

Promotores de Salud: *Improving Oral Health Infrastructure through Peer-led Oral Health Education and Advocacy*

Susan Bauer, MA, MPH

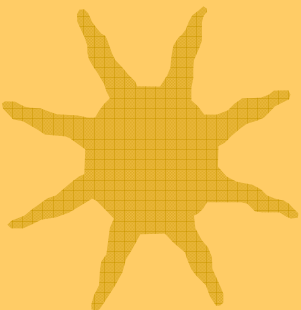
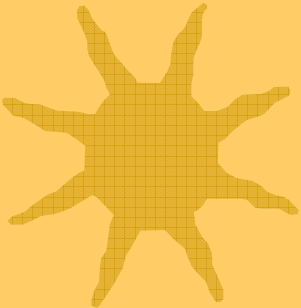
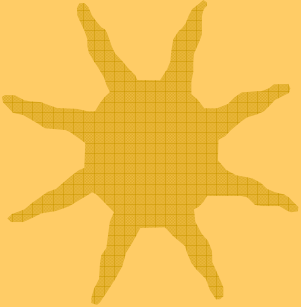
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Health People 2010: Health Care Delivery Planning, or Wishful Thinking?

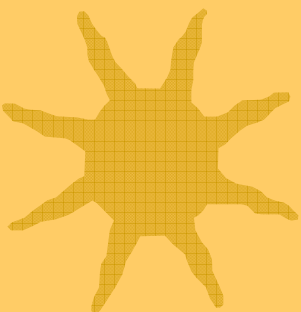
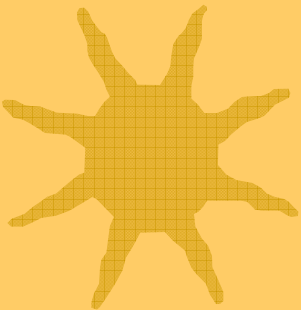
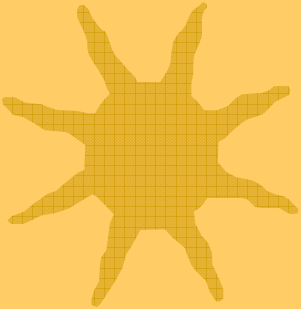
“The art of communicating, of reaching, of touching individuals effectively is perhaps the most promising hope that we have of eliminating health disparities while we mend a broken health care system headed toward financial meltdown.”

- Community Health Workers and Community Voices: Promoting Good Health (October 2003, National Center for Primary Care, Morehouse School of Medicine)

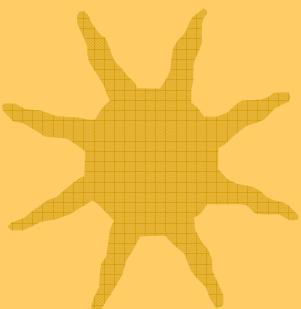
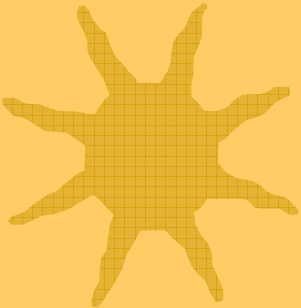
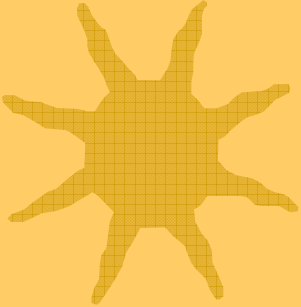


Paolo Freire (Brazil, 1921-1997)

Popular Education Model



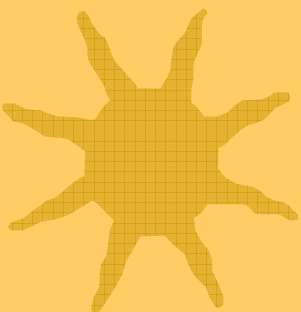
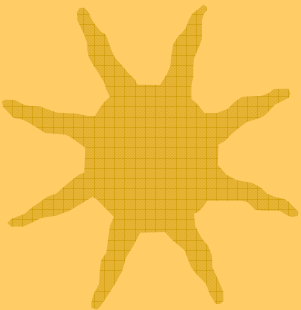
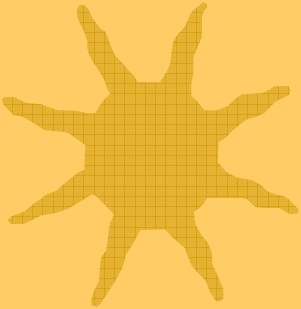
- ★ Dialogue rather than a didactic approach deepens understanding, likelihood of change
- ★ Effective education is situated in the lived experience of the participants
- ★ Praxis (Action in support of a larger social value) provides the social context, purpose for learning
ex: CHW delivered oral health education creates community self-reliance, leadership
- ★ Popular Education has the power to raise consciousness



