



COMMUNITY HEALTH INNOVATIONS OF RHODE ISLAND

CHI-RI News –April is Community Health Worker Month!

Thanks to Providence District 11 Representative [Grace Diaz \(D\)](#), and her sponsorship of Resolution 11-202, April is "Community Health Worker Month" in Rhode Island!

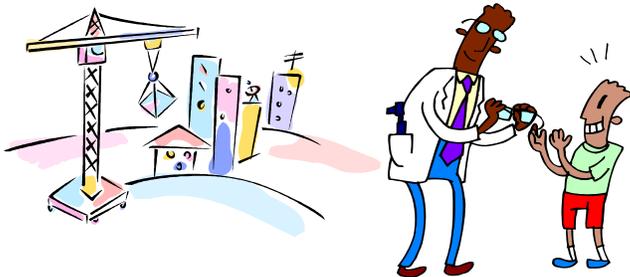
On Friday April 26th from 5:30 to 8:00 p.m., we will celebrate "Community Health Worker Month" with a networking event. Join community health workers and other community stakeholders. Spread the word about the link between health, community development how community health workers can connect them! **The MET School Center for Innovations and Entrepreneurship (E Center), 325 Public St, Providence, RI**

Community Development and Health and the work of Community Health Innovations of Rhode Island

Community Health Innovations of Rhode Island's (CHI-RI) continues to contribute to the dialog on the link between health and community development. Additionally, our work in Community Health Worker (CHW) workforce development helps Rhode Island gear up for the roll-out of the Affordable Care Act (ACA) in 2014.

In November of 2011, the [Robert Wood Johnson Foundation](#) (RWJF) completed a year-long study with a number of stakeholders, including the [Federal Reserve Bank of San Francisco](#), which linked community development (CD) and health. That study was the subject of a special edition of the journal [Health Affairs](#), where "emerging synergies among community development, health care, and public health" were discussed.

Community health and development has always been at the core of the Transcultural Community Health Initiative (TCHI) and its programmatic off-shoot, [Community Health Innovations of Rhode Island](#) (CHI-RI). This is a topic that



we rarely discuss more fully because community development conceptually is often reduced to or becomes synonymous with

the bricks and mortar of housing, in a similar way, health is reduced to clinical care – hospitals, and medical centers. With the time and effort it takes to overcome the hurdle of distinguishing *health* from *health care*, it often feels too large a task to discuss health and community health in the same breath with community development. But thanks to RWJF, they took this task on for us!

CHI-RI is community-centered and community-based. Our goal is to build a labor force of community health worker teams. One of our most important objectives is to create a career path toward that goal. CHI-RI wants to build a strong foundation for community health workers who connect with people and who identify and build community on existing community resources and beyond. The rationale is that



for many in the community the point of entry to address their needs is with trusted community members and/or organizations. This does not mean that CHWs are not needed or useful in clinics, hospitals or health centers. Rather, it provides another avenue to identify ways to improve the health of the community since traditionally clinical care institutions have not been the place to the support social needs of the community at large. Though some provisions of the ACA require that clinical

care be more attentive to the community at large, we expect that this attention will not be sufficient and CHWs will serve an important role in meeting this provision. (See more on the ACA, and CD in [The Affordable Care Act: Implications for Community Development](#), in Shelterforce from the [National Housing Institute](#))

BCBSRI Extends our Community Work and a Clinica Esperanza Navegante Program Grows

Two BlueAngel Community Health grants from Blue Cross and Blue Shield of Rhode Island and a grant from the Rhode Island Department of Health (through Clinica Esperanza) have provided us the opportunity to build more community-based, community health-worker programs. These grants are serving racial/ethnic and vulnerable communities in Rhode Island such as the multicultural team of CHW/Navigators based in a clinical setting at [Clinica Esperanza](#).



BlueAngel CHI-RI Mount Hope and the Southeast Asian Graduation October 2012.

Our BlueAngel grant will allow us to build on the teams in the Mount Hope community started at [CSCM \(Camp Street Community Ministries\)](#) and in the Southeast Asian community in Woonsocket and beyond. A new group of community members will participate in the entry-level core skills CHW course for both. Upon successful completion of the skills course they will be a vital part of the CHW community teams that develop programs to respond to community-identified issues. The community-based health teams we create will be better established, available, and responsive to the demands of their constituencies.

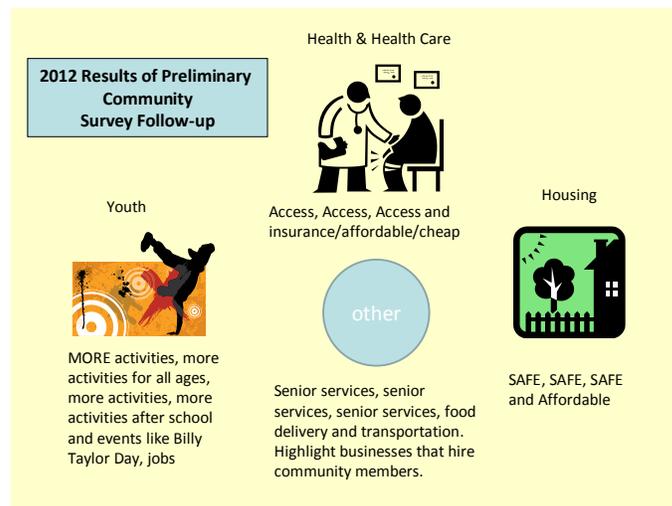
Clinica Esperanza’s Navegantes have had additional training in research ethics as well as training for their role as

enrollment counselors in the upcoming Health Exchange. These recent graduates will be sent to work on Clinica Esperanza’s Vida Sana health literacy and physical activity program. This exemplifies CHI-RI’s stand alone model; where the core skills course is followed by additional modules to respond to the needs identified by the organization and community. More career path options continue to be a goal for the future.



Clinica Esperanza graduates 15 CHW/Navegantes as part of a Department of Health grant to create a Center of Health Equity and Wellness

Our teams from Mount Hope, the Southeast Asian Community, and Clinica Esperanza put in place an infrastructure for work on community-identified health issues. For the Mount Hope community, we updated our community organizations assets map and reviewed past interview assessments of community members who either attended community forums or sought nutrition assistance at the food pantries at CSCM and Mount Hope Neighborhood Association. Below is a summary of the challenges identified. (Click for [Mount Hope Assets Map](#))



The first area of focus was mapping housing issues. (See map below). We then established organizational support

