





# Community Health Worker Conference 2019



***“Women of Color are EPIC!”  
Equitable, Passionate, Invested and Collaborative!***

***Yes, we’ve left some gifts  
for you on your chairs!***

Photo by Eye for Ebony, @eyeforebony, <https://unsplash.com/photos/vYpbBtkDhNE>







*The Historical Legacy*

*of Women of Color*

*Doing **EPIC** Work*

*To Nurture and Heal*

*Their Communities*

# **Women of Color Community Health Workers Are EPIC!**

**ESSENTIAL**

**PREPARED**

**INSIGHTFUL**

**CULTURALLY HUMBLE**

# Who Are Community Health Workers?

- Community Health Representative
- Health Services Program Director, Manager, or Supervisor
- Care Coordinator
- Community Resource Specialist
- Promotora de Salud
- Outreach Coordinator
- Case Manager
- Community Connector
- Community Health Worker
- Community Health Advisor
- Client Navigator
- Client Advocate
- And many more!





# Community Health Workers In Washington State

Washington State defines Community Health Care Workers as:

*“Community Health Workers (CHWs) help people understand the health care system and connect people to health services such as preventive care screenings, behavioral health support and chronic disease self-management.*

*They also provide health education and teach people about self-care. As trusted members of their communities, CHWs are essential to Washington State’s goals to provide whole person care and help people live longer, healthier lives within healthy families and communities.”*

# Community Health Workers In Washington State:

*A community health worker 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 the worker to serve as a liaison, link, or intermediary between health and social service systems and the community to support access to services and improve the quality and cultural competence of service delivery.*

# Community Health Workers In Washington State

## Vital to the Health of Washington Citizens

*Based on their life experiences and roles as health influencers within their communities, Community Health Workers are vital to achieving the goals of Healthier Washington within the rapidly changing environment of health reform.*

*This assumption is rooted in research, which demonstrates that CHWs can improve health outcomes and the quality of care while achieving significant cost savings, particularly when working with underserved populations.*

# The Role of Community Health Workers

Community Health Workers' **unique capabilities** include:

