Community health workers have the potential to play a critical role in efforts to improve quality of care for diverse populations and address drivers of health care costs.

Community Catalyst wanted to take a deeper dive to understand the opportunities and challenges related to the integration of Community Health workers into health care teams. Community Catalyst did an extensive literature review and a number of interviews with consumer advocacy organizations, community-based organizations, CHW associations and individual CHWs to inform the CHW issue brief http://www.communitycatalyst.org/resources/publications/document/Community-Catalyst-CHW-Issue-Brief-1.pdf

The presentation will highlight some of the key points outlined in the brief to provide a high level overview of our findings and some of our recommendations.
• CHWs are known by other names such as a peer supporter, promotor/a, community health advocate, community health liaisons, and so forth.
What is a CHW?

- Frontline public health worker
- Trusted member of a community
- Link between health/social services and the community

They serve as frontline public health workers and are often trusted members of the community or they have a deep understanding of the community they are serving, and they are able to facilitate the use of health and social services in the communities they are serving.

The role CHWs play has potential to make health more equitable, especially for populations experiencing disproportionately poor health outcomes, and research has shown the effectiveness of CHWs in securing access to health care, coordinating access to primary care and preventive services, helping individuals manage chronic conditions, and improving patient activation and community empowerment.
The ACA included a range of provisions that aim to enhance the role of CHWs in the U.S. health care system, including ones that have potential to increase funding to reimburse CHWs.

The brief outlines the various opportunities for funding the integration of CHWs in the health care delivery system under the ACA and other state-specific opportunities.

we did learn is that funding continues to be a significant barrier for integrating CHWs into health care systems, and most CHW programs are funded by time-limited grants, leaving CHWs without stable employment and job security.
The other issue related to integrating CHWs in health care delivery systems that we discussed at length with different stakeholders is certification and training.

Certification and training requirements vary considerably by state agencies, local agencies, professional boards that administer programs, and so forth. Some states even have no certification requirements.

The views around certification and training in the CHW field differ widely. With funding being such a critical issue, many organizations see CHW credentials as an essential step in workforce development and securing stable funding. Accreditation also has potential to offer more accountability, standards for outcomes measurement and development opportunities. On the other hand, there is some apprehension related to barriers that certification and some types of training may pose. For example, costs and significant travel to trainings can serve as significant barriers. Obstacles related to certification (fees, loss of wages, travel, paperwork, language barriers) also have the potential to limit the pool of prospective CHWs who come from underserved, high-risk communities.
The transformation of state and local health care delivery and financing systems provides a number of opportunities to advance health equity and provide quality, affordable health care for all people, and there are a growing number of opportunities for consumer health advocates to partner with CHWs to build a health system that leads to better health for diverse populations. The brief also compiles strategies and tips shared by CHWs and their partners for consumer health advocates to engage and support CHW advocacy and integration.

- Reach out and connect with CHW associations and Community based organizations that are employing CHWs locally and statewide.
• Meaningfully engage these organizations and CHWs by listening and learning about their preferences, opportunities and challenges related to funding, certification, training, care delivery and so forth.

• There are varying opinions about what kind of training or certification is necessary for different populations or what barriers they pose, so make sure you have an understanding of the preferences of the CHW field so that your advocacy is informed and state-specific.
• help mobilize CHWs and CHW associations.

• It is important for CHWs to advocate for themselves and take an active role in policy and systems change opportunities to ensure that their role in health care delivery is supported and sustainable.

• Many CHWs or CHW organizations that are providing a direct service are not as familiar with advocacy, so Consumer health advocates have opportunities to provide advocacy trainings and workshops to ensure that CHWs are meaningfully engaged at the local and state levels when decisions are being made about their role and to equip CHWs with the necessary tools to advocate on their own behalf.

• Consumer health advocates also have opportunities to partner with CHWs to raise the public’s awareness about what CHWs can do and about the importance of integrating culturally and linguistically competent providers in the health care workforce and can elevate stories that highlight the quality of care CHWs can provide.