CHP Oral Health Program for Migrant and Seasonal Farmworkers

- ★ **Statewide Migrant Health Voucher Program**
- ★ **Since 1983 Summer School-based Prevention and TX (mobile, portable equipment.)**
- ★ **Close Collaboration with Migrant Education, Head Start, IDPH, IFLOSS, DHHS Field Office**
- ★ **Partner with Private Practice Dentists, Hygienists, Assistants**
- ★ **3-chair dental clinic (2002)**
- ★ **Close working relationship with Schools of Dentistry, Hygiene (SIU, UIC)**
- ★ **2004 IL Children's Healthcare Foundation): Promotores +**





Who Are Our Promotores de Salud?

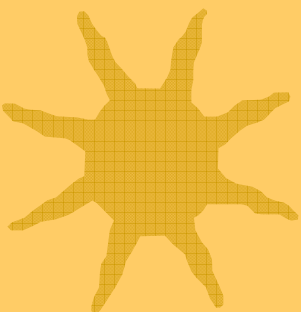
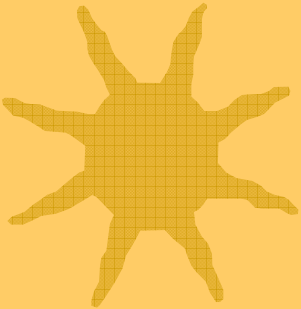
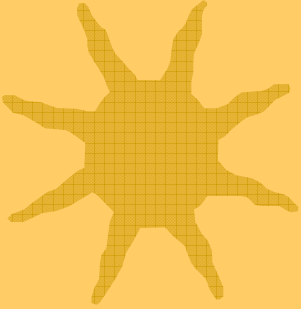


Farmworker men and women with:

- ★ natural leadership skills
- ★ interest in health, wellness
- ★ Desire to learn and share what they learn
- ★ Everyday interaction with target community
- ★ Relationship with Migrant Head Start, Migrant Education programs
- ★ Support of family to make commitment necessary to do their work, attend weekly training, etc.



Underlying Principles of CHP's Promotores de Salud Program

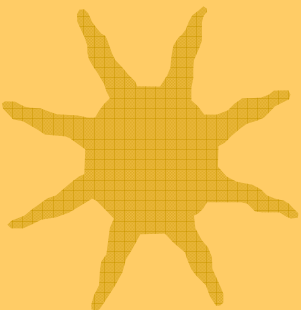
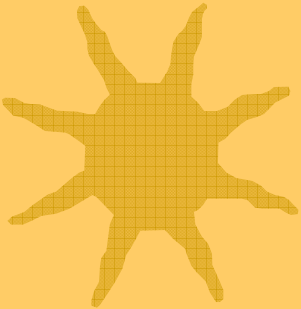
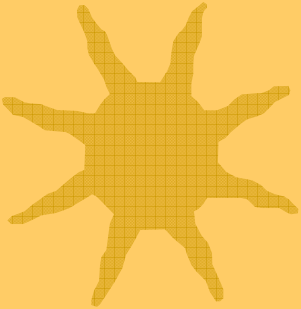


- ★ **Asset (vs. Deficit) Model of Community Need and Response**
- ★ **“Services” alone will not result in desired changes**
- ★ **Community is not the “object” of the intervention, but a key partner in the delivery of care**
- ★ **Most effective strategies to modify health perceptions and behavior are those created and delivered by the community and echoed in how we deliver care**