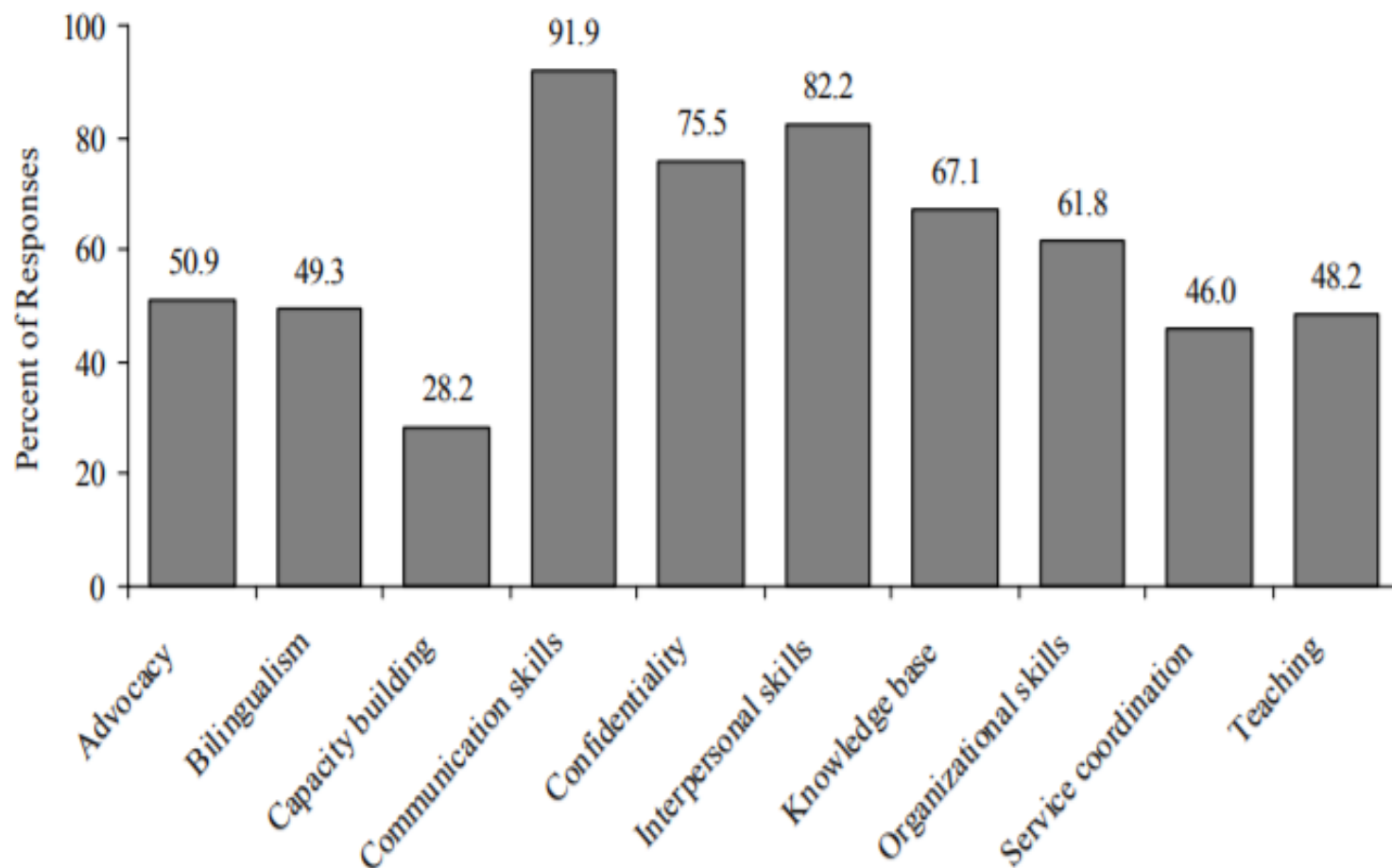
- 1) having strong relationships and trust with communities of color, underserved, and low income populations,
- 2) the ability to facilitate valuable communication between providers and patients or community members and decision-makers,
- 3) skill at addressing the social determinants of health at the individual and community level.

# The Ideal Community Health Worker

*Community Health Workers (CHWs) are frontline public health workers who apply their unique understanding of the experiences, language, and culture of the populations they serve in order to carry out some of the following roles:*

- **Make sure people get access to health and social services they need through service coordination, referral, and follow-up.**
- **Provide informal counseling, coaching, or social support to people.**
- **Provide culturally appropriate health education and information.**
- **Provide basic services and screening tests (such as support with blood pressure monitoring).**
- **Provide a cultural link between organizations and communities.**
- **Advocate for the needs and perspectives of the community members served.**
- **Help community members increase health knowledge and be self-sufficient.**

**Figure 4.1 CHW Skills Required by Employers at Hiring**



Source: CHW National Employer Inventory (CHW/NEI) (2006), N=570

## **The 2016 Community Health Worker Task Force Recommendations Report for Healthier Washington found the following qualities to be ideal in people employed as CHWS:**

*CHW Qualities. Research suggests a critical component of effective CHW programs and initiatives is hiring people who have the qualities or attributes that align with their roles and responsibilities. To that end the task force recommends Healthier Washington, the Accountable Communities of Health and partner agencies communicate and disseminate CHW qualities or attributes as foundational for CHWs to succeed including:*

- ***Connected to community***
  - ***Culturally sensitive, able to work with diverse communities***
  - ***Empathic, caring, compassionate and humble***
  - ***Persistent, creative and resourceful***
  - ***Open-minded/non-judgmental***
  - ***Honest, respectful, patient, realistic***
  - ***Friendly, engaging, sociable***
  - ***Dependable, responsible, reliable***

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- Advocate for the needs and perspectives of the community members served.
- Help community members increase health knowledge and be self-sufficient.



