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Health outreach teams help neighbors in need

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Soothing a sobbing 3-year-old, Veronica Vega surveyed a playroom where preschoolers painted one recent morning while their parents joined in a workshop on child development down the hall.

Vega had organized the class in Oakland's Fruitvale district, lined up guest speakers and recruited child care helpers.

"I saw that there were a lot of families with young children, and I realized parents didn't always understand the phases of development or know how to react when a child was acting out," said Vega, who signed up about 15 parents for a free 16-week series in Spanish on positive discipline, self-esteem, dental care, first aid and other topics.

Vega is part of a fast-growing grassroots network of community health advocates in California who work in low-income immigrant communities. Across the Bay Area, health "promoters" present classes on safer sex, managing diabetes and preventing domestic violence. They also offer one-on-one aid to neighbors who need advice on finding an affordable dentist or treating an asthmatic baby.

Volunteer health workers are familiar to many Latin American immigrants because the model has its roots in places such as Mexico, where more than 200,000 government-trained *promotores de salud* vaccinate children and deliver babies in rural areas.

In California, nonprofit health clinics, county health departments and even giant health maintenance organizations are embracing the approach as a way to teach healthy habits and connect residents to medical care, especially the state's 5 million uninsured and those unfamiliar with the U.S. health care maze. Some health promoters are paid staff, while others are volunteers or receive a small stipend.

Diverse communities

In recent years, the model has expanded beyond the Latino community to serve Chinese, Russian, Laotian and other immigrant groups, as well as U.S.-born citizens in underserved communities.

"It started as a way of extending health care to places where there is no doctor in Latin America, but that has been adapted in the Southwest and California," said Mario Gutierrez, a program

director at the California Endowment, a statewide health foundation focused on underserved communities. "It's a proven, effective means for increasing health awareness and community leadership and connecting a population to health providers ... and it's easily transferable to other cultures."

There are 8,000 to 10,000 community health workers in California - paid and volunteer - according to Carl Rush, a San Antonio-based researcher who just finished a study of the field for the California Endowment. Others who work with health promoters in the state estimate that their numbers have tripled over the past decade.

"California is obviously in leadership, but it is happening all over the country," Rush said.

In San Francisco's Richmond District, health educator Sasha Mosalov runs a monthly cooking class for Russian immigrants at the city's Ocean Park Health Center. Participants learn to substitute yogurt for sour cream in their borscht and celebrate the health benefits of other Russian dishes such as vinegret, a beet salad.

"We make it fun and create a sense of community as well," said Mosalov, who works for the city's Public Health Department to reach elderly Russian refugees. "They have high rates of smoking, heart disease, high blood pressure, and not many people know about healthy eating."

With the help of nine *pomoshniks*, or helpers, themselves Russian immigrants who receive a monthly stipend, Mosalov also runs a smoking cessation program, weekly walking groups in Golden Gate Park and group medical visits.

San Francisco also employs lay health workers to assist public health nurses who don't speak foreign languages, and to interview new patients and take their vital signs at its refugee medical clinic.

San Francisco's use of community health workers dates to the 1970s, when community clinics gained popularity, said Virginia Smyly, who runs the city's health promotion programs. The model has taken off in recent years.

"This whole health worker thing, it's the community that's out in front of us on this," Smyly said. "They introduced us to it, we embraced it, and we support it with funding."

Activist approach

In some cases, health promoters are going further: organizing residents to push for policy changes like banning idling trucks that spew exhaust fumes in their neighborhoods. In the Salinas Valley, health advocates with the Center for Community Advocacy are organizing farmworker communities to fight pesticide contamination in drinking water.

Several community colleges now offer courses for community health workers. Even private HMOs are jumping on the bandwagon. Health Net is starting its own health promoter training course this spring in Los Angeles and the Central Valley.

"Part of the goal is educating those that come to the United States who may not know how the system works, so whenever they get sick they don't run to the emergency room," said Rita Cruz Gallegos, Health Net's director of Latino programs. "We're also building trust, so when people are in a position to purchase a health plan they keep Health Net in mind. It's an investment."

Resources in community

At its core, however, the philosophy behind the health promoters movement is that community members can help themselves and each other.

"It's not that someone from outside is going to develop a model and sell it to the community. On the contrary, it's based on the needs and assets within the community," said Xóchitl Castañeda, director of the Health Initiative of the Americas, a project of the University of California focused on the health of Latin American immigrants in the United States.

Every year, Castañeda hosts a conference of health promoters from Mexico and the United States to share strategies for treating Mexican migrant workers who spend part of the year in California and part in Mexico.

As a result of that collaboration, the rate of HIV infection in the state of Morelos has stopped rising, Mexican health promoter Laura Tafolla said at the Berkeley conference earlier this year.

"The education we start in Mexico is continued in the United States."

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