



AMERICAN PUBLIC HEALTH ASSOCIATION  
*For science. For action. For health.*



## CHW Section Quarterly Newsletter



# COVID-19 Conversations




The "COVID-19 Conversations" series of rapid-response webinars from the National Academy of Medicine and the American Public Health Association is addressing the state of the science on COVID-19 and explore emerging evidence on how to best mitigate its impact. Led by a panel of expert advisors chaired by Carlos del Rio and Nicole Lurie, the series features trusted experts in such fields as public health, infectious disease, risk communication, and crisis standards of care. The series is providing trustworthy scientific analysis of important developments in the COVID-19 response to inform policymakers, public health practitioners, clinicians, business leaders, and scientists.

All webinars will be recorded and posted to this website: <https://www.covid19conversations.org/>

The National Academies of Medicine and APHA are responding to the COVID-19 outbreak.

To learn more, visit:

- [NAM Coronavirus Resources](#)
- [APHA COVID-19 and Get Ready](#) pages
- [Public Health Newswire](#)

### Other upcoming APHA COVID-related Webinars

[Questions about Disabilities and COVID-19](#) APR 30 2020, 4:00 PM - 5:30 PM EST

[Mental Health in Pregnancy and Postpartum During COVID-19: Clinical Tips and Strategies for Helping Your Patients Manage Anxiety](#) MAY 07 2020, 1:00 PM - 2:00 PM EST

[Alcohol and COVID-19: A Dangerous Mix](#) MAY 08 2020, 2:00 PM - 3:30 PM EST





# Who is Listening to CHWs During COVID-19?

Denise Octavia Smith, MBA, CHW, NACHW Executive Director;  
Julie Smithwick, LMSW, CHW—CHW Section Members



As the COVID-19 pandemic deepens its impact on communities of color, many Community Health Workers (CHWs) have valuable insights from the frontlines of emergency response – but few public and private emergency response teams may be hearing them. “I’ve had difficulty getting a response from the emergency response teams in my community. I’ve called, emailed the city, joined their Facebook groups, answered their questionnaires, etc. It is very frustrating,” shared one CHW in Massachusetts. Another CHW working in the DC area can’t find the information he needs to educate and protect individuals living with HIV. “I’m getting a lot of questions and I’m trying to calm them down. I need information.”

### CHWs are Critical Infrastructure Workers

CHWs were identified as “essential critical infrastructure workers” in guidance issued to public and private sectors by the U.S. Department of Homeland Security on March 19, 2020, with a “special responsibility to maintain...normal work schedule[s]”. CHWs [including promotores and community health representatives (CHRs)] are frontline public health workers whose shared language, culture and experience with communities helps them establish trust and build bridges between health and social services and communities.

Yet according to survey data and national calls with CHWs hosted by the National Association of Community Health Workers (NACHW), some are being laid off or furloughed and, if they are working, may still feel disconnected from state and local emergency response efforts.

In early March, NACHW launched an informal national CHW COVID-19 survey that has gathered hundreds of CHW responses so far; it will remain open for the duration of this pandemic. The survey asks CHWs to describe their experiences and information, resource and self-care needs.

Survey respondents indicate that less than 45% of the information they are receiving from government and employment sources is culturally appropriate. Whereas, 26% of respondents are having difficulty accessing basic low-literacy accurate information for community education activities, and 17% cannot connect their clients to basic needs.

### Meaning Contributions to COVID-19 Response

For CHWs who are being deployed for emergency response, some point to lack of respect for CHWs as professionals who can meaningfully contribute to service delivery adaptation. One survey respondent shared, “I would like to be included in the planning rather than being told something after the fact. I feel what I am expected to do is being decided without my input.”

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Public and private entities can partner with CHWs and their local or state CHW Network and Associations in responding to the COVID-19 emergency to improve culturally and linguistically appropriate community education, coordinate services to address social drivers of well-being, implement screening and contact tracing, and lead innovation and compassionate care among vulnerable communities – and by doing so, can help ensure that those that are getting hit by COVID-19 and health inequities the hardest, will get the resources and support they urgently need.





# Tech Enabled CHW Program Aids Remotely in NYC

David Shilane PhD, Faculty in Applied Analytics, Columbia University & CHW Section Member; Enrico Cullen MA Chief Strategy Officer, AIRnyc



COVID-19 has laid bare the deficiencies in our health and social care systems, especially supportive and preventative care at the community level for the most vulnerable populations. Community Health Workers (CHWs) are well positioned to provide assistance in programs designed for agility to address multiple conditions in diverse settings. In New York City, AIRnyc operates a tech-enabled CHW program to help residents with low wealth manage chronic conditions including asthma, address associated social needs, and provide care coordination, historically conducting home-based services. COVID-19 disproportionately impacts the communities AIRnyc serves.

During COVID-19 AIRnyc rapidly shifted its operations and retrained its CHWs to remotely support patients with emerging health concerns and social needs. AIRnyc collaborated with health plans and hospital systems to recalibrate its interventions to adapt to this crisis. An assessment of COVID-19 needs was developed, and existing assessments of the patient’s control of chronic conditions, home environment, and social needs were simplified to reflect shorter interactions with the patients.

The program also focused on medication adherence, preventing exacerbations of chronic conditions, and avoiding unnecessary medical utilization. The CHWs supported food access and collected real-time information on the availability of food pantries and other supportive agencies. They reinforced medical and social distancing guidelines, encouraging patients to stay home and seek telehealth solutions to medical problems. Improved clinical coordination and escalation of cases allowed patients to save weeks for appointments to speak with clinicians, fill prescriptions, and receive timely deliveries.