# **Community Health Workers Are A Key Presence In Their Communities**

***“CHWs are informal counselors ... and [help] address the social barriers to care, such as access to healthy foods; transportation to appointments; and connecting to social or environmental services that help people with day-to-day survival.”***

— Dwyan Monroe, responsible for community health worker initiatives for Institute for Public Health Innovation, a Washington, D.C. nonprofit, quoted in “The New Front Line of Public Health”, by Laura Bogart for CityLab, December 21, 2016, <https://www.citylab.com/life/2016/12/the-new-front-line-of-public-health/511205/>

# Community Health Work Is A Fast Growing Field

*In 2009, the United States U.S. Department of Labor gave formal designation to the profession of Community Health Care Workers.*

Job growth within the field is expected to be 16%, which is considered higher than average, from 2016 to 2026.

The median annual wage for community health workers was \$38,370 in May 2017.



U.S. News and World Report has ranked the job of Community Health Workers as 21st on its list of 26 Best Social Services Jobs 2019.

# Health Care As A Public Health Concern Is Increasing the Need for CHWs

*“It’s a job that dovetails with the health care industry’s increasing emphasis on public health, a shift promoted in no small part by the Affordable Care Act (ACA). The ACA has provisions that promote preventive care and better health access and quality, and seek to alleviate disparities, particularly within urban and rural populations.”*

“The New Front Line of Public Health”, by Laura Bogart for CityLab, December 21, 2016,  
[. https://www.citylab.com/life/2016/12/the-new-front-line-of-public-health/511205/](https://www.citylab.com/life/2016/12/the-new-front-line-of-public-health/511205/)

# **Most Community Health Workers Are . . . . Women**

The Bureau of Labor Statistics analysis shows that community health work jobs, which became its own category in 2009, are held overwhelmingly by women.

**Occupational Outlook Handbook  
Community and Social Services**

**Health Educators and Community  
Health Workers**

<https://www.bls.gov/OOH/community-and-social-service/health-educators.htm>

# **Women of Color Community Health Workers Are EPIC!**

**EQUITABLE**

**PASSIONATE**

**INVESTED**

**COLLABORATIVE**

# **Throughout History, Women of Color Have Always Been Community Health Workers**

For millennia, many communities of color, cultural wisdom about health, spirituality, and the strength of community has been preserved in our communities.

Health care has often been maintained, taught and provided by women, particularly by the elders of the communities.

# A Brief Pre-History Of Community Health Workers

Using their knowledge of native plants, roots, bark, berries, herbs, and healing waters, women in Native American and indigenous communities used the practices and the wisdom passed down by elders.

Indigenous women nurtured and saved the lives of European white men and women, even as the white Europeans committed torture, murder and genocide against Native American and indigenous communities.



Adapted from the National Hispanic Nurses Association website, at

<http://www.nahnnet.org/NAHN/About/History/NAHN/Content/History.aspx?hkey=45d72c12-d9fb-4a57-860a-5053827c9649>

*“American Indian women have been denied the gratitude from the lessons that unite ancient wisdom with today’s healing arts with little recognition as the First women of healing.”*

