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Arnold School of Public Health to establish Community Health Worker Institute

Columbia, South Carolina — The University of South Carolina’s Arnold School of Public Health will establish the Arnold School of Public Health Community Health Worker Institute to improve health in communities throughout the state and region. With funding from the [BlueCross® BlueShield® of South Carolina Foundation](#), the Institute will provide training and support for community health workers and the health care and community organizations that employ and interact with these professionals.

Specifically, it will provide entry-level training and field placement experience to community health workers and training for community health worker supervisors, along with continuing education options and specialty tracks targeting specific health issues or population focuses. All training will be based on state and national standards. The Institute will also partner with the [South Carolina Community Health Worker Association](#) to recruit new community health workers and work with hospitals, health clinics, health departments and other organizations to develop and implement effective community health practices.

“South Carolina and most southeastern states are facing a critical shortage of health-educated workers who are willing and able to enter our medically underserved and often rural communities to assist patients with proper adherence to medically prescribed care. Community health workers teach individuals and families about the importance of proper nutrition, physical activity, children’s vaccinations and the many things they can do to prevent chronic diseases like diabetes, hypertension and heart disease,” said [Thomas Chandler](#), dean of the Arnold School. “Community health workers often become the most impactful ambassadors for ‘wellness’ in underserved communities. I am so excited that Julie Smithwick and her partners received this generous support from the Foundation.”

Partnering with the Arnold School’s [Core for Advanced Research and Evaluation](#), the Institute will assess the integration of community health workers into various healthcare systems, and the effectiveness of using the community health worker model in South Carolina to address the needs of disadvantaged populations, including economic return on investment. In addition, the Institute will work with current and potential payors to develop new payment models to sustain community health worker services in the state.

“This model involves supporting leaders from within communities to serve as community health workers who are partnered with health and social service organizations, but who are more importantly rooted and vetted within the community itself,” said [Julie Smithwick](#), executive director and founder of [PASOs](#), who will transition to leading the Institute when it launches on March 1. “Community health workers work within their

communities to connect individuals and families with resources, identify barriers, and provide solutions and ideas to improve the health and well-being of the entire community.”

For decades, the community health worker model has been effective in other countries, such as Pakistan and Guatemala. With U.S. roots dating back to Native American communities in the 1960s, the model has become more widely recognized since the Affordable Care Act (ACA) recommended provisions to enhance the role of community health workers in the U.S. health care system to address population health and social determinants of health. The growing cost of healthcare along with increasing health workforce shortages have led to more widespread interest in this model.

In South Carolina, health systems, non-profit organizations, health departments and other groups have begun to integrate the community health worker model into their work. Thus, there is a need for more focus on equipping community health workers for success and preparing the organizations that will hire them to use the model effectively and fully understand their roles and abilities. Multiple studies have demonstrated the effectiveness of the community health worker model, reporting a 3:1 or better net return on investment.

“The community health worker model is an evidence-based model in which individuals who come from the communities they serve, or have exceptionally close relationships with those communities, act as bridges between health and social service systems and marginalized communities,” said Smithwick. “In this role, they are able to address social determinants of health, help individuals implement health changes and help health systems better understand and serve targeted communities. Our intention with the Institute is to help our state improve health outcomes through effective implementation of community health worker programs, and to equip community health workers with the tools and skills they need so they can continue driving positive change in wellness throughout our state.”

About the BlueCross BlueShield of South Carolina Foundation

Headquartered in Columbia, the foundation is an independent licensee of the Blue Cross and Blue Shield Association. Its mission is to promote and support healthier South Carolinians, particularly the economically vulnerable, by supporting solutions to address gaps in health care and serving as an agent of change to support innovation and value-added public-private partnerships.

About the Arnold School of Public Health

The Arnold School of Public Health was established in 1975 and has an enrollment of more than 3,000 student majors including more than 700 graduate students and 2350 undergraduates. The Arnold School currently employs 155 tenure, research and clinical-track faculty members with doctoral degrees. Based at the University of South Carolina’s main campus in Columbia, South Carolina, the Arnold School is one of 66 schools of public health fully accredited by the Council on Education for Public Health and is accredited through 2024. The School’s primary mission is to expand, disseminate and apply the body of knowledge regarding prevention of disease, disability and environmental degradation; promotion of health and well-being in diverse populations; and provision of effective, efficient and equitable health services.

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