MAKING THE CASE FOR CHWS: EMPOWERMENT AND ENGAGEMENT

Community health workers (CHWs) can. . .

Build trust between your organization & a community
Increase service delivery to hard-to-reach populations
Improve the health of your client population
Turn temporary aid into sustainable change
Generate new knowledge

CHWs provide vital, patient-centered care in a number of different environments. Their jobs do sometimes overlap with other care professions, but CHW work goes beyond that of case management and health education to promote patient engagement. Patient engagement indicates a patient's active involvement with their health, which can take the form of clearly communicating with a provider, understanding what the provider is doing and why, and adhering to behavioral changes and medication use that supports their health.[1] Each patient's experience of healthcare is shaped by their culture, environment, society, family, and history.[2] Many patients from communities that have been marginalized or exploited come to healthcare with a sense of distrust, limited access to education, and difficulties with health insurance.[3]

Fundamentally, CHWs empower members of their community to care for themselves in the face of systemic failures and exploitation. Community members recognize themselves in CHWs and feel both valued and inspired.

Trust between patient and provider teams are necessary to promote patient engagement.[4] If a patient has encountered medical errors, adverse complications, minimization of pain, and/or issues with communication, patient engagement can become exponentially more difficult to achieve. CHWs are, in many cases, the key to building trust and improving patient engagement.

CHWs build trust through. . .

1) Clear communication. CHWs are able to take the time needed to ensure that a patient understands what their medication is for and how it should be taken. If patients and providers do not speak the same language, or have different levels of fluency, CHWs can sometimes assist with translating for their clients.

2) Building new connections. Medical occupations are sometimes associated with historic tensions for many patients due to previous exploitation of a community or a personal experience. CHWs, who are members of a patient's community, are not associated with those ideas. CHWs can also help overcome implicit bias of providers and improve patient-provider communication, diagnosis, and treatment.[5]

3) Trusting patients. It is not uncommon for patients, particularly those who experience chronic illness not yet fully understood (e.g. chronic fatigue syndrome, long COVID) to have providers dismiss their experiences.[6,7] Many patients who experience traumatic procedures have had their concerns minimized or denied by providers.[8] CHWs can help identify these circumstances and advocate for patients.

4) Motivating patients. Another key difference in CHW mindset is that they are trained to guard against assumptions. CHWs do not automatically assume failure (e.g. to adhere to a diet, to take a medication) on the part of the patient. Instead, they will validate a client's frustration, stress, and anxiety that can be associated with ill health. CHWs use strategies like motivational interviewing to empower their clients towards health-affirming behaviors. Fundamentally, CHWs empower members of their community to care for themselves in the face of systemic failures and exploitation. Community members recognize themselves in CHWs and feel both valued and inspired.

This mindset and skills are unique to CHWs. There are, as of now, no other occupations positioned to conduct this work in this manner.

References

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