



a vision of Claudia Lacson

## **BUSINESS PLAN FOR THE PROMOTORES DE SALUD INITIATIVE**

### **MARKET RESEARCH**

Beginning in the 1950's, Northwest Georgia shifted from that of a largely agricultural economy to a mostly industrial one. This shift was the result of the explosive growth of the local carpet industry. Currently, over 70% of the world's tufted carpet is produced in the Northwest Georgia area generating over \$6.5 billion in revenue each year. While the emergence of a worldwide industry brought jobs to the region, it also created large semi-skilled workforces, many who frequently move from job to job. The demographics drastically changed with Hispanics moving into the community often bringing children with them. Many of these adults and children have chronic untreated health problems and inadequate or unhealthy family support systems. Most of them do not speak English, do not know how to navigate our health care system nor can they afford quality health care services.

According to the U.S. Census Bureau, Whitfield County has an estimated 2003 population of 87,833 with over 23% being Hispanics. Overall in the state of Georgia, Hispanics account for 5.2% of the population. It is the consensus of many in the community that the Hispanic population rate is under-reported. Even so, over 60% of the children in the city school system are Hispanic and in some schools, the percentage is over 80%.

Targeting the medically underserved (17% uninsured in this region), a new Hispanic health care outreach program, promotores de salud (community health workers) are bringing immigrants into care and increasing their education on health issues. Does our community need promotores de salud? Three scenarios occurred recently in our community demonstrating:

- (1) Lack of prenatal care: Too many stillborn babies are delivered to Hispanic mothers
- (2) How do you use health insurance: As Dr. Pablo Perez, a Volunteer in Medicine & Dentistry physician, was caring for a woman at our free clinic, he initiated a conversation about health insurance. She opened her purse and showed him a valid health insurance card from one of our major carpet manufacturers but she had no idea how to use it.
- (3) Insensitive – lack of customer service skills: A young Hispanic man went to a clinic to be tested for AIDS. He was embarrassed and wasn't sure how to ask for the test in English, so he wrote his request on a piece of paper. The receptionist, in a loud voice, replied, "Oh, you want an AIDS test!"

Yes, our community needs a promotores de salud program. The leadership of our community is adamant that these types of stories must not continue in our community.

In targeting a program to focus on the needs of our Hispanic residents, focus groups were conducted. Following is a recap of the major barriers identified relating to health care needs:

- Language is the primary barrier. Interpretation services are often non-existent in many health care settings; interpreters and bilingual health care professionals are needed to bridge service gaps.
- Many do not have the financial resources or insurance and/or enough income to cover living expenses and health care costs. Many must send a large portion of their income to family in their home country. Some who are employed cannot afford the offered health insurance for

themselves or for the entire family. Many are told by the provider receptionist that if they don't have insurance, they must pay the full amount in advance of seeing the doctor. If a payment plan could be negotiated, that would be acceptable to them. Cultural trends indicate that if Hispanics can't pay and are told they have to pay in full, they don't go for care. Advocacy is needed to help negotiate payment plans, as Hispanics tend to be dedicated to repayment.

- Many do not have transportation to access health care, especially during traditional office hours. When the family does have transportation, it may not be available until after work hours. Many are reluctant to ask for time off work to access health care fearing long waits to see physicians and dentists.
- Fear is a major barrier faced by many undocumented immigrants in seeking health care. This is especially the case in seeking prenatal care, as they desire their children to be born as US citizens.
- Many are not aware of the various health care services that are available based on income or ability to pay. It is important for them to learn how to navigate the health care system.
- Some use the hospital emergency room for primary care, often because family transportation is not available until after the worker in the family returns from their shift work.
- Preventative health care with regular checkups (medical and dental) is not customary in their home country. Women may never have had a pap test or an age appropriate mammogram and don't know to use self-breast exam. Many older women have delivered multiple births without medical care. There are cultural barriers to oral health care, including myths that it is okay for baby teeth to decay because they'll come out anyway.
- There are concerns about the influence of American culture (drug abuse, drugs used for date rape, and the television "couch potato" syndrome) on adolescent immigrants and first generation teens.
- Gender factors – Health insurance benefits may be valued more highly by Hispanic women than men, especially those women with children. Men view income and take home pay as most important in making insurance enrollment decisions. Because of male family provider responsibilities and work ethics along with their limited experience with health care, many Hispanic men tend to postpone medical and dental care until they are in pain or discomfort to the point they are afraid they will lose their job if they don't get an intervention.