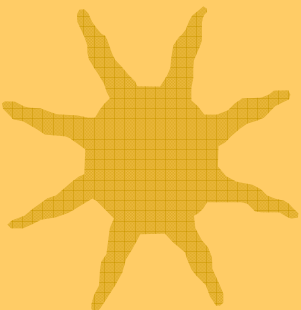
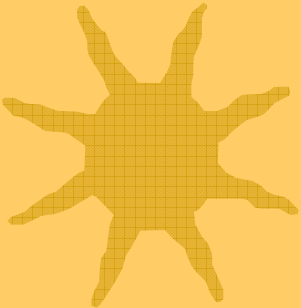
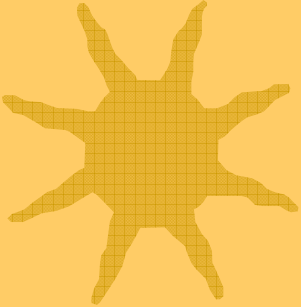
Sonrisa Sana Peer Education and Advocacy Program Structure



- ★ **Oral health education guide developed for:**
 - Migrant parents and caregivers
 - Migrant children by age group
- ★ **4 clinic sites/4-6 promotores per site recruited, trained**
- ★ **Promotores Coordinator at each site**
- ★ **Initial training (20 hrs/wk x 2 weeks)**
- ★ **Weekly training update/meetings for support, sharing**
- ★ **Educational stipend (\$100/week) and local travel support**
- ★ **Documentation of activities (@ 15 encounters/week)**



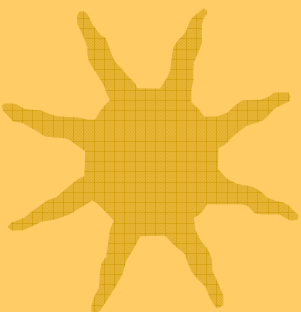
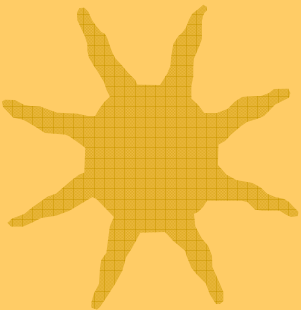
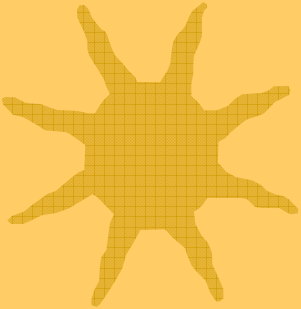
Promotores' Roles and Activities



- ★ Oral Health Promotion (one on one, small group “platicas” (conversations))
- ★ Oral Health Education (classroom setting)
- ★ Distribution of toothbrushes, paste, floss
- ★ “Teachable moment” and modeling interventions (peers, Migrant Head Start, Migrant Education programs)
- ★ Oral Health Assessments (0-1-2)
- ★ Referrals/Transportation for Dental Care
- ★ Assistance Making Dental Appointments
- ★ Follow-up with patients who have missed appointments



SONRISA SANA: Next Steps

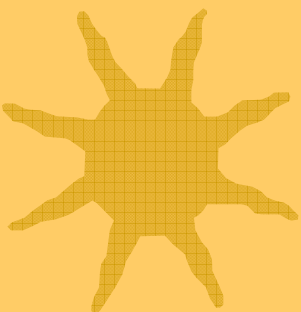
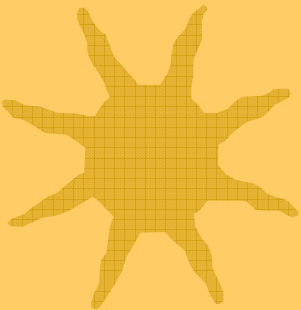
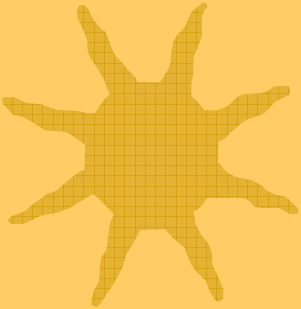


- ★ **Address challenges**
 - migratory population
 - changes in MEP, MHS
- ★ **Evaluation (Pre-post KABB Survey of MHS Parents)**
- ★ **Seek funds to sustain Peer-led Education and Advocacy**
- ★ **Sustain/Expand Pediatric Specialty Clinics (Medicaid CBR, UIC Pedo residents?)**





Closing Thoughts...



- **Fund research to assess effectiveness of CHW interventions**
- **Fund CHW programs (not reimbursable under Medicaid)**
- **Create professional pathways for CHWs**
- **Train clinicians re: the role of CHW's as part of the HCD team**
- **Create, disseminate popular education tools/methodologies**
- **Critically reexamine efficacy of "traditional" (i.e., mainstream) health education modalities**