

### Special points of interest

- CHAN II offered August 5-6, 2003
- APHA accepts presentation abstracts
- Unity 2003 registration form
- Unity 2003 exhibitor registration form

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## Unity 2003 to be held March 12-14 on Gulf Coast

Selecting presentations from the growing number of abstracts submitted for inclusion at Unity conferences has become an increasingly difficult task. "Not only do we have a large number to choose from, but they are all of exceptionally high quality," according to conference organizer Jennifer Downey. "The enthusiasm generated at last year's conference and the quality of these abstracts promises another outstanding conference," said Downey.

Unity 2003 will be held March 12-14, 2003, at the Grand Casino Biloxi Bayview Hotel in Biloxi, Mississippi, the site of Unity 2002. The theme for Unity 2003 is "Community Health Workers: Finding Solutions in Turbulent Times." 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 2003 is an opportunity for CHWs to share knowledge, information, and expertise with other CHWs and interested parties.

The conference will include plenary sessions with addresses from keynote speakers and panelists, as well as numerous workshop sessions. The plenary sessions will include "Federally-funded Initiatives Related to CHWs," and "CHW Coalitions and Networks."

In addition, the conference will offer workshops on CHW

education, program evaluation, special target populations, skill building, model youth CHW programs, advocacy for CHW programs, stress reduction for CHWs, and model disease-specific programs.

Exhibit space will be available during Unity 2003. A tiered pricing scale for exhibitors has been established. See page 5 of this newsletter for an exhibitor registration form.



### Unity 2003 Community Health Workers: Finding Solutions in Turbulent Times

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 Tuesday, March 11.

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 ameni-

ties, including 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 \$95 per night has been negotiated for Unity 2003 participants who book their hotel rooms before February 7, 2003.

Ground transportation from the Gulfport airport by the Casino Airport Shuttle is \$20 per person round-trip, \$12 per person one-way. This shuttle runs every hour. Call (228) 396-1212 for more information. Coastliner Transportation has a booth in the New Orleans airport at the baggage claim area. Its prices are \$35 one way and \$62 round trip. Two people can ride for \$60 one way and \$106 round trip. Call (800) 647-3957 to make a reservation. Call Casino Airport Shuttle to make a reservation for transportation from the Mobile airport.

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

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## CHAN II training to be held August 5-6, 2003

CSHO will provide the Community Health Adviser Network (CHAN) Training Workshop II August 5-6, 2003, in Hattiesburg, Mississippi.

The Community Health Adviser 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.

Participants must have completed CHAN Workshop I prior to enrolling in Workshop II. Workshop II is focused on actual community health adviser training, the monitoring and evaluation process, and support and

linkage of community health advisers (CHAs). The trainers walk the workshop participants step-by-step through the CHA training curriculum. In addition, workshop attendees participate in practice sessions. Workshop participants will also discuss how to support CHA initiatives through coalition building to link their local programs to broader networks and learn a strategic planning method to sustain their work.

The training cost is \$100 and includes two days of training and breakfast and lunch each day. Workshop participants who have completed Workshop I should already have a copy of the *Community Health Adviser*

*Program Community Facilitator Implementation Manual* and the *CHA Training Curriculum*.

Workshop participants should bring their manual and curriculum with them to Workshop II.

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](mailto:Susan.Johnson@usm.edu).

The Community Health Adviser Network promotes and supports Community Health Adviser programs. CHAN provides a network of ongoing information, training, and technical assistance to implementing organizations. CHAN is a model program of CSHO.

"No one knows CHWs like other CHWs, and presenting at APHA is our chance to tell others about the progress CHWs are making around the country"

Yvonne Lacey,  
CHW and past  
CHW SPIG  
chair

## American Public Health Association 2003 call for abstracts

The American Public Health Association is now accepting contributed abstracts for the 131st Annual Meeting to be held November 15-19, 2003, in San Francisco California. The theme of the meeting is "Behavior, Lifestyle, and Social Determinants of Health."

The Community Health Worker SPIG welcomes abstracts that address issues important to CHWs. Abstracts that are participatory in nature are especially encouraged. Special consideration will be given to papers presented or co-presented by CHWs.

The following themes related to CHWs are of particular interest:

- Celebrating the successes and challenges of CHW work: validation, retention, and stress and burnout prevention
- CHWs as activists, organizers, and agents of change: addressing community needs
- New and emerging CHW

networks

- CHWs' work with special populations
- Youth as CHWs
- Highlights of local California programs
- Evaluation and sustainability: strategies, advocacy, and innovations



### Behavior, Lifestyle and Social Determinants of Health

November 15-19, 2003  
San Francisco, CA

- Career development and education for the CHW profession
- CHWs addressing health disparities
- Other issues of importance to CHWs

The deadline for submitting

abstracts is Feb. 3, 2003.

