SYSTEMIC BARRIERS TO REFERRAL SUCCESS IN A RURAL FRESNO COUNTY, CALIFORNIA CHW INTERVENTION

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Introduction

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Background

The Advancing Health Literacy (AHL) - Fresno County Project is a CHW-led initiative focused on improving health disparities in rural West Fresno County.

CHW responsibilities include:

Administering assessments

Providing referrals

Developing Health Ed materials Facilitating Health Education

CVHPI was responsible for:

Train CHWs to identify and create CLAS approved Health Ed Materials

Analyze data and report to funders/partners

Recommend program changes based on data

Evaluate overall effectiveness of AHL-Fresno County



CHW Impact



- Distributed 15,522 health education materials
 - 4,036 related to COVID-19
- 211 COVID-19 vaccine referrals
- 3,439 individuals connected with during outreach



Methods

Qualitative Measures

- CHW and Supervisor Interviews (N = 27)
 - 12 CHW participants
 - 15 Supervisor participants

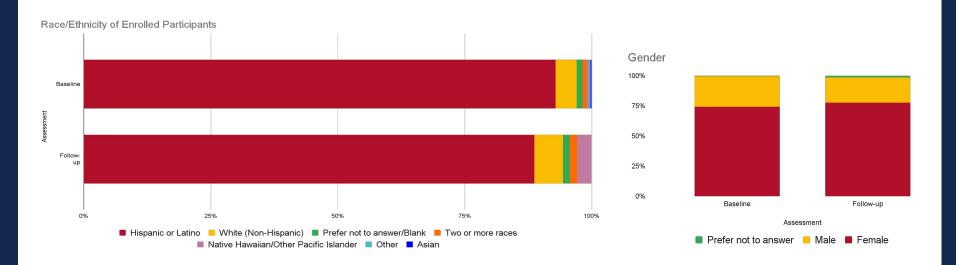
Quantitative Measures

- Data collected from 609 unique participants
- Questions ranged from food security to patient provider dynamics
 - In the last 12 months, have you worried about running out of food before you have enough money to buy more?
 - Does your doctor listen to you carefully?



Demographics

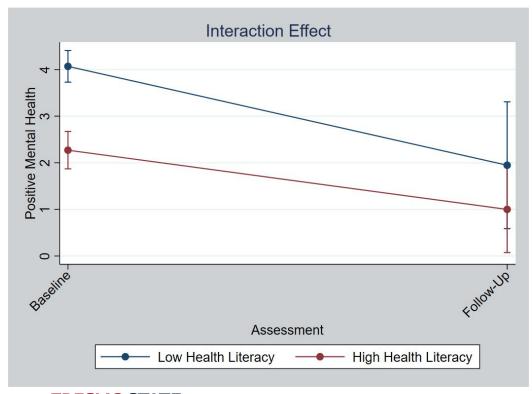
- A majority of participants identified as Hispanic or Latino (92.92%).
- Most participants identified as Female.
- Participants in the AHL program had a me age of 48 years old (SD 15.23).





Results

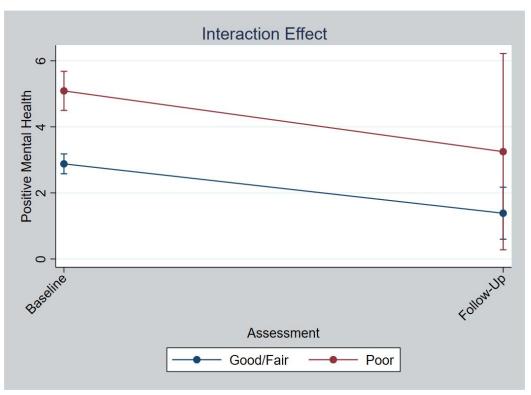
- This graph represents the relationship between health literacy and mental health scores at baseline and follow-up
- Lower average mental health scores at follow-up





Results

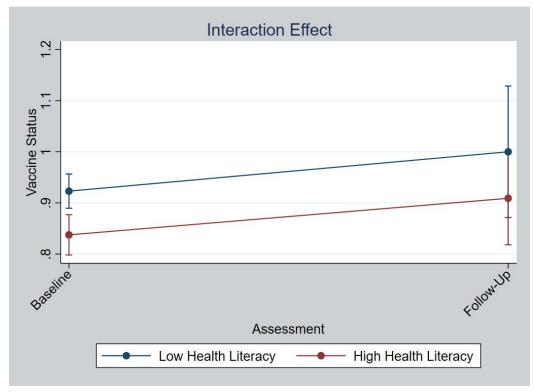
- This graph represents the relationship between positive provider relationship and mental health scores at baseline and follow-up
- Again we see lower average mental health scores at follow-up





Results

- This graph represents the health literacy and vaccination status at baseline and follow-up
- A higher concentration of those in the follow-up had received a COVID-19 vaccination





Discussion



- Clients received health education as part of the study
 - Clients were provided with knowledge and tools
 - Clients may have been better able to identify their own needs



Discussion

- Frustration with a lack of referral services
 - Only 256 referrals were initiated
- During CHW interviews it was uncovered that some clients were not able to follow through with referrals due to inaccessibility (i.e. transportation, scheduling conflicts, and referral location)



Discussion

- Client trust in the CHW
 - CHWs commented on client mistrust of the healthcare system and the process of grant based programs
 - During anonymous CHW interviews, it was discussed that by the time CHWs have developed trust with the community the grant period ends.



Recommendations

- Increased funding for CHW led interventions
- Increase the number of specialists available to rural communities



Limitations

- Limited referral availability
- Limited number of follow-up assessments
 - Difficulties related to CHW turnover



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There are no conflicts of interest for activities discussed in this presentation.

Thank you

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