

Massachusetts Community Health Worker (MACHW) Network Newsletter

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MACHW:

MACHW is a statewide network of community health workers (CHWs) from all disciplines. We formed in March 2000 to lead the movement to organize, define, and strengthen the profession of community health work.

MACHW Definition of a CHW:

A community health worker is a public health professional who promotes full and equal access to necessary health and social services by applying his or her unique understanding of the experiences, language and culture of the communities he or she serves.

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Winter Newsletter 2005

Letter from the Chair

Holiday Greetings from the MACHW Board of Directors! As I think about the many diverse holiday traditions, I liken it to the diversity of CHWs. We come from many walks of life, many ethnic backgrounds, speak many languages and represent a wide range of disciplines. As we prepare for the holidays, please remember how we have touched the lives of communities, families and individuals and give ourselves praise for doing so.

As we embark on the new year, there are some exciting developments in our state and nationally for CHWs. Nationally, there are new projects, which will have an impact on all CHWs. Work continues on a national CHW definition; the Community Health Worker National Education Collaborative has been funded and will take a look at "best practice" approaches to CHW education; and a national CHW workforce study has also been funded. Massachusetts is fortunate to have CHW representation on all of the above-mentioned projects.

Here at home, the statewide CHW movement is moving forward as well. MACHW continues to grow in membership. We have presence at many health and human service events where CHWs have typically in the past been left out. We applied for year three funding from Blue Cross Blue Shield and expect to have a response in a few weeks. As I write this letter, we have just filed CHW legislation, with technical assistance from partners and allies. Credentialing for CHWs is a hot topic nationally, with some states moving forward with little or no input from CHWs. Massachusetts will be different. Making decisions for CHWs without having us at the table is unacceptable! MACHW will facilitate discussions for statewide CHW input in the upcoming months.

We are a workforce with a long history of assisting communities to improve health by increasing access to health care and human services. Even with this history, we continue to be funded by grants, and have little or no job security. We can no longer rely on the whims of funders or the state budget process to look out for the best interest of CHWs. We need to find creative sustainable funding for CHWs and be actively involved in the process. Our communities are at risk of losing services at the end of each grant or state budget cycle. Massachusetts has lost too many valuable prevention programs and too many CHWs have lost jobs. We need to make sure elected officials, policy makers and program administrators know our value and importance.

As you do your holiday shopping, I ask you to give a gift to yourself, fellow CHWs and the communities we serve. You won't find it on the shelves of any store, in any catalog or online. The gift I ask you all to give is the valuable gift of commitment. Give the profession of community health work the same commitment we give to the communities we work in each day. Strengthen our profession with the same energy we use to assist individuals, families and communities build on their strengths. Your gift of commitment now will continue to strengthen the field of community health for many years to come.

Lisa Renee Siciliano

"A CHW's View On Creative Ways to Stem the Tide of Youth Violence in Boston, Massachusetts and Potentially This Whole Country"

On December 6, Durrell Fox, MACHW board member, made some comments before the Massachusetts DPH Commissioner, Christine C. Ferguson, on recommendations to have CHWs more intricately involved in the initiative and planning process to stem youth violence. The comments were made at the DPH forum, "Public Health in the 21st Century." This forum was focused on youth with a panel of youth presenters and over 100 youth in the audience. Here are some of his key recommendations:

- Look to creative ways to support community health worker (CHW) teams working with peer educators (also known as youth CHWs).
- Cross training in health and human service topic areas for all team members. This will enable teams to have subspecialty areas of expertise and also to develop generalists with a wide knowledge and resource base.
- Education focused on adolescent development and life skills for members of the teams.
- Prepare CHW-peer teams to use holistic approaches in youth harm and risk reduction by enlisting innovative and creative approaches to wellness (hip hop, faith, etc...).
- Larger networks of CHW-peer teams, meeting monthly to augment the weekly meetings of the smaller neighborhood CHW-peer educator teams.
- To sustain youth prevention and intervention efforts we must move beyond the soft, cyclical and categorical funding to a more comprehensive approach to youth violence prevention that includes hard, sustained funding.

