

Proposal for Universal Access to Bilingual Community Health Workers at Cincinnati Healthcare Facilities

Introduction

Facilitating comprehensive healthcare for immigrant populations in the U.S. is an increasingly complex challenge. Beyond insufficient access to insurance, sociocultural and language barriers make it difficult for immigrants to navigate healthcare systems and receive the social services from which they are meant to benefit. For decades, initiatives to incorporate community health workers (CHWs) into healthcare teams have demonstrated measurable benefits in health outcomes and greater attention to the health-related social need of underserved populations. As our project on immigrant maternal health with Su Casa Hispanic Center demonstrated significant barriers to utilizing community resources (Figure 1), we are proposing an initiative for universal access to bilingual CHWs across Cincinnati hospital systems to support the wellbeing of immigrant communities.

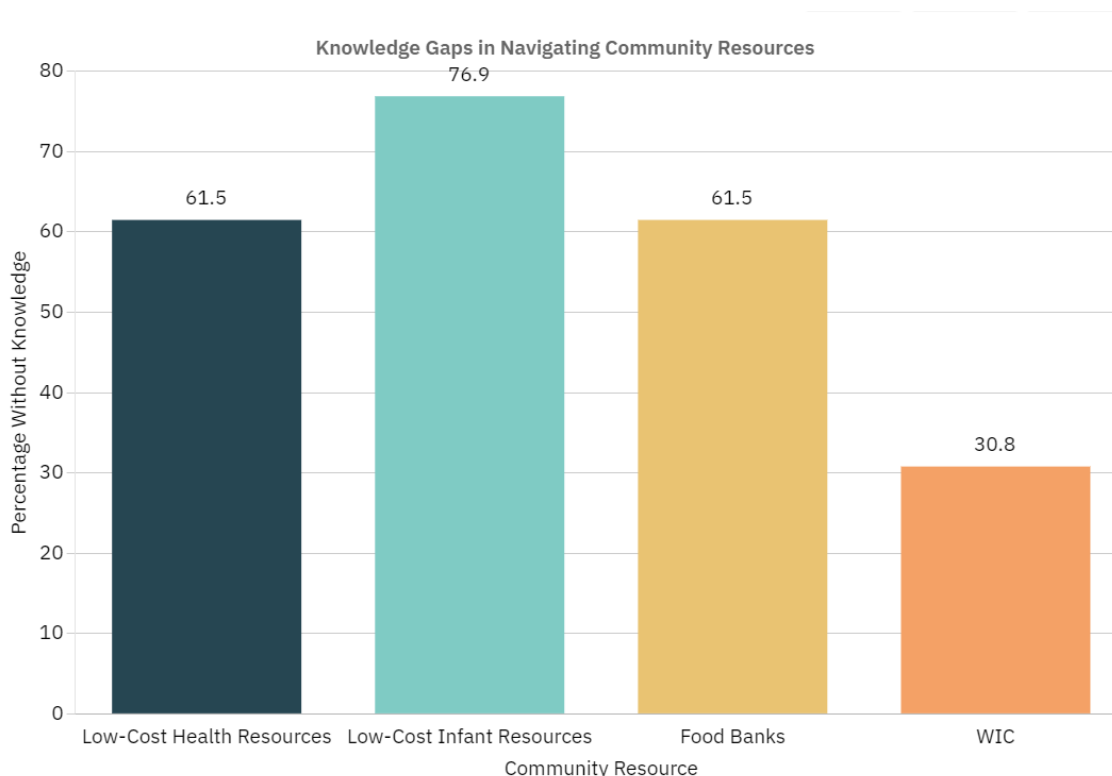


Figure 1: Proportion of Latina mothers at a community baby shower reporting “no knowledge” of specific Cincinnati resources.

Data Analysis and Community Impact

CHWs are frontline public health workers who are trusted community members and function as intermediaries between healthcare providers and community resources¹.

Unlike social workers, CHWs typically lack higher education but are uniquely capable of advocating for marginalized groups given their lived experiences with barriers that limit culturally competent care. In many hospital systems, CHWs work longitudinally with patients to provide care coordination, health education, social and literacy support, and medication management. In the U.S., integration of CHWs into medical teams has many positive benefits including reduced hospitalizations, improved management of chronic disease, increased primary care utilization, and improved birthing outcomes^{2,3}. Acquisition of resources that influence health such as housing assistance, food security, and transportation is also enhanced when patients work with CHWs, as more than 78% of patients in one study were successfully connected to social services when paired with a CHW⁴. Ultimately, research consistently emphasizes the need to secure funding for CHW programs as bilingual CHWs improve health outcomes, perceived hopefulness, and social support in Latino and other immigrant communities^{5,6}.