*Shoshone women and children, 1872*



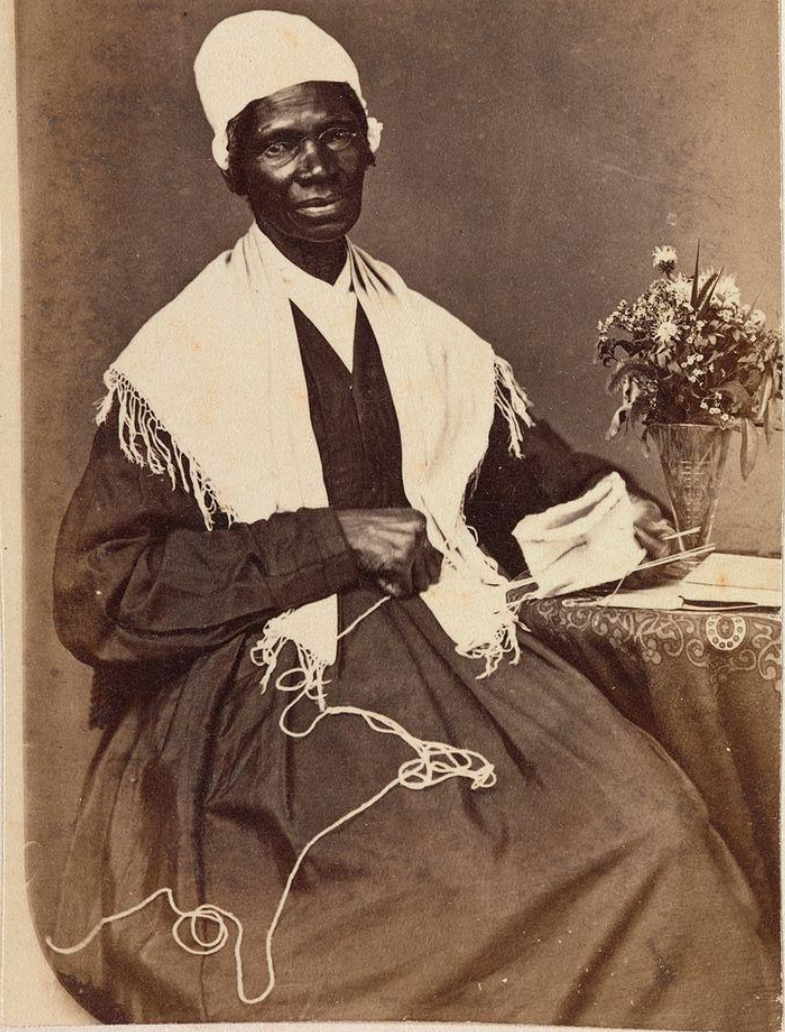


# Enslaved Black Women Did the Work of Community Health Workers

- Midwifery - taking care of pregnant women
- Wet-nursing and caring for babies and toddlers
- bathing and dressing children and adult women
- looking after young children and the elderly
- Taking care of the sick and infirm
- Preparing and cooking nutritious meals
- Passing on traditional practices and remedies for curing health traumas and chronic conditions
- Providing hospice care
- Cultivating healing herbs and plants



*Harriet Tubman*



I Sell the Shadow to Support the Substance.  
**SOJOURNER TRUTH.**



# Women Elders Were (and Are) Valuable Resources

**Women elders kept their communities healthy through:**

- stories and anecdotal examples
- passing along history, allowing community members to heal from trauma
- using particular healing practices
- providing helpful remedies or ideas
- reminding the community of past successful practices
- Mentoring and nurturing young women in the community

# Throughout History, Women of Color Have NOT Been Acknowledged As CHWs

*Over the centuries, women of color were never recognized formally as health care workers.*

*During colonialization and enslavement, women of color were not considered true health workers. During Reconstruction, Jim Crow, and the Segregation eras of the United States, women of color were **excluded from:***

**College and University**

**Medical school**

**Nursing school**

**Working as a care provider in hospitals or clinics**

**Being certified as a public health nurse**

**Being recognized as a midwife**

# A Brief History Of Community Health Workers

“In the mid-1960s, several programs used “neighborhood health aides” to improve the health of migrant farmworkers, the urban poor, Native Americans, and other underserved populations . . . .

Early CHWs were primarily employed by government agencies that aimed to promote community well-being and alleviate poverty . . . . ”

from *The Evolution, Expansion, and Effectiveness of Community Health Workers* , p. 3 , Randall R. Bovbjerg Lauren Eyster Barbara A. Ormond Theresa Anderson Elizabeth Richardson, December 2013, The Urban Institute 2100 M Street, NW Washington, DC 20037

# A Brief History Of Community Health Workers, continued

Community health centers, another form of outreach to the disadvantaged, were also primarily government run . . . .

In the 1970s and 1980s, short term public and private funding supported particular uses of CHWs with targeted training in formally designed interventions.”