To read all the information presented go to: http://www.mphaweb.org/pol_comm_dphforum_presentation.pdf

CHWs at the Podium at the "Voices of Inclusion" Disparities in Health Care Summit

On November 17th at the JFK Library in Boston, public health constituents, including CHWs, came together to address the issue of disparities in health care access. This was the first "disparities" conference hosted by the National Conference on Community and Justice (NCCJ) and the Harvard Pilgrim Health Care Foundation. Over three hundred people attended, representing public health organizations and members of the community concerned with health disparities in Boston and throughout all of Massachusetts. Boston Mayor Thomas M. Menino opened the day by addressing the need for equitable and comprehensive health care services for all Boston residents.

MACHW board member Durrell Fox was one of three key-note panel speakers. He addressed some of the barriers that exist for front-line workers in providing health care services, and labeled steps for community members and organizations to address these disparities. For example, he encouraged public health constituents to take greater strides in educating youth in particular about health issues they are at higher risks for. He also stressed

using age-appropriate and culturally sensitive measures in those outreach efforts to gain greater youth involvement. He reiterated the need for community health workers to stay involved in coalitions and other advocacy organizations addressing the areas of health disparities.

Lisa Renee Siciliano, MACHW Chair, and Camilla Monteiro, MACHW board member, led a workshop focusing on the role CHWs take in eliminating health disparities. They facilitated small group discussions and gathered ideas from attendants about how to actively involve CHWs in the decision-making process when addressing health disparities. Some ideas from participants were: education for CHWs on how to influence elected officials and policy makers, building relationships with community leaders, and increasing the education for supervisors about the critical role CHWs have in successful health care delivery.

It was an exciting day, which highlighted the important role CHWs play in bridging health care access to communities.



Workshop presenters at the "Voices of Inclusion" summit, MACHW BOD members (from the left) Camilla Monteiro, H.O.P.E Project Manager for the Community Action Committee of Cape Cod and the Islands, Inc., Lisa Renee Siciliano, MPHA Community Organizer for Central Massachusetts

CHWs Participate in the American Public Health Association's Annual Meeting

By Gail Ballester

At the American Public Health Association Annual Meeting in Washington, DC November 6-10, 2004, there were many exciting sessions hosted by the CHW Special Primary Interest Group (SPIG). The CHW SPIG is the face and voice of community health workers within the large public health community. We develop a rich and diverse program every year to both educate and motivate CHWs and to inform other public health professionals about the valuable work we do. These sessions also serve as an opportunity to learn about and create ways to promote and sustain the field and to develop the CHW work force.

The session I moderated was called "Sustaining CHW Programs – Creative Approaches." It featured 4 presentations from across the country, each shedding light on different aspects of CHW sustainability. The first study

from California that examined some of the motivations CHWs have to do the work, apart from any monetary incentives. The study showed that, as we might suspect, CHWs are rewarded intrinsically by their sense of service to and advocacy for others. The 2nd presentation highlighted a study from New Mexico that was a legislative mandate. The report concluded that CHWs in New Mexico have the potential to improve public health outcomes, increase access to care, and reduce costs for health services. It also noted that a statewide CHW program may contribute to the economic and workforce development of New Mexico through collaborative public-private partnerships.

The 3rd presentation in the session addressed the power of collaboration between state public health associations and CHW networks, featuring our own Massachusetts example. Lisa

Renee Siciliano, MACHW Chair, and Geoff Wilkinson, Executive Director of the Massachusetts Public Health Association highlighted the ways in which the two organizations work together, enhancing each others efforts to improve public health and the health of communities in Massachusetts, which are promoting CHW workforce development. The final presentation, entitled "No Soft Money!" came from Health-Plus in New York, a health maintenance organization which has a strong and sustained CHW program that is regarded as an asset to the HMO. Through significant training efforts, the development of a career ladder, and a corporate commitment to outreach as integral to quality care, the Health-Plus model outreach program has proven itself to be key to the agency's mission.

Observing World AIDS Day, December 1

About a million people infected with HIV live in the United States. This past year 44,000 Americans were newly infected with HIV.

In Massachusetts there are 600 people living with HIV who were diagnosed between ages of 13 and 24 (HIV reporting since 2000): 57% of these are people of color, 44% female, 56% male, and when you look at the ages 13-19 living with HIV females are the majority at 52%, with 69% of these females being women of color.

