

# Visión y Compromiso™

## KEY WORKFORCE PRIORITIES FOR THE COMMUNITY TRANSFORMATION MODEL

### EXECUTIVE SUMMARY

The concept of community transformation is intended to describe significant change in a community in terms of human health, social justice, income, employment, educational attainment, environmental quality, population retention, business environment, access to capital, entrepreneurial activity, accountable governance, and/or civic participation. The community transformation model is a social change model. It has the capacity to address health inequities in communities of color and under resourced and immigrant communities by challenging negative impacts resulting from inequitable distribution of power and resources, the social determinants of health and institutionalized racism. Promotores, community health workers and other leaders whose scope of practice is consistent with the community transformation model (referred to collectively in this report as “promotores”) are natural leaders from the communities where they live. Characterized by *servicio de corazón* (heartfelt service), they share

information and resources and build mutually respectful and mutually beneficial relationships with residents in their community. Their roles extend beyond the disease-related functions of community health and are driven by a passion for social justice and health equity.

### A MODEL FOR COMMUNITY TRANSFORMATION

Since the passage of the Affordable Care Act (ACA), promotores and community health workers have seen a surge in popularity. Increasing evidence indicates that interventions delivered by promotores and other community leaders who work within the community transformation model (a workforce that includes peer leaders, family health advocates, community outreach workers, patient liaisons, and so many other titles) hold great promise for improving the health of racial and ethnic minority communities. Yet, there is little consensus in California about how best to advance the workforce associated with this model. It is Visión y

Compromiso's belief that full integration of the community transformation model into hospitals, clinics, community based organizations, behavioral health care, and other sectors requires: (1) tailored workforce development strategies and institutional changes to support the model; and (2) training and technical assistance to support organizational staff not previously exposed to the model. This report endeavors to bring the voices of those who work with and support the community transformation model into the center of a national discourse on workforce development.

## WORKFORCE PRIORITIES

During 2014–2015, Visión y Compromiso invited leaders from the promotor movement in California to participate in an advisory group. Consisting of directors of promotor programs, educators, trainers and representatives from community organizations, hospitals, clinics, behavioral health agencies, and advocacy groups, the advisory group was tasked with reviewing the workforce development landscape and identifying the most critical issues for the community transformation model. Visión y Compromiso presented the following six key workforce priorities in four regional convenings with 58 people, experts on the community transformation model. The findings in this report reflect the major systemic challenges and opportunities for the workforce engaged with the community transformation model including:

### 1 The Promotor Model is a Model for Community Transformation

The community transformation model is a social justice model for improving individual and community health and well being. The model depends on local community residents who share similar characteristics as the communities they serve.

- The community transformation model is widely misunderstood.
- Popular education methodology is the foundation of the model.
- Community engagement requires time to build trust and relationships.
- Organizations who wish to integrate the model may first need to initiate institutional change and assess their readiness to work with the model.
- Just compensation for the workforce engaged with the model is essential.

### 2 Training and Professional Development

Training and professional development must meet the personal and professional needs of promotores and the demands of employers and other workforce partners.

- Promotores must be engaged to identify core competencies for the model.
- The workforce needs both core skills and specialized training.
- Evidence-based trainings need to align with community needs.
- One entity that understands the needs of the workforce engaged with the model can deliver statewide coordination.

**3 Core Competencies and Curricula**  
Core competencies are specific skills promotores need to carry out the transformational aspects of the model.

- Core competencies that are promotor-centered and promotor-defined are more likely to reflect community needs.
- Training staff at all levels of an organization about the model can help create the paradigm shift needed to reduce institutional barriers.

**4 Credentialing and Qualifications**  
The community transformation model needs an alternative pathway to credentialing that is promotor-centered and promotor-controlled and monitored by an entity that understands the workforce and the model.

- Credentialing programs may result in a two-tiered system excluding some promotores and eliminating jobs for others.
- State-mandated credentialing cannot ensure that the workforce is trusted.
- Parallel pathways to credentialing may be needed.

**5 Supervision of Promotores**  
Many supervisors are unfamiliar with the community transformation model and need specialized training.

- A non-hierarchical leadership style can be effective with the model.
- Promoting promotores into supervisory roles can support the model.

- Supervisors need training that is relevant to the setting where they work.

**6 Funding and Program Sustainability**  
Long-term sustainability can be a challenge for the community transformation model. Funding to sustain the model must also support the model's relationship-building activities.

- A culture of sustainability ensures that all the costs of the model are met.
- The model requires long-term funding.
- Competition for funding can create professional separations.

## NEXT STEPS

This report is a learning document that brings the workforce priorities for the community transformation model into sharper focus in order to change the discourse about the promotor and community health worker workforce at local, state and national levels. Visión y Compromiso believes that it will take strong leadership, innovative partnership and a multicultural movement guided by promotores, community leaders and agencies engaged with the community transformation model to bring to life the recommendations highlighted in this report and fully support and sustain a workforce dedicated to addressing the social determinants of health, reducing inequities in health status, and promoting social justice.

Based on the findings from this project, Visión y Compromiso calls for strategic efforts to ensure the long-term sustainability of the community transformation model and move the understanding, practice and support for the model forward in California and in other regions across the United States. Visión y Compromiso's priority recommendation and focus areas are:

### Recommendation

**Improve long-term sustainability for the community transformation model and ensure that workforce opportunities for promotores and other community leaders are meaningful and economically just.**

#### Focus Area 1:

→ Advocate for the unique workforce development needs of the community transformation model.

#### Focus Area 2:

→ Promote changes to organizational policies and practices that will support full integration of the community transformation model into health and other sectors.

#### Focus Area 3

→ Foster sustainable partnerships to guide research and evaluation efforts that will support the community transformation model.



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