# **Women of Color Community Health Workers Are EPIC!**

**EFFECTIVE**

**PRODUCTIVE**

**INNOVATIVE**

**COMMUNITY-ORIENTED**



# **For Centuries, Communities of Color Have Had Their Trust Broken by the (white male) Medical Establishment:**

Medical care withheld

Medical experiments on their bodies

Poor or inadequate medical care

Forced sterilizations

Lack of medical consent

Lies told about purpose or nature of the health care

Disrespect, humiliation, contempt, condescension

# **Communities of Color Are More Likely to Trust Women Who Come from Their Own Communities, and Are More Likely to Engage Effectively in Their Own Health Care**

*This trusting relationship enables the worker to serve as a liaison/link/intermediary for individuals with the systems of care in the communities they serve.*

**Preventive health services**

**Screening**

**Detection**

**Treatment**

**Follow-up Care**

**Translation and Interpretation**

**Table 8.2 Health Problems Addressed by Programs, Percent of Respondents**

<b>Health Problem or Issue</b>	<b>U.S. (N=587)</b>
Nutrition	50.3
Women's health	48.6
Pregnancy, prenatal care	43.4
Child health	42.9
HIV/AIDS	41.6
Diabetes	40.0
Infant health	40.0
Immunizations	39.0
Sexual behavior	35.9
Obesity	34.9
Family planning	33.7
High blood pressure	33.2
Breastfeeding	31.9
Tobacco control	31.3
Physical activity	30.0
Low birth weight prevention, follow-up	29.8
Premature birth prevention, follow-up	29.1
Substance abuse	29.0
Cancer	28.3
Cardiovascular disease	27.3
Mental health	27.3
Heart disease	24.4
Men's health	23.0
Children w/special health care needs	22.8

