

**Testimony Supporting
S.B. 859: An Act Concerning Community Health Workers**

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Public Health Committee
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Senator Abrams, Representative Steinberg, Senator Somers, Representative Petit, and esteemed members of the Public Health Committee,

I am testifying today on behalf of Connecticut Voices for Children, a research-based child advocacy organization working to ensure that all Connecticut children have an equitable opportunity to achieve their full potential.

We strongly support S.B. 859 and the establishment of a community health worker certification process as a step towards health equity in Connecticut. Community health workers come from the communities where they work and address barriers to health care and unmet needs. Such support can close the gap between a person's life circumstances and the treatment available through traditional health systems. Community health workers also expand the workforce capacity of our health systems and save money by improving health outcomes and reducing emergency room use.¹

This proposal enables the Department of Public Health to adopt a certification pathway for community health workers and is in alignment with the guidelines developed by the State Innovation Model Community Health Worker Advisory Committee—a multi-sector task force that included input from community health workers, clinicians, and the Department of Public Health, among others. The report² lays out concrete, carefully considered parameters for community health worker certification. Ten states currently certify community health workers or issue certificates for completing training.³ This effort to recognize and certify the profession of community health worker in Connecticut will allow these positions to be sustainably funded and expanded, ultimately helping to address health disparities.

Connecticut is highly segregated by both race and income and demonstrates dramatic racial disparities in health outcomes.⁴ A preponderance of evidence shows that these disparities persist when controlling for factors such as education, health insurance coverage, and income.⁵ These disparities are the result of historical oppression and systemic racism and are tied to social and environmental factors—some of which can be addressed through low-cost, practical interventions including community health workers.^{6,7}

People face a number of barriers to good health—from difficulty paying the co-pay on a prescription to adapting nutritional advice to their budget and food preferences. Other barriers include the influence of the physical environment (including safe housing conditions), economic status, language, transportation, cultural norms, and comfort navigating the state's social services and health systems.⁸

Community health workers in Connecticut and in other states address these barriers by, for example: serving as a liaison between people and the health systems with which they interact (clinics, pharmacies, labs, etc.), connecting people with the services they need (such as fuel or housing assistance), helping people to make appointments or identify providers, and offering in-home advice based on their training and experience (for example on breastfeeding or managing asthma).^{9,10} Around the world, community health workers expand

health systems, meet people where they live, offer culturally competent advice, and provide the time and understanding that people need to overcome barriers to health. A number of studies suggest that community health workers who focus on specific needs or conditions can improve health outcomes.^{11,12,13} Creating a certification process for community health workers will allow Connecticut to sustainably fund and expand its community-based health workforce and advance health equity.

Thank you for the opportunity to testify in support of S.B.859. I can be reached with any questions at ksiegel@ctvoices.org or at 203-498-4240, ext. 120.

¹ CHW Sustainability Collaborative. (2019). “Community Health Workers in Delivery and Payment Transformation: How New Delivery and Payment Models Can Incentivize and Support the Use of CHWs.” Retrieved from: <https://familiesusa.org/product/community-health-workers-delivery-and-payment-transformation-how-new-delivery-and-payment>

² Community Health Worker Advisory Committee. (2018) “Report to the Legislature on Community Health Worker Certification.” Retrieved from: https://portal.ct.gov/-/media/OHS/SIM/CHW-Advisory-Committee/CHW_Legislative_Report_2018_Draft10.pdf?la=en

³ Ibid

⁴ Connecticut Voices for Children. (2018) “Data to Promote Health Equity for Children and Families in Connecticut.” Retrieved from:

<http://www.ctvoices.org/sites/default/files/Data%20for%20Health%20Equity%20-%20FINAL.pdf>

⁵ Institute of Medicine. (2003). *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*. The National Academies Press. Retrieved from: <https://doi.org/10.17226/10260>.

⁶ Marmot, M. et al. (2008) “Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health.” *The Lancet*. 372:9650.

⁷ Kaiser Family Foundation. (2015) “Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity.” Retrieved from: <https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-ofsocial-determinants-in-promoting-health-and-health-equity/>

⁸ Kaiser Family Foundation. (2015) “Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity.” Retrieved from: <https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-ofsocial-determinants-in-promoting-health-and-health-equity/>

⁹ The New England Comparative Effectiveness Public Advisory Council. (2013) “Community Health Workers: A Review of Program Evolution, Evidence on Effectiveness and Value, and Status of Workforce Development in New England.” Retrieved from: <https://icer-review.org/wp-content/uploads/2016/01/CHW-Final-Report-07-26-MASTER.pdf>

¹⁰ World Health Organization. (2018) “WHO Guideline on Health Policy and System Support to Optimize Community Health Worker Programmes.” Retrieved from:

<https://apps.who.int/iris/bitstream/handle/10665/275474/9789241550369-eng.pdf?ua=1&ua=1>

¹¹ Centers for Disease Control and Prevention. (2015). “Addressing Chronic Disease through Community Health Workers: A Policy and Systems-Level Approach.” Retrieved from:

https://www.cdc.gov/dhbsp/docs/chw_brief.pdf

¹² CHW Sustainability Collaborative. (2019). “Community Health Workers in Delivery and Payment Transformation: How New Delivery and Payment Models Can Incentivize and Support the Use of CHWs.” Retrieved from: <https://familiesusa.org/product/community-health-workers-delivery-and-payment-transformation-how-new-delivery-and-payment>

¹³ World Health Organization. (2018) “WHO Guideline on Health Policy and System Support to Optimize Community Health Worker Programmes.” Retrieved from:

<https://apps.who.int/iris/bitstream/handle/10665/275474/9789241550369-eng.pdf?ua=1&ua=1>