Because of the rapid influx of Hispanics into our community, appropriate tools for communication and education have not been developed in a timely manner. The concept of community health workers is innovative in the state of Georgia. Our community learned about promotores de salud when the Healthcare Partnership participated in a program called the National Community Care Network Demonstration Program (CCN) funded by the W. K. Kellogg Foundation and administered by the Health Research & Educational Trust of the American Hospital Association. As we listened to stories from the El Paso, Texas site describing progress that their promotores had made over many, many years, it became clear that this type of program needed to move east to Georgia. During the development cycle of the promotora program, Judy Pair from Mohawk Industries, Claudia Lacson of the Georgia Health Policy Center and Nancy Kennedy traveled to El Paso to learn the details of their program from implementation to delivery. In addition, in March 2004 our community hosted a Leadership Training that included 51 participants interested in supporting such a project in Murray and Whitfield Counties. This two-day session was facilitated by:

- Jim Hastings, Associate Director, Texas Tech University Health Sciences Center Office of Border Health and West Region Program Director, Health Education Training Centers Alliance of Texas
- Lorenza Zuniga, Promotora Program Development Coordinator, Texas Tech University Health Sciences Center Office of Border Health, a veteran Promotora de Salud and a member of the Texas Department of Health Advisory Committee for Training and Certification of Community Health Workers

The purpose of the Promotora de Salud Leadership Training Program was to help leadership from our community:

- understand the concept of promotoras
- describe the different roles of promotoras in communities
- identify elements of promotora program development
- review training concepts
- assist in developing an implementation plan

This innovative approach, promotores de salud, is having a large impact on our Hispanic residents because the promotores are trained to work directly with newly arrived immigrants through the hospital, the hospital's HealthMobile unit, the health department, employers and the school systems to insure that health care and health education is accessible. Hamilton Medical Center has committed one of its 40-foot HealthMobile units to the promotores de salud program to house education and health literacy programs. It will be strategically parked at the International Inclusion Center, which is located in the heart of the Hispanic neighborhood.

## **OPERATIONS**

Promotores are addressing illegal/undocumented concerns and fear of deportation as barriers to seeking health care. Health screenings are encouraged as appropriate. For instance, high rates of TB are suspected based on national trends of immigrants, but health care promotion is needed to include testing and treatment targeting those in poultry production and high Hispanic employment sites. Hispanics need health care promotions to reduce tobacco use, obesity, diabetes, hypertension and cardiovascular diseases. Because most of the immigrants do not speak English, the promotores or community health workers provide interpretation and/or translation as part of the circle of caring for these patients. In response to the Congressional Minority AIDS initiative, promotores have provided the North Georgia Health District with bilingual HIV educators. Promotores de salud have also been contracted by the Health District to serve as bilingual oral health educators for the Georgia Access to Dental Services pilot project. This project targets young children especially those with special needs including families with limited English proficiency.

Five core roles have been identified in which the promotores de salud will conduct their work and measure their progress:

Role #1: Creating a bridge between the community and health system by:

- providing education on how to use the health care system teaching where/when to seek advice
- assisting the community in applying for appropriate services
- educating health care and social service providers about community needs
- facilitating patient-provider communication

Role #2: Providing culturally appropriate health education and information by:

- teaching concepts of health promotion and disease prevention
- teaching self-management of chronic diseases

Role #3: Assisting people in getting the services they need by:

- case finding
- making referrals
- providing follow-up

Role #4: Providing informal counseling and social support by:

- individual support
- forming/leading support groups

Role #5: Serving as an advocate for individuals to help them meet their health care needs by:

- advocating for individuals at a basic level
- helping clients to meet their basic needs
- administering a City of Dalton HUD mini-grant to assist with acute care pharmaceuticals for the indigent and uninsured

**PERSONNEL**

The director of the promotores de salud initiative was hired in December 2003. América Gruner was born and educated in Mexico City. She holds a BA in Psychology with experience in developing a mental health program for Hispanics in our community. América is a leader in the Hispanic community and extremely well respected. In addition to América, there are three promotores.

**ORGANIZATIONAL CHART**