In recognition for all the valiant and unwavering work community health workers do to help people affected by AIDS and working to dismantle the AIDS pandemic, we honor you and those individuals you seek to help.



Majority of Americans Say Public Health Is Beneficial to Them and Their Communities

In a dual survey conducted by Research!America and the American Public Health Association, consensus found that preventative health measures are important to the public. It showed that, "83% of Americans believe they benefit from childhood vaccination programs, and additional high marks were given to health inspections, drinking water, daycare sites, and emergency family violence and sexual assault services." Georges C. Benjamin, Executive Director of the American Public Health Association released this statement, "This survey shows there is strong support for the protections that public health provides and broad recognition that these programs actively safeguard our health."

(Public Health in Massachusetts) A recent video released by MPHA called, "Safe and Healthy: How Public Health Protects Us" details public health as it pertains to Massachusetts initiatives. If you would like to view this video, contact Sarah Almer at MPHA, 617.524.6696 x111.

For more information on the Research!America/APHA survey go to: <http://www.researchamerica.org/polldata/apha2004.pdf>

Vicki Deschamps
Berkshire North WIC, Community Coordinator
MACHW Board Treasurer



It was nine thirty. Guests chatted quietly across the tables as they finished their breakfasts. Vicki rose from her seat to speak at Berkshire North WIC's annual legislative breakfast. She took a deep breath and surveyed the audience and smiled. In attendance were City Councilors, people from the congressman and state representatives' offices, a state representative, and representatives from agencies WIC collaborates with. "I want to thank you all for coming today", she began. "We appreciate the opportunity to talk to you about our successes."

Victoria Deschamps brings zest and energy to her job as Community Coordinator for Berkshire North WIC. In her two years she has seen the number of participants served increase

dramatically. But where she has really shined is in event planning. In Berkshire County the WIC message is being heard at baby showers, breastfeeding events, and at community health events all through the county all through the year.

"What I love about this job is that I have the flexibility to spend a lot of time out in the community learning about all the resources that are available to our participants," she says. "I provide a bridge, of a sort, between health and social programs and people who would benefit from them – but may not know they exist or how to access them."

In the case of the legislative breakfast, she says. "It's critical to let those who make decisions see the results of those decisions and get a chance to meet the people that programs like WIC are helping. We hold the legislative breakfast every year to let our elected officials know more about the program and how well it works. Hopefully, they'll come to our breakfast, or read the material

we send to their offices, and remember this the next time they are asked to make funding decisions."

She stresses, "It's all about communication. An effective health and social service network needs two-way conversation." CHWs all over the state are a voice in that conversation and their voice should be acknowledged as part of the health care and social service delivery system. It takes special skill sets to be a CHW. These skill sets are as varied as the sixty plus titles CHWs work under, Community Coordinator is just one. There may be many different titles but if you walk into a room full of CHWs you can see that they have many common bonds, common issues, and common messages.

CHWs bring to the table a unique understanding of the problems facing their communities. In closing Vicky states, "I like being part of that conversation, one of the voices at the table. Through MACHW, I've learned how to be a more effective voice."

MACHW Board of Directors Information

In each issue of the newsletter we would like to introduce readers to the leadership of MACHW. According to MACHW's strategic plan, 60% of the Board of Directors must be community health workers. If you are a CHW and interested in serving on the board please contact Lisa Renee Siciliano, MACHW Chair.

LRsiciliano@aol.com
508.791.5893

Sharing Experiences from the Field

The MACHW newsletter is a resource for CHWs in Massachusetts. If you would like to write an article about your work and/or agency, or if you have information to share (events, important dates, calendar schedules, job postings, etc.) please contact Anne Schlereth, Project Coordinator.

annemachw@yahoo.com

413.536.7385 (Holyoke)

617.524.6696 (Boston)

Make Referrals!

Health Law Advocates
617.338.5241

Health Law Advocates is Health Care For All's public interest law firm. Health Law Advocates represents individuals and families in Massachusetts who have been denied access to health care. HLA can represent individuals with incomes up to 300% of the federal poverty level. See the online link below with HLA's outreach flyer for more details, and the kinds of cases HLA takes. Please feel free to distribute this outreach flyer widely as HLA is always looking for new clients.