**Source: CHW  
National Inventory  
(CHW/NEI), 2006**

# **Women of Color Health Caregivers Perform Many Functions For their Communities**

**This is a continuing theme in our communities:**

**Advocacy**

**Health education**

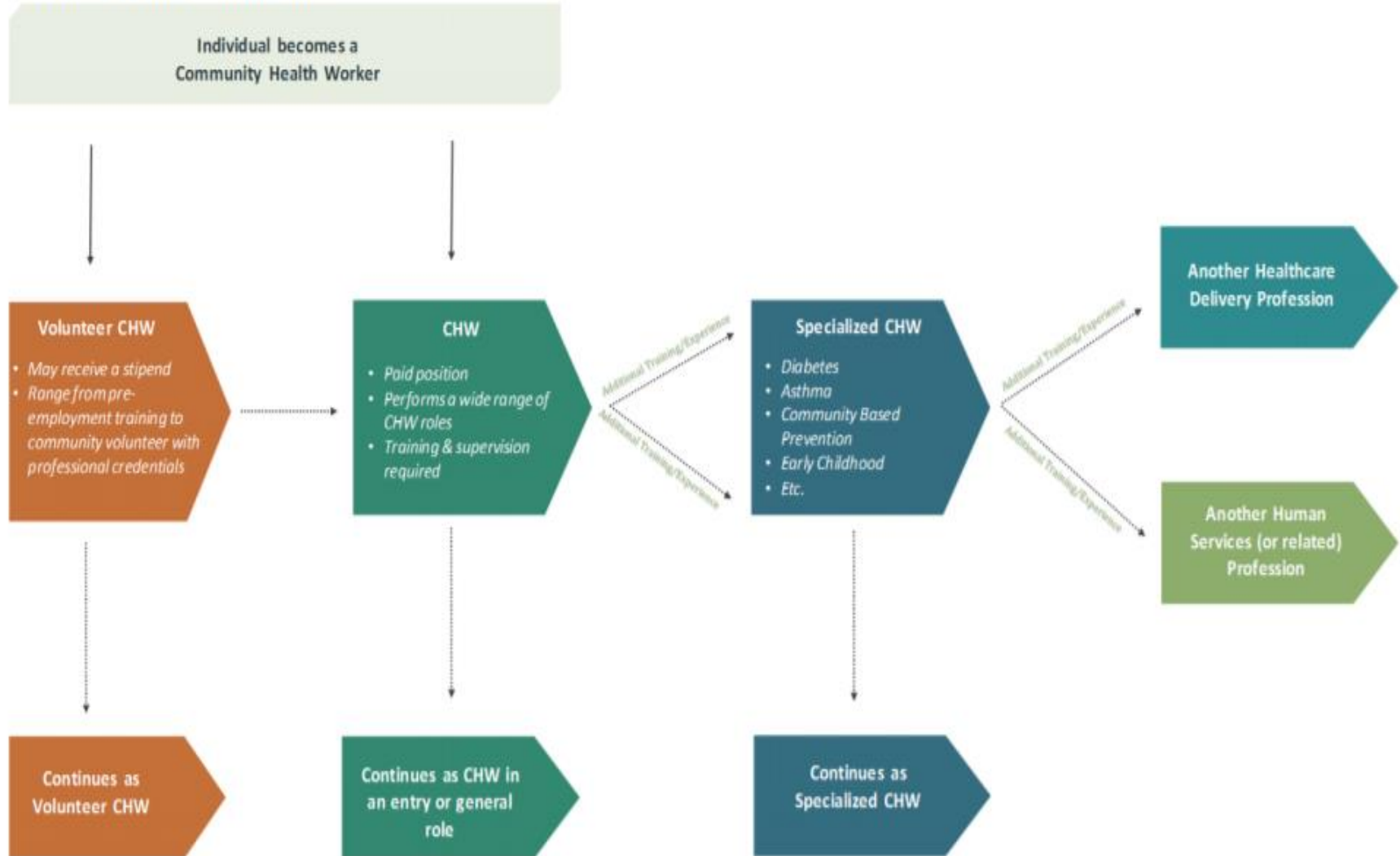
**Community organizing**

**Political and social reform**

**Healing from trauma**

**...**

**Figure 1. CHW Continuum**



Source: CHW National Inventory (CHW/NEI), 2006

# Women of Color CHWs Enter the Field In Many Ways

Volunteers doing CHW-type may become employed as CHW generalists who support the overall health and well-being of individuals and communities.

CHWs may go from generalists to working in specialized roles (for example, providing diabetes education ).

CHWs may transition into other health and human service professions.

(see, Figure 1. CHW Continuum)

**Because of Exclusions and Limited Opportunities,  
Women of Color Often Follow Different Paths Into  
Community Health Care**

**For Women of Color,  
There Is A Connection Between**

**Nurses  
Physicians  
Public Health Nurses  
and  
Community Health Workers**

**.....**



**Mary Mahoney  
Margaret Jessie Chung  
Susie Walking Bear Yellowtail  
Faye Wattleton  
Ildaura Murillo-Rohde**







**Antonia C. Novello  
Audrey F. Manley  
Jocelyn Elders  
Sylvia Trent-Adams  
Regina Benjamin**

# **Women of Color CHWs Face Barriers That White CHWs Do Not:**

**Regularly deal with institutional racism**

**Are often under-acknowledged**

**Are taken for granted**

**Are not always listened to or heard**

**Are rarely praised or acclaimed**

**Have their struggles within the system go unrecognized**

**Have fewer advancement opportunities**

**Must deal with micro-aggressions and macro-aggressions**

**Hold few positions in senior management**



**Women of  
Color in  
Healthcare**

# **Women of Color Community Health Workers Are EPIC!**

**EVEN-TEMPERED**

**PERSEVERANCE**

**INNOVATIVE**

**COMMUNITY-ORIENTED**



Black Caucus of Health Workers, <http://blackcaucus1968.blogspot.com/p/bchw-around-town.html>

# **Self-care:**

is any (intentional)  
action you take to care  
for your mental,  
emotional, spiritual,  
physical health and  
well-being.