Abstracts must be limited to 250 words or less.

Abstracts submitted for presentations in other languages are welcome, but the abstract should be written in English. An abstract can only be submitted to one section, SPIG or caucus. You do not need to be an APHA member to submit an abstract; however, if your abstract is accepted for presentation you must become an APHA individual member and you must register for the annual meeting.

Submission of an abstract implies a commitment to make the presentation at the annual meeting. All abstracts must be submitted online at

[www.apha.org](http://www.apha.org). More information about the submission process is available at [www.apha.org](http://www.apha.org).

For more information, contact the CHW SPIG program planner, Tori Booker, at (734) 944-0244 or [tbooker@tdi.net](mailto:tbooker@tdi.net).



**Unity 2003  
Community Health Workers:  
Finding Solutions in Turbulent Times  
March 12-14, 2003  
Grand Casino Biloxi Bayview Hotel  
Biloxi, Mississippi**



**Yes!** I want to attend Unity Conference 2003 in Biloxi, Mississippi!  
**Registration Deadline: February 21, 2003**

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 training, materials, and breakfast and lunch each day.

***Contact the Grand Casino Biloxi Bayview Hotel at (800) 946-2946  
for room reservations by February 7, 2003.***

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?  
See the Exhibitor Registration form on page 5.***

## Oregon Public Health Association CHW position paper

*Editor's Note: CSHO has previously publicized issue papers/resolutions supporting CHWs by the National Rural Health Association and the American Public Health Association. The Oregon Public Health Association also has an approved position paper supporting CHWs. Such papers can be used to educate others about the roles of CHWs and to show support from prestigious organizations. The Oregon Public Health Association's position paper as published follows.*

Currently, millions of U.S. residents lack appropriate and accessible health services. For people of color and immigrants, the situation is especially severe. Even when health services are available, language barriers, lack of transportation and provider insensitivity can make services inaccessible. In addition to facing barriers to care, many poor people and people of color also face environmental and social conditions including poverty, unemployment and discrimination that put them at increased risk of illness. For over thirty years, Community Health Workers (CHWs) have played a crucial role in the U.S. health care system. By recognizing and strengthening this role, we can address the underlying determinants of health and make health care more accessible and appropriate for communities throughout the U.S.

### Community Health Workers: Who They Are and What They Do

Community Health Workers, who go by many names including *promotores de salud* (health promoters) and outreach workers, are community members who participate in *capacitation* so that they can promote health in their own communities. In both the U.S. and the developing world, the historic mission of CHWs has been to help people gain more control over their health and their lives.

Some common roles of CHWs include:

- Providing cultural mediation between communities and the health care system;
- Providing culturally appropriate and accessible health education and information, often using Popular Education methods<sup>1</sup>;
- Providing informal counseling and social support;
- Assuring that people get the services they need;
- Advocating for individuals and communities within the health and social service system;
- Providing direct service (conducting screening and meeting basic needs); and
- Building individual and community capacity.

CHWs are not “extenders” or “ancillary personnel.” While CHWs may be housed in a clinic and may occasionally perform tasks such as transportation and translation, they remain rooted in the community and advocate for the community within the health care system. CHWs are not untrained volunteers. They should be well trained and are usually (but not always) paid for their work.

### Community Health Workers: Meeting Community Health Objectives

Community Health Workers can help to achieve the Healthy People 2010 National Health Promotion and Disease Prevention Objectives and the Oregon Benchmarks. They address specific health promotion factors such as changing individual health beliefs and behaviors and improving access to basic health services. Findings from CHW program evaluations suggest that the receipt of CHW services enhances client health. Furthermore, CHW programs protect and improve community health status by educating and empowering communities to seek the best solutions. CHWs do so

by developing individual decision-making skills and community leadership.

### Policy Statement

The Oregon Public Health Association supports: 1) The recognition and inclusion of CHWs as vital members of the health care system; 2) The creation of stable funding mechanisms for CHW programs; 3) Assurance that capacitation and skills are commensurate with the level of CHW responsibilities; and 4) Recognition of CHWs' contributions toward achieving the Oregon and National Health Objectives.

*Capacitation* comes from the Spanish “*capacitar*” which means “to build capacity.” The word connotes an active process that draws out what people already know, pools it with the knowledge of other community members, and helps them use their new knowledge for social change. It is associated with Popular Education, an educational methodology developed by Brazilian Paulo Freire.

Communities can be defined by geography, race/ethnicity, sexual orientation, class, and other factors or a combination of factors.