Policy Analysis and Recommendations

When reviewing legislature that supports employment of bilingual CHWs, House Bill 390, Section 124.181 of the Ohio Revised Code in combination with Rule 123: 1 – 37 – 06 declare that any state government agency, including public or nonprofit hospital agencies, may grant special pay supplements to attract new or support current bilingual employees whose positions involve speaking or writing in a non-English language^{7,8}. The supplement is an additional 5% pay increase to the salary base for each foreign language used within a position, and thus has great potential to help build a workforce of CHWs in Cincinnati.

In regards to training new CHWs, there are clear guidelines put forth by House Bill 216, Sections 4723.87 and 4723.88 of the Ohio Revised Code that any person wanting to implement a training program for CHWs must submit an application to the board of nursing for approval⁹. This board oversees CHW certifications and assesses competency, quality, and pricing of services to ensure standardization across programs. This is advantageous for hospitals without current CHW programs as it provides a streamlined mechanism to ensure their programs are up to national standards.

Advocacy Strategy

Current utilization of CHWs in Cincinnati is limited to programs within TriHealth, Cincinnati Children's Hospital, and the Public Health Department that focus mostly on maternal health. While these initiatives have successfully assisted certain patients with appointment scheduling, health education, and acquisition of resources, benefits are reserved for those accessing care at these facilities. As such, ensuring access to bilingual

CHWs across all hospital systems and specialties is essential to promoting equity among the greater Latino population, regardless of where they seek care.

Strategies for integrating CHWs into healthcare are multi-fold and require coordination between public health agencies and hospital systems. First, funding must be established to either run one central CHW program via the public health department or institute hospital-independent programs. Then, recruitment of trusted community members who could serve as CHWs must occur, likely involving outreach to nonprofits to connect with those familiar with Cincinnati's marginalized populations. A central training program for CHW certification could be adopted across hospitals, perhaps based on the curriculum offered through Cincinnati State University's CHW training program. Finally, it may be worth exploring how to incentivize hospitals around Cincinnati to employ CHWs.

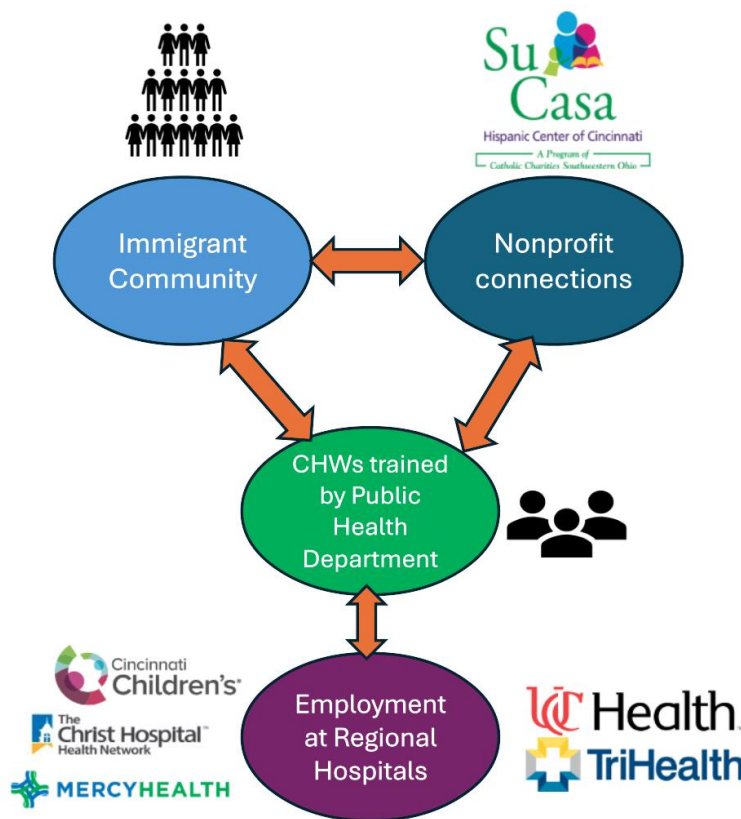


Figure 2: Schematic for recruitment, training, and integration of CHWs into Cincinnati hospital systems.

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