<https://www.medicaldaily.com/how-much-water-should-you-drink-each-day-4-6-glasses-ideal-amount-36166>



[https://www.google.com/search?rlz=1C1GCE1\\_enUS821US827&bih=1366&bih=608&bm=sch&sa=1&ei=qRWjXKaSGoeS5wKldGYCQ&q=images+of+black+women+exercising&og=images+of+black+women+exercising&os=imgr:12...100902102852..105350..0..0.541.1740.2-5j5-1.....0...1..gws-wiz-in:q.Ru6TpaEVHjl#imgre=e3r1wRZZDXvGM](https://www.google.com/search?rlz=1C1GCE1_enUS821US827&bih=1366&bih=608&bm=sch&sa=1&ei=qRWjXKaSGoeS5wKldGYCQ&q=images+of+black+women+exercising&og=images+of+black+women+exercising&os=imgr:12...100902102852..105350..0..0.541.1740.2-5j5-1.....0...1..gws-wiz-in:q.Ru6TpaEVHjl#imgre=e3r1wRZZDXvGM)



[https://www.google.com/search?rlz=1C1GCE1\\_enUS821US827&q=ralph+lauren+blue+and+white+bedding&om=inc&source=univ&sa=X&ved=2ahUKEw1Zs8jN-7DhAhV11krc7YQnAAQ6AR6BAQKEAF&biw=1366&bih=608&imgr=Li7BRaZWEY1ZIM](https://www.google.com/search?rlz=1C1GCE1_enUS821US827&q=ralph+lauren+blue+and+white+bedding&om=inc&source=univ&sa=X&ved=2ahUKEw1Zs8jN-7DhAhV11krc7YQnAAQ6AR6BAQKEAF&biw=1366&bih=608&imgr=Li7BRaZWEY1ZIM)



**Chasing Delicious / Kitchen 101**  
designed by Russell van Kraayenburg (chasingdelicious.com)

**CARING FOR  
MYSELF IS NOT  
SELF-INDULGENCE,  
IT IS SELF-  
PRESERVATION  
AND THAT IS  
AN ACT OF  
POLITICAL  
WARFARE.**

**AUDRE LORDE**



# **Women of Color Community Health Workers Are EPIC!**

**ENTHUSIASTIC**

**PROVIDE VALUABLE SUPPORT**

**INEVITABLE**

**CREATIVE**



*Developing Skills for  
Women of Color to  
Advocate For Themselves  
and Communities of Color*

CREATING AND  
PARTICIPATING COALITION

MANAGEMENT AND  
DIRECTING PROGRAMS

SERVING CLIENTS

# IGNITING OUR POLICY FOR OUR CLIENTS

## What are you doing?

COORDINATING PROGRAMS

PROVIDING INFORMATION  
TO GRANT

EDUCATING STAKEHOLDERS

# Outline

- Define Policy
- Address a Community Problem
- Define Roots, Symptoms, Consequences
- Construct Policy Recommendations

A systematic approach or framework for identifying and recommending policy options to be pursued by decision-makers

**WHAT IS POLICY ANALYSIS ?**

# POLICY ANALYSIS STEPS: BARDACH'S 8-FOLD PATH

- Step 1: Define the Problem
- Step 2: Assemble some Evidence
- Step 3: Construct the Alternatives (Options)
- Step 4: Select the Criteria
- Step 5: Project the Outcomes (Predictions)
- Step 6: Confront the Trade--Offs
- Step 7: Decide
- Step 8: Tell your Story

- What is the problem?
  - *Is that really the problem?*
- Why is it a problem, not a condition?
- Why does it merit public intervention?
- What causes it?
- What are the consequences of this problem existing? (*i.e., why do we care?*)

## **DEFINING THE PROBLEM**

- What can we do about it?
  - *What can we do within our context?*
- How do we know which option to choose?