Health Law Advocates flyer online:
<http://www.hla-inc.org/public/HLAflyer.pdf>

Visit HCFA's helpline at:
<http://www.hcfama.org/index.cfm?fusection=Page.viewPage&pageID=274>

"In the Know"

Do You Know What Bills Affecting CHWs Will Be Reviewed in the MA General Court This Session?

1. An Act to Study the Community Health Workers Role in Reducing Health Disparities and Increase Enrollment in Medicaid-funded Health Services in Massachusetts

MACHW Contact: Lisa Renee Siciliano, 508-791-5893

2. An Act Relative to Patient Navigators

House of Representatives
Contact: Representative Gloria Fox, 617-722-2692

3. Health Access and Affordability Act

Health Care for All Contact: Brian Rossman, Policy Director, 617-350-7279 X2920

A "Snapshot" Advocacy Toolkit



It is important for CHWs to become increasingly familiar with health law and policy formation in Massachusetts. In doing so, CHWs will be able to use their expertise to have greater influence on decision-making that affects health policy.

In the Advocacy Toolkit MACHW is developing, to help you better understand the process, we will provide:

1. Point-by-Point, How a Bill Becomes a Law
2. A Massachusetts "Bill to Law" flow sheet
3. Contact information for your local and statewide elected officials

MACHW will have the toolkit available in the Spring of 2005. This section will be updated throughout the toolkit's development.

"Never doubt that a small, group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has."

-Margaret Mead

"Be the change you want to see in the world"

-Mahatma Gandhi

MACHW Statewide and Regional Meeting Schedule

Statewide Meetings
Thursday, December 16, 2004

2005 Schedule: 3/3, 6/7, 9/22, 12/15

10-12pm
 Center for Healthy Communities
 (Central MA)
 44 Front Street, Suite 280
 Worcester, MA 01608

Meetings are quarterly, Thursdays, from 10am-12pm

For information contact:
 Lisa Renee Siciliano
Lrsiciliano@aol.com

Vicki Deschamps
vdeschamps@bhs1.org

Western MA Regional
Thursday, January 13, 2005

10-12pm
 DPH Northampton
 23 Service Center Road
 Northampton, MA 01060

Second Thursday (sites/times change, see MACHW flyer for updates)

For information contact:
 Maritza Smidy
Maritza.smidy@sphs.org

Anne Schlereth
annemachw@yahoo.com

Southeast Meeting

Next meeting date/time TBA
 Community Action of Cape Cod and the Islands, Inc.
 115 Enterprise Road
 Hyannis, MA 02601

For information contact:
 Camilla Monteiro
camillam@cacci.cc

Details about upcoming meetings will be sent in the mail and distributed in emails. Please contact us if you have a change of contact info. so that we can get information and meeting dates to you as efficiently as possible.

HCFA's 20th Anniversary Celebration
 Friday, April 8, 2005, 5pm
 The Westin Copley Place Boston

Join Health Care For All at their 20th Anniversary Celebration,
For the People, Against the Tide

Honoring community health leaders and a national leader in health care reform, James J. Mongan, MD, President & CEO of Partners HealthCare. Dr. Mongan is the recipient of the Lifetime Achievement Award.

Registration & reception begins at 5:00pm; program begins promptly at 6:00pm

For information about sponsorship opportunities, please call 617-275-2926 or go online to www.hcfama.org

Individual tickets are \$50 for Health Care For All members
 \$125 for non-members
 *Dinner buffet and dessert included

The Center for Sustainable Health Outreach (**CSHO**) is hosting the annual Unity Conference,
 March 30-April 1, 2005

Unity 2005 is a national conference designed for and about community health workers. The theme for this year's conference is "Community Health Workers: Responding to Challenging Times."

The conference will be held at the Grand Casino Oasis Resort and Spa in Gulfport, Mississippi!

For conference information contact:

Susan Johnson, 601.266.6266 or
Susan.Johnson@usm.edu

OWTI Accepting Enrollment for the 12-HR Supervisor Certificate Course

Classes will be held on 3 Wednesdays in March, 2005 from 9:00 a.m. – 1:00 p.m. at Curry College, Worcester Campus, One West Boylston Street, Worcester, MA.

