

Special points of interest

- Unity 2002 registration
- National CHW Evaluation project news
- APHA updates and deadlines
- CHAN I training to be held April 17-19, 2002

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Unity 2002 to be held February 27-March 1, 2002

The submission of an extraordinarily large number of presentation abstracts was the first sign of the great interest in CSHO's upcoming Unity 2002 conference. "We had twice as many presentation abstracts as last year from which to choose," said conference organizer Jennifer Downey. "I think the success of last year's conference was mostly the reason for this large number of submissions," said Downey.

Unity 2002 will be held February 27-March 1, 2002, at the Grand Casino Biloxi Bayview Hotel in Biloxi, Mississippi. The theme for Unity 2002 is "Community Health Workers: Putting the Community Back into Community Wellness." The conference will address the importance of community health workers (CHWs) to the health care and human services delivery systems; ways to develop and sustain CHW programs; and methods of overcoming barriers to CHW program success. Unity 2002 is an opportunity for CHWs to share knowledge, information, and expertise with other CHWs and interested parties.

"The conference committee had a terribly difficult task narrowing down the agenda from all the abstracts submitted," said Downey. "Every single abstract looked interesting," she said. The conference will include plenary sessions with addresses from keynote speakers and panelists, as well as numerous workshop sessions. Among the plenary sessions will be "The National Picture for CHWs," "Federally funded Initiatives Related to CHWs," "Regional CHW Initiatives,"

and "CHW Coalitions and Networks."

In addition, the conference will offer workshops on CHW education, program evaluation and sustainability, special target populations, skill building, and disease-specific model programs.

Exhibit space will be available during Unity 2002. A tiered pricing scale for exhibitors has been established. To discuss exhibiting during Unity 2002, contact Susan Mayfield-Johnson at (601) 266-6266 or Susan.Johnson@usm.edu.



Unity 2002
"Community Health Workers:
Putting the Community Back into
Community Wellness"

The conference registration fee is \$150 and includes training, materials, and breakfast and lunch each day. Conference fee waivers are available to CHWs on an individual basis. (See page 3 for more details.)

Biloxi will also be the meeting place for CSHO's Advisory Committee and a planning meeting for a national CHW federation. Both meetings will be held on Tuesday, February 26. (See related story on page 2.)

The Mississippi Gulf Coast, with its wonderful restaurants, shopping, cultural activities, live entertainment, golfing, and beachcombing, is an exciting place for a conference. All these activities are located within walking distance or a short cab ride from the Grand Casino Biloxi Bayview Hotel.

The Grand Casino Biloxi Bayview Hotel is a beachfront hotel with many luxury amenities including a workout area with state-of-the-art fitness equipment, a full-service salon and spa, restaurants, unique specialty shops, and Las Vegas-style entertainment.

A special room rate of \$79 per night has been negotiated for Unity 2002 participants who book their hotel rooms before February 1, 2002.

Ground transportation from the Gulfport airport by the Casino Airport Shuttle is \$15 per person round-trip, \$10 per person one-way. This shuttle runs every hour. Their telephone number is (228) 396-1212.

Coastliner Transportation has a booth in the New Orleans airport at the baggage claim area. Their prices are \$35 one way and \$62 round trip. Call (800) 647-3957 to make a reservation. Call Casino Airport Shuttle at (228) 396-1212 to make a reservation for transportation from the Mobile airport.

We hope to see you in Biloxi in February for a great Unity conference!

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Georgetown law students work on CSHO projects

Every year, a group of Georgetown law students participate in a clinical program designed to give students practical experience in health policy issues. For the last couple of years, these students have done research and other work for CSHO. This year's students wanted to share their research issues with you.

Michael Lipinski, under the supervision of CSHO co-director Jason Newman, is currently working with the Virginia Center for Health Outreach (VCHO). The VCHO is the first state center for health outreach. Administrative Director Christopher Nye and Operations Director Sandra Hopper, MSN, have asked Michael to assist in researching three important issues for the newly founded center. During the past few months, Michael has researched the history of various proposed "National Community Health Advisor Acts" within the U.S. Congress. This research will inform VCHO of previously proposed community health worker legislation, which VCHO can share through its Web site.

Secondly, Michael is examining numerous job descriptions within

Virginia state health agencies. The objective is to identify job descriptions that specifically or functionally describe CHWs. The ultimate goal of the findings is to help support and expand the role of CHWs within Virginia.

Lastly, Michael is exploring the issue of credentialing CHWs in Virginia, because this question was raised in VCHO's first statewide meeting. Building on the work of previous Georgetown law students, Michael is compiling information about the credentialing structure and process of various professions within Virginia. By developing a comparative matrix of the health professions and their credentialing processes, Michael will provide VCHO with an informed foundation should credentialing become a significant issue in Virginia.