**GENERATING POLICY  
OPTIONS AND CRITERIA TO  
EVALUATE THEM**

# Policy Options

<b>Goals</b>	<b>Criteria</b>			

**Predictions**

# POLICY ANALYSIS MATRIX



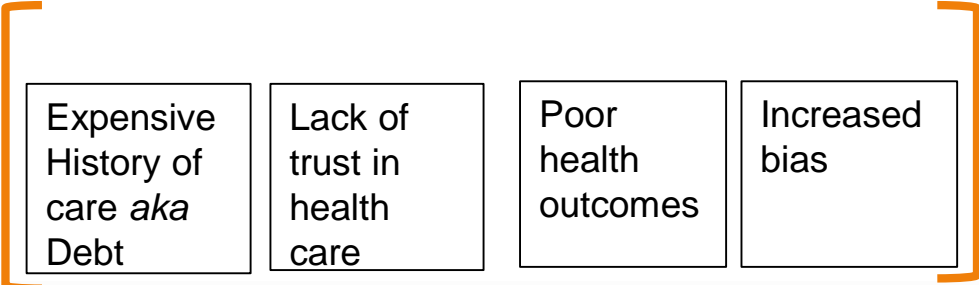
**Problem  
Roots**



**Problem**



**Problem  
Symptoms/  
Consequences**



- Inequitable outcomes
- **Compounded suboptimal outcomes**
- Lost aggregate growth

		<b>Status Quo</b>	<b>Option 1</b>	<b>Option 2</b>	<b>Option 3</b>
<b>Effectiveness</b>					
<b>Equity</b>					
<b>Feasibility</b>					
<b>Efficiency</b>					

# Women of Color Community Health Workers Are EPIC!

EFFECTIVE; EFFORTLESS; ELDERS; ENCOURAGING; EMERGENT; EMPATHETIC;  
EMPOWERED/EMPOWERING; ENDURING; ENERGETIC; ENGAGING; ENHANCING; ENLIGHTENED,  
ENLIVENING; ENRICHING; ESSENTIAL; EQUIPPED; EXCEPTIONAL; ETHICAL; EVEN-HANDED;  
EXTRADORDINARY; EXCEPTIONAL; EXPRESSIVE; ESTEEMED; EXACTING; EXQUISITE



PERSEVERANCE; PRACTICAL; POSITIVE; PROBLEM SOLVERS; PURPOSEFUL; PAR EXCELLENCE;  
PATIENT; PEACEFUL; PERCEPTIVE; PERSONABLE; PERSUASIVE; PERTINENT; PHENOMENAL;  
PIONEERING; POISED: POLISHED: POTENTIAL; PRACTISED: PRECISE: PRAGMATIC:  
PREPARED; PREMIERE; PREMIUM; PRIME MOVER; PRINCIPLED; PRIZED; PROACTIVE; PRODUCTIVE;  
PROFESSIONAL; PROFICIENT; PROUD; PUBLIC-SPIRITED; PROMPT

INTERESTED AND INTERESTING; INSTRUCTIVE; INSPIRING; IMPROVERS; IDEALISTIC; INDUSTRIOUS;  
IMAGINATIVE; IMPASSIONED; IMPRESSIVE: INCLUSIVE; INDEPENDENT; INDISPENSABLE;  
INFORMATIVE: INGENIOUS: INQUISITIVE: INSIGHTFUL: INSTINCTIVE: INTELLIGENT; INTENT;  
INTERCONNECTED; INVENTIVE; INVINCIBLE ; IRREPLACEABLE : INIMPACTFUL

COMPREHENSIVE; CAREFUL; CHOICE-MAKERS; CONCERNED; CAPABLE; COMPETENT; CULTURALLY  
SENSITIVE; COOPERATIVE ; CHOSEN: COURAGEOUS; COMMUNICATIVE; CALMING; CARING;  
CHAMPIONS; COMFORTING; COMMITTED; COMMENDABLE; COMMONSENSE ; COMPASSIONATE;  
COMPATIBLE: CONFIDENT; CONSISTENT; CONSTRUCTIVE; CONTRIBUTORS COOPERATIVE;  
COORDINATED; CRUCIAL; CURRENT; CAN-DO; CUTTING-EDGE;