March 2, 2005: Community Health Workers (CHWs) and Supervisors: Roles and Needs; Strategies for Supervising CHWs

March 3, 2005: Snow date for March 2, 2005
March 9, 2005: Conflict Resolution

March 10, 2005: Snow date for March 9, 2005

March 16, 2005: Professional Boundaries in Community Health Work

March 17, 2005: Snow date for March 16, 2005

OWTI also offers a 45-HR CHW Certificate Course: Outreach Core Competencies.

They are unable to take anymore enrollment for the current course, but recruit for certificate courses on an on-going basis. Contact OWTI to find out more information about future courses.

Contact: Tatyana Gorodetsky
 Central MA AHEC,
 508-756-6676
tatyana@cmahec.org

PHASE (UMass Lowell) Conference on "Worker Health and Safety in Healthcare: Learning from the Past, Best Practices for the Future"

Thursday, April 28, 2005, 8:00 to 4:30
 BU Corporate Ed. Center
 72 Tyng Road
 Tyngsboro, MA 01879

Workshops Include: Workplace Violence, Diversity Training, and Stress Management

Contact Petra Miesmaa:
 978-934- 4428
Petra_Miesmaa@uml.edu
 Cost: \$25 for early registration, \$35 after March 31, 2005. Lunch included.

Data Resources:

The US Census Bureau

The US Census Bureau collects data about the US population and creates detailed tables with data regarding: age, race and ethnicity, sex, housing status/units, and domestic migration. The Census Bureau also summarizes this information in detailed reports.

For example in August 2004 the Census Bureau released a report, "*Income, Poverty, and Health Insurance Coverage in the United States: 2003*". You can view the detailed content of this report at: <http://www.census.gov/hhes/www/income.html>

A few points from this report states that between 2002 and 2003:

- The poverty rate rose from 12.1 percent in 2002 to 12.5 percent in 2003→

- The number of people without health insurance coverage rose by 1.4 million to 45.0 million
- The number of people below the official poverty thresholds numbered 35.9 million in 2003, or 1.3 million more than in 2002
- The proportion of the foreign-born population without health insurance (34.5 percent) was about two-and-a-half times that of the native population (13.0 percent) in 2003.

To review more information reported by the US Census Bureau go to:

<http://www.census.gov/>

Request information via the U.S Postal Service:

U.S. Census Bureau
4700 Silver Hill Road
Washington DC 20233-0001

Did You Know Massachusetts Has the Seventh Largest Immigrant Population in the U.S.?

Adapted from <http://www.miracoalition.org/>

Many CHWs in MA work with immigrant and refugee populations. This population is growing and more CHWs will be serving immigrants and refugees in the next decade.

The Massachusetts Immigrant and Refugee Advocacy Coalition (**MIRA**) is the only organization in Massachusetts that brings together groups serving immigrants and refugees from many parts of the world, of various nationalities, races, and ethnicities.

MIRA focuses on:

- Policy Analysis and Advocacy
- Training and Education
- Member Organizing and Leadership

MIRA facilitates trainings to increase skills and expertise working with immigrants and refugees. **To find out more information or to schedule a training, contact MIRA, 617-350-5480 x210**



Recommended Reading

“In the Nation's Compelling Interest: Ensuring Diversity in the Health-Care Workforce”

A summary about the book “In the Nation’s Compelling Interest” states, “The United States is rapidly transforming into one of the most racially and ethnically diverse nations in the world. Groups commonly referred to as minorities--including Asian Americans, Pacific Islanders, African Americans, Hispanics, American Indians, and Alaska Natives--are the fastest growing segments of the population and emerging as the nation's majority. Despite the rapid growth of racial and ethnic minority groups, their representation among the nation’s health professionals has grown only modestly in the past 25 years. This alarming disparity has prompted the recent creation of initiatives to increase diversity in health professions.

In the Nation's Compelling Interest considers the benefits of greater racial and ethnic diversity, and identifies institutional and policy-level mechanisms to garner broad support among health professions leaders, community members, and other key stakeholders to implement these strategies. Assessing the potential benefits of greater racial and ethnic diversity among health professionals will improve the access to and quality of healthcare for all Americans.”

For more information and to purchase this book, go to: <http://www.nap.edu/catalog/10885.html>, or place your order for this book at Barnes and Noble book stores.