Rosenthal, E.L. et al. (1998). *Final Report of the National Community Health Advisor Study*. Baltimore, MD: Annie E. Casey Foundation.

Witmer, A. et al. (1995). Community health workers: Integral members of the health care workforce. *American Journal of Public Health*, 85(8): 1055-1057.

*If you are aware of any other state, regional, or national group that has an official statement supporting CHWs, please send the information to Jennifer Downey at [Jennifer.Downey@usm.edu](mailto:Jennifer.Downey@usm.edu) or call at (601) 266-6247.*

**“For over thirty years, CHWs have played a crucial role in the U.S. health care system. By recognizing and strengthening this role, we can address the underlying determinants of health and make health care more accessible and appropriate for communities throughout the U.S.”**

**Oregon Public Health Association**

## Lead Poisoning Toolkit now available


The Alliance to End Childhood Lead Poisoning has produced "The Community Toolkit: An Advocate's Tool for Improving Lead Screening in Your Community." This toolkit is intended for community members and advocates who believe blood lead screening is a useful tool in eliminating childhood lead poisoning.

The toolkit is divided into three sections:  
**Part One:** "Why Focus on Medicaid Lead Screening?," which reviews evidence for focusing attention on lead screening for children enrolled in Medicaid.  
**Part Two:** "How to Target Screening to Reach the Children Most at Risk," which discusses how to use patterns of lead poi-

soning as a starting point of targeted screening and summarizes important issues.

**Part Three:** "Ensuring Intensive Screening for Children in 'Target Populations'," discusses strategies for monitoring a targeted screening program.

To download the toolkit, go to <http://www.aecpl.org/> and click "Hot Topics."



### Unity 2003

## Community Health Workers: Finding Solutions in Turbulent Times

### Exhibitor Registration

Name \_\_\_\_\_

Organization name \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Telephone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_

Please check all that apply:

Please reserve \_\_\_\_\_ 6 ft. table(s) for our exhibit.

Our display is not a "table-top" display. Please reserve \_\_\_\_\_ft. floor space.

Special requests:  
 Electrical outlets \_\_\_\_\_ Other requests \_\_\_\_\_

**PRICING:**

- CHW programs: \$50 per table
- Not-for-profit organizations: \$100 per table
- For-profit organizations: \$200 per table

Please make checks payable to

**The Center for Sustainable Health Outreach**  
**The University of Southern Mississippi**  
**Box 10015**  
**Hattiesburg, MS 39406**  
 (Tax Exempt ID #: 64-6000818)

If you have questions regarding exhibits at Unity 2003, please call Susan Mayfield-Johnson at (601) 266-6266 or e-mail at [Susan.Johnson@usm.edu](mailto:Susan.Johnson@usm.edu).

"Exhibiting information about our program at Unity 2002 was a lot of fun. I was able to meet more people and tell them about our program by being an exhibitor. I met more people than I would have if I didn't have an exhibit booth."

Edna Powell,  
 Deep South Network for Cancer Control

## Manual on immigrant access to health benefits available

The National Health Law Program (NHeLP) and The Access Project have released a revised publication, titled "Immigrant Access to Health Benefits: A Resource Manual." Originally published in 2000, this manual has been revised and expanded. The manual was written for use as a resource in conjunction with an intensive training program developed by The Access Project and the NHeLP.

The manual is essentially a primer on health access for immigrants. It details and explains basic eligibility requirements for key federal and state programs and identifies issues that can be significant barriers to access to health care for immigrants and their families.

The manual includes chapters on the following topics:

- Medicaid and SCHIP for Immigrants
- Health Benefit Programs Available to All Noncitizens Regardless of Status
- State and Local Programs
- New Responsibilities for Sponsors
- Verification of Status, Confidentiality, and Reporting
- Public Charge Determinations
- Linguistic and Cultural Access in Health Care Settings

Since welfare changes were enacted in 1996, the nation's safety net for immigrants has been seriously weakened, and the impact on health care for immigrants has been particularly harsh. Loss of benefit eligibility has swelled the numbers of uninsured people and created additional demands on the services offered at clinics and pub-

lic hospitals. Fears of reporting and public charge determinations have driven many immigrants and their children out of the health care system, even when they are eligible for benefits.

Communities can begin increasing immigrants' access to health care by becoming knowledgeable, not only about the law's restrictions, but also about the opportunities that may be present for advocacy at the state and local level to fill gaps created by the law. This manual can be an important tool in this process.

"Immigrant Access to Health Benefits: A Resource Manual" is available for \$25. To order, call (310) 204-6010 or write [nhelp@healthlaw.org](mailto:nhelp@healthlaw.org).

AA/EOE/ADA  
PPS 46171.10015 1/03

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

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