These circumstances offer new opportunities to serve patients with CHWs. Relative to its prior home-based model, AIRnyc reaches 40% more patients over the phone in initial scheduling. Telephonic engagement and simplified assessments enable the organization to serve approximately 3 times as many patients with the same staffing levels. A second model utilizes mass texting and follow-up calls to patients in partnership with health plans and health systems to offer support in locating food pantries and other social services.

Scaling these programs has allowed AIRnyc to better serve our communities and may provide a model for the development of broader services led by CHWs.

For more information about our efforts, visit: <https://www.air-nyc.org/>

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## CHW News & Articles

[AJPB CHW Intervention in Subsidized Housing](#)

[Reuters Ethiopia taps army of women health workers to fight coronavirus](#)

[Dallas Morning News Could a new public health corps create jobs while battling COVID-19?](#)

[Elsevier National UK programme of CHWs for COVID-19 response \*subscription required\*](#)

[Devex Opinion: Why community health workers matter now more than ever](#)



# Storytelling in Public Health

Andree Entezari—Program Assistant, Activist Lab, Boston University School of Public Health. CHW Section Member



## *How can you effectively convey your public health message using storytelling?*

Working with public health teams, many Community Health Workers (CHWs) struggle to put the excellent work they are doing into a coherent story

when conveying their message. As more and more teams are realizing, stories are an effective method of communication. Organizations have started to put more of their resources into training their staff to be effective storytellers. CHWs are trusted member of the community they serve, therefore it is crucial to understand their story's goal, who their audience is, and what message want to convey or send. Storytelling allow us to do that.

The New England Public Health Training Center offers a free 1-hour online course titled [Storytelling for Public Health](#). This self-paced course introduces storytelling as an effective communication tool in public health practice.

After reviewing story structures, learners will review public health stories in multiple formats and outline their own story using a storyboard. The course outlines the important elements of stories and highlights two formats that you can use to frame your story. After reviewing real public health examples in a variety for formats, try outlining your own using the interactive storyboard!

### More Details

- **CEs Offered:** Certified Health Education Specialists (CHES) and/or Master Certified Health Education Specialists (MCHES)
- **Competencies:** Communication Skills
- **Learning Level:** Performance – learners will be able to outline a story using a storyboard.
- **Pre-requisites:** None

### What you'll learn

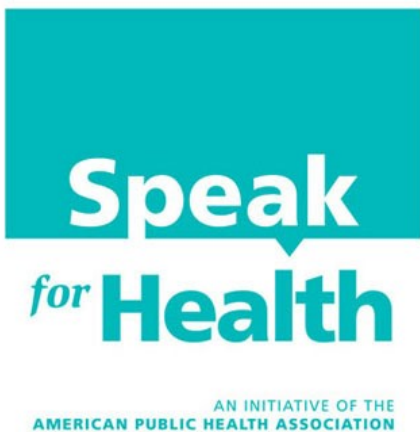
After completing this course, you will be able to...

- Briefly describe the history of storytelling
- Explain why story is an effective means of communication
- Define the subject, audience, goal, and delivery format options for a story
- Define the elements of a story: hook, inciting incident, protagonist, antagonist, tension, climax and conclusion
- Explain two story formats: Story Mountain and the Journey Curve
- Describe how a storyboard is used to outline a story
- List questions to ask yourself when creating your title
- List ethical consideration of storytelling
- Outline a story in storyboard format



# APHA Action Board Update

Katie Sutkowi, MSW CHW Section Action Board Representative, Action Board Chair



This year is a great year to **#SpeakForHealth** ! It's an election year, it's a Census year, and it's a year with a lot of public health funding and regulation decisions (e-cigarettes, gun violence, COVID-19, etc.). There's no better time to find a way to get loud for public health. Here's a few ideas:

## 1) Complete Your Census Form, and Tell Everyone Else to Do it, Too!

The Census is a critical component to public health. Understanding our population has serious consequences, ranging from determining the number of U.S. representatives per geographic area to allocating resources. This article in the American Journal of Public Health (co-authored by last year's Annual Meeting opening speaker Sandro Galea!) highlights why the Census is so important for public health, as does this great article in The Nation's Health (the Feb/March 2020 issue!). The Census also helps determine funding allocations based on population size, including funds for Medicaid, WIC, and CHIP (see this summary by Georgetown).

There is a lot of fear that this year's Census will undercount people because of controversy about a citizenship question. **There is no question about U.S. citizenship on the Census.** The best action you can take is to complete your Census form when it comes (notices were sent starting March 12!) and encourage others around you to do the same.

## 2) Vote Public Health!

It's a presidential election year, but we also elect officials at the local, state, and federal levels. Do you know where your candidates stand on public health? Before you vote, learn about each candidate's platform and look for questions about public health. Remember! It might not say public health. You might need to look for their stances on climate change, the environment, social safety net support, and health care.

If you're electing any new senators or representatives, you can also check APHA's Congressional Vote Record (from the Feb/March 2020 Nation's Health issue!) for any individuals currently in office. If your elected official is running for office again, do you know how they voted on key public health issues? Check it out!

## 3) Respond to Action Alerts!

APHA issues action alerts on key public health issues. It takes less than two minutes to respond and is a great way to let your elected officials know that you care. Want to know what alerts we have active now? Check out the Action Alerts page on APHA's website.

## Get out there and **#SpeakForHealth** in 2020!

For questions, comments, share pictures, or other media from your public health advocacy efforts, email [aphaspeakforhealth@gmail.com](mailto:aphaspeakforhealth@gmail.com)

Learn more about Speak for Health on APHA's site [here](#) and be sure to use our hashtag **#SpeakForHealth** on social media!