Monique Nolan, under the supervision of CSHO Attorney Jacqueline Scott, is investigating methods for making CHW activities and services reimbursable under Medicaid. Extending research initiated by prior Georgetown students, Monique is looking into using Medicaid waivers as a source of sustainable

funding. What are Medicaid waivers and how do they work? Under the Social Security Act, states may request waivers of certain federal requirements in order to create Medicaid reimbursable treatment alternatives that are normally not reimbursable by Medicaid. States have flexibility in designing each waiver program and selecting the mix of waiver services that best meets the needs of the population they seek to serve.

Monique is exploring the following waivers: 1) The Home and Community-Based Services Waiver (1915(c)), which allows states the opportunity to create alternatives to placing Medicaid-eligible individuals in institutions by providing services and care in the home setting; and 2) the Research and Demonstration Project Waiver (1115), which enables states to deviate from standard Medicaid requirements by developing pilot programs to test in their communities. Expanding upon the Medicaid waiver idea, Monique is also exploring the possibility of a partnership between CSHO and
(continued on page 5)

"The National CHW Federation concept was one of the six recommendations that came out of the National Community Health Advisor Study. Recommendation 6 was "Build capacity for a national CHA organization and coordinated CHA leadership and advocacy."

Agnes Hinton,
CSHO Co-director

Community Health Worker Federation to be considered at Unity

For the last several years there have been discussions among CHWs, staff of CHW programs, and other supporters regarding the need for some type of national organization to support CHWs. Current organizations include the Community Health Worker Special Primary Interest Group of the American Public Health Association (APHA SPIG), the National Promotores/Lay Health Worker Association, and the National Community Health Representatives Association. Further, a number of states have formed community health worker associations, including New Mexico, Maryland, Massachusetts, and Oregon, and a number are in the formative stages, such as New

Jersey and Arizona. There are also a number of area organizations, such as those in Texas (San Antonio and El Paso) and Mississippi (Mid-Delta Community Health Advisor Association). However, there is no formal coordination between any of these groups.

Members of the CSHO Advisory Committee and other stakeholders (such as the APHA SPIG) have suggested to us that CSHO might play a catalytic role in convening representatives of CHW state and national organizations to discuss forming such a Federation of CHWs.

To that end, CSHO has arranged for a Federation Planning Meeting to be held in

Biloxi, Mississippi, February 26 prior to the Unity conference. Representatives of CHW organizations have been invited by CSHO to attend this planning meeting. The convened organizational representatives are expected to design how the Federation would be formed, and outline what type of support would be needed for the Federation.

CSHO will also make space available at the Unity 2002 conference hotel on the evenings of February 27 and 28 if discussions need to continue.

A report from the planning group will be made to all conference participants at Unity 2002 and reported in the next edition of this newsletter.



Unity 2002
“Community Health Workers:
Putting the Community Back into Community Wellness”
February 27 - March 1, 2002
Grand Casino Biloxi Bayview Hotel
Biloxi, Mississippi



Yes! I want to attend Unity Conference 2002 in Biloxi, Mississippi!
Registration Deadline: February 18, 2002

Name _____

Title _____

Agency _____

Address _____ City, State and Zip Code _____

Telephone _____ Fax _____

E-mail address _____

Special Needs _____

Conference registration fee is \$150.
 Registration fee waivers are available to community health workers on an individual basis.*
 Conference registration fees include trainings, materials, and breakfast and lunch each day.

*Contact the Grand Casino Biloxi Bayview Hotel at (800) 354-2450
 for room reservations (\$79 per night) by February 1, 2002.*

Send registration form and fee to

Susan Mayfield-Johnson, Program Coordinator
 The Center for Sustainable Health Outreach
 The University of Southern Mississippi
 Box 10015
 Hattiesburg, MS 39406-0015
 telephone: (601) 266-6266, fax: (601)266-6262, e-mail: Susan.Johnson@usm.edu

*Conference fee waivers for community health workers will be considered on an individual basis. In order to request a fee waiver, community health workers should submit in writing, along with their registration form, the following information: name, job title, job training completed, a statement of their need for the fee waiver, and a statement of how conference information will be used.

