” as care team members—WHO, 1975
The “Secret Sauce” of CHWs

- Expertise is based on shared lived experience and (often) culture and language with the population served.
- Rely on relationships and trust more than on clinical expertise.
- Relate to community members as peers rather than purely as clients.
- Do not provide clinical care and typically do not hold another professional license.
- Can achieve results that other health professionals can’t (or won’t).
CHWs are Known by Many Names and Titles

Promotores de salud
Outreach workers
Lay health workers
Community health advisors
Navigators
Youth workers
Peer educators
Community health representatives
Public health aides
Community health educators
Home assessment workers
Peer leaders
And dozens more...
Who are CHWs?

• Disproportionately women of color (Source: CHW National Workforce Study, 2007)
• Most have high school diploma/GED, but not required in most states
• Work in varied settings (Source: NACHW membership data)
  ▪ 62.5% community-based organizations
  ▪ 12.5% hospitals and health systems
  ▪ 11% federally qualified health centers
  ▪ 14.5% other (e.g., health departments, universities, behavioral health)
Similarities and Differences between CHWs and Mobility Managers
The CHW Core Consensus (C3) Project, 2014–2018

Source: CHW Core Consensus (C3) Project
C3 Project Report (Phase 1 and 2), 2016

The Community Health Worker Core Consensus (C3) Project
A Report of the C3 Project: Phase 1 and 2

Together Leaning
Toward the Sky
10 Core CHW Roles per C3 Project

1. Cultural mediation among individuals, communities, and health and social service systems
2. Providing culturally appropriate health education and information
3. Care coordination, case management, and system navigation
4. Providing coaching and social support
5. Advocating for individuals and communities
6. Building individual and community capacity
7. Providing direct service
8. Implementing individual and community assessments
9. Conducting outreach
10. Participating in evaluation and research
10 Core CHW Roles per C3 Project—Unique to CHWs

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How Can Mobility Managers Collaborate with CHWs?
CHW Resources

- National Association of Community Health Workers (NACHW)
  - "CHW Networks and Training Programs", a listing of state/local CHW associations and other notable CHW organizations
- American Public Health Association, CHW Section
TRAINING—Take a CHW training

- CHW core training (60-120+ hours) plus hands-on practicum
  - Cost depends on vendor; Rarely, available for free
- CHW specialized training
  - Typically free; Short, online modules relevant for specific CHW jobs and duties
  - Can be used for CHW Continuing Education credits
  - Many curated catalogs of specialized CHW trainings
REFERRALS—Offer to make a “Warm Handoff” with a CHW

• When making referrals for non-transportation needs, inquire if a CHW will be involved with the care plan
• If so, offer to meet with the CHW to describe in more detail the clients’ needs, social supports, and/or other contextual factors
STAKEHOLDER ENGAGEMENT—Invite CHWs to your community meetings and events

- Ad hoc opportunities to promote “interprofessional exchange”
- Build interprofessional familiarity one relationship at a time
- Together, mobility managers and CHWs can strengthen shared community connections
Other Collaboration Ideas

• Recruitment
  ▪ Cross-promote job announcements for mobility managers and CHWs

• Funding
  ▪ If allowable, use federal CHW grants as the local 20% match for a mobility manager position

• Solidarity among other lived-experience professions
  ▪ E.g., Peer support specialists from mental health and substance use

  ✓ “Centering Voices of Lived and Living Experience”—Recommendations from the Certified Community Behavioral Health Centers (CCBHC) Living Experience Advisory Council, May 2023 (available upon request)
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