*Interested in displaying information about your program and services at the conference?
 Contact Susan Mayfield-Johnson at (601) 266-6266.*

National Community Health Worker Evaluation Project underway

By Captain Jacob Tenenbaum

Introduction

The Health Resources and Services Administration (HRSA) is undertaking an evaluation of the cost-benefit of employing community health workers. The planning for this effort to determine the presence and magnitude of the costs and benefits of employing CHWs who are providing selected services to Medicaid-eligible women and children began in late 2000. The evaluation was seen as significant because CHWs are employed or trained in many social and health services delivery programs, including many programs funded and co-funded by HRSA, other government agencies, and by the private sector.

The evaluation is being implemented in three phases: 1) design, 2) pilot testing and 3) full implementation. In September 2000, a contract was awarded to The Lewin Group for the first phase of the project, which was completed June 29, 2001. During Phase I, public/private partnerships were developed to co-sponsor the evaluation and serve on an Expert Panel. A preliminary evaluation design was developed, along with a working hypothesis. A literature review, a preliminary design, and a set of preliminary research questions, which are being incorporated into a revised scope of work for Phase II, were also completed.

A review of existing literature suggests that the premise for undertaking the evaluation is a valid one. There are numerous studies of the efficacy of CHWs, but very few that address the economic impacts of CHWs. The National Community Health Advisor Study (1998), sponsored by the Annie E. Casey Foundation, concluded that previous studies of CHW employment could not provide definitive answers to questions of economic

impact due to the limited scope and focus of the studies and/or the quality of their design and implementation. The literature review is currently being updated and expanded.

Hypothesis and Research Questions

The working hypothesis of the CHW evaluation is that the benefits of employing CHWs exceed the costs. The central research questions are:

- 1) Do CHWs improve the effectiveness and efficiency of the health care system and the appropriate utilization of services by Medicaid-eligible mothers and children?
- 2) Are services provided by CHWs cost effective and of value to payers and providers?

Evaluation Design

To avoid falling into traps that have plagued other evaluation efforts, this evaluation will be limited to determining the costs and benefits associated with selected CHW services provided to Medicaid-eligible women and children. This evaluation will take into account the variability among CHW programs in areas such as training, employment, activities, services, reimbursement methods, and population demographic characteristics, and will focus on carefully selected programs, populations, and services, and on measurable outcomes. The specific methodology to be used will be discussed with the contractor selected to complete the evaluation. The conceptual framework that defines potential target populations, health conditions, CHW services, and logically linked outcomes will be defined in Phase II, as will site selection.

The site-selection factors may include factors such as the stability and quality of the program, consistency of CHW characteris-

tics, operational standardization of services provided, and ability to provide data for the evaluation without extraordinary on-site support. Selection criteria will be developed with input from the Expert Panel and the HRSA work group. The Expert Panel from Phase I is expected to be closely involved in the conduct of Phases II and III. A Request for Proposal (RFP) to implement Phases II and III is prepared and will be submitted shortly.

Funding

Currently, HRSA has received co-sponsor commitments of approximately \$1.5 million from many co-sponsors, including other HRSA Bureaus, other federal agencies, and several foundations, including the Robert Wood Johnson Foundation, the W. K. Kellogg Foundation, The California Endowment, and the Annie E. Casey Foundation.

For More Information

More information about the National CHW Evaluation Project will be shared at Unity 2002. In addition, Captain Tenenbaum can be reached at the following address:

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"Current CHA evaluations show promising results, but there is a dearth of definitive data proving the effectiveness of CHA programs."

The Advisory Council to the National Community Health Advisor Study

Community health worker policy statement approved at APHA meeting

The American Public Health Association (APHA) has been influencing policies and setting priorities in public health for over 125 years. Since 1948, APHA's Governing Council has officially adopted yearly public policy statements (resolutions or position papers) on important public health issues. At APHA's 129th Annual Meeting in Atlanta this past October, a proposed public policy statement drafted by the APHA's Community Health

Worker Special Primary Interest Group was presented for consideration and disposition by APHA's Governing Council. (The proposed statement appeared in its entirety in the October 2001 edition of this newsletter).

After input from APHA members, other CHWs and CSHO, the policy statement was formally adopted, and it will become part of APHA's official public policy base.

For a copy of the approved

policy statement, go to the APHA Web site at www.apha.org.

APHA's policy statements are available to APHA members through their searchable database by clicking on the APHA Policy Statement Database. If you are not a member of APHA and would like to receive a copy of the policy statement, you may request a copy by calling Susan Mayfield-Johnson at (601) 266-6266 or e-mail your request to Susan.Johnson@usm.edu.

APHA presentation abstract submissions now accepted

APHA is now accepting submissions of abstracts for its 130th Annual Meeting to be held November 9-13, 2002, in Philadelphia. Submissions were accepted beginning December 20 at APHA's Annual Meeting Web pages, www.apha.org/meetings. Submissions are only accepted online.

Abstracts are welcome in any

area of public health, including those that incorporate the meeting theme, "Putting the Public Back into Public Health."

Abstracts should be no more than 250 words and must include learning objectives. Authors do not need to be APHA members to submit an abstract for consideration. However, if an abstract is accepted, authors must be or

become an APHA member and register for the 130th Annual Meeting to present their material.

Final submission deadlines vary but fall between February 4-8, 2002. For more information on abstract submissions, e-mail donna.wright@apha.org or call (202) 777-2477.

"The adoption of this policy by the APHA signals the Association's recognition of CHWs' role in meeting the nation's health care needs."

Jennifer Downey
Communications
Director for CSHO

Georgetown law students work on CSHO projects (continued)

(continued from page 2)

Area Health Education Centers (AHECs) in order to further extend the role CHWs play in the healthcare system. She is researching several states to identify Medicaid waivers already in place as a possible source of funding for potential CSHO-AHEC partnerships that utilize CHWs.

Finally, if the opportunity arises, Monique may also draft language for a Medicaid waiver that proposes opportunities for programs to integrate CHW services and activities into the Medicaid reimbursement system.

If anyone has information on model programs or thinks that your program might be eligible for reimbursement please contact Monique Nolan, (202) 662-4230, or Jackie Scott, (202) 662-4228, at the Georgetown CSHO offices.

Julia Rothstein, under the

supervision of CSHO Senior Attorney Michael Tan, began a project to explore the results of the CHW Promotora Program developed in the state of Texas in the past few years. In 1999, the Texas State Legislature passed a bill establishing the Promotora Program Development Committee to study issues relating to credentialing of CHWs and to report back to the Legislature. At the end of December 2000, the committee published a series of reports detailing the ways in which Texas could establish a CHW credentialing program. As a result of the committee's findings, the Texas Legislature passed a bill creating a CHW certification and training program. Analyzing this program is the subject of Julia's project.

Since September, Julia has worked on two main aspects of

the program's analysis. First, she is evaluating the goals of the program and how those goals translated into legislation. Second, she is evaluating how the CHW credentialing legislation has been implemented. Later, Julia will evaluate whether the implementation has achieved the legislative goals and how CHW organizations and states might consider elements of the Texas initiative in the possible creation of successful credentialing programs. Ultimately, the project will outline the lessons learned from the program in Texas and its implementation. This project will provide guidance to CHW programs about the issue of credentialing.

Look for Michael, Monique and Julia at Unity. They will be sharing the outcomes of their research.

Editor's Note: Normally, each issue of Connections features an individual CHW whose work is considered outstanding. If you would like to nominate someone to be included in the "In Focus" profile in future issues, please forward that person's name and reasons for honoring him or her to Editor, Connections, Center for Sustainable Health Outreach, The University of Southern Mississippi, Box 10015, Hattiesburg, MS 39406, csho@usm.edu.

CHAN I training to be offered April 17-19, 2002

The Center for Sustainable Health Outreach will provide the Community Health Advisor Network Training Workshop I April 17-19, 2002, in Hattiesburg, Mississippi.

The Community Health Advisor Program is based on a proven, community-driven health promotion model that identifies and trains natural helpers who then seek to improve the health and nutrition status of individuals and the community at large.

The Community Health Advisor Network (CHAN) promotes and supports Community Health Advisor programs. CHAN provides a network of ongoing information, training, and technical assistance to implementing organizations. Today, CHAN is a model program of the Center for

Sustainable Health Outreach.

CHAN Workshop I is focused on community entry and program startup. The trainers will demonstrate methods used to determine which communities have the greatest potential for success with the program. Additionally, the role and selection of a community facilitator will be defined. Techniques to identify and recruit Community Health Advisors (CHAs) and steering committee members will also be explained in detail.

The training cost is \$175 and includes three days of training, lunch, and snacks each day, and a copy of the *Community Health Advisor (CHA) Program Community Facilitator Implementation Manual* and the *CHA Training Curriculum*. The

facilitator manual is written as a how-to guide, providing step-by-step instructions on implementation of the Community Health Advisor program.

The Center will also be offering CHAN Workshop II later in 2002. Workshop II deals with the actual Community Health Advisor training, the monitoring and evaluation process, and support and linkage of CHAs.

Registration is limited to 25. For more information or to register, contact CSHO staff member Susan Mayfield-Johnson at (601) 266-6266 or e-mail Susan.Johnson@usm.edu.

We envision CHWs who are valued as essential, integral, and powerful promoters of health, wellness, and disease prevention in their communities.

AA/EOE/ADA/ PPS 43355 12/01



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