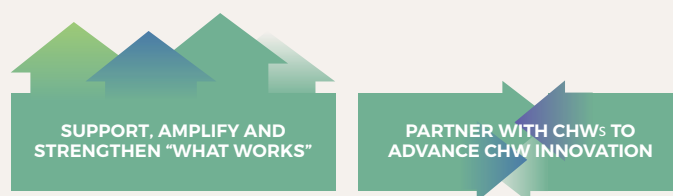


What Works for Partners:

How policymakers, funders and other partners help support, elevate, enhance and sustain CHW-led efforts to advance health for people experiencing homelessness

CHW participants shared their perspectives about “what works” in terms of actions, principles and strategies taken by partners that have positively impacted their work serving clients experiencing homelessness. Many themes discussed by CHWs and SMEs aligned with the existing pillars of the NACHW SUSTAIN Framework for CHW Sustainable Financing²⁸ and the [NACHW Policy Platform](#).²⁹



SUPPORT AND SUSTAIN CHW LEADERSHIP IN ADVANCING “WHAT WORKS” AND CHW-LED INNOVATION

Partners including funders, employers, and policymakers can partner with CHWs to sustain and advance “what works” and develop innovative solutions to addressing pressing community health needs. The following principles provide a preliminary set of guidelines—a starting point—for partners interested in partnering with CHWs to understand, improve, scale, and sustain community health for people experiencing homelessness.

Key principles for partnering with CHWs to advance and sustain “What Works” and CHW-led innovation:

- Respect, center, and protect CHW leadership and expertise
- Provide expertise, training and support to support CHW professional development to build capacity around innovation, leadership and organizational development.
- Ensure equity, flexibility, and sustainability in funding CHW efforts and innovations
- Maintain CHW leadership in evaluation and dissemination

RESPECT, CENTER, AND PROTECT CHW LEADERSHIP AND EXPERTISE

Respect and protect CHW leadership: Partners seeking to support development or expansion of CHW-led innovation to serve communities must ensure equity and respect for CHWs’ unique expertise, time, and effort. This includes:

- CHWs are fairly and equitably compensated:
- Engagement of CHWs by partners is sustained, equitable and inclusive, CHWs as full partners and leaders;
- Center CHW leadership: CHW leadership in innovation extends far beyond informing programs developed by others.
- Recognize CHWs for their essential contributions to individual, community and social health and wellbeing.

CHWs can be effective when paid a fair, thriving wage and receive full and equitable compensation including health insurance and other benefits. This includes ensuring funding for CBOs to cover living wages, health insurance, administrative costs, programmatic costs to reduce barriers for clients (e.g., transportation, incentives, food), and more.

PROVIDE EXPERTISE, TRAINING AND SUPPORT TO SUPPORT CHW PROFESSIONAL DEVELOPMENT TO BUILD CAPACITY AROUND INNOVATION, LEADERSHIP AND ORGANIZATIONAL DEVELOPMENT.

- **Provide expertise, training and support** in activities like data and evaluation, administrative tasks, fundraising, connecting CHW leaders with organizations or agencies with similar missions, providing in-kind resources and space, and more.
- **Help build relationships and connections** with policy makers and funders—connecting CHW leaders with organizations or agencies with similar missions.

ENSURE EQUITY, FLEXIBILITY, AND SUSTAINABILITY IN FUNDING CHW EFFORTS AND INNOVATIONS

Equity: Ensure equity in funding recipient and grantee selection: Funding must be directed to authentic CHR/W-led initiatives and CBOs that have roots in the community and community health work. Funders should work to build internal capacity to understand the essential work that CHWs do, the local landscape of CHWs and CBOs, and avoid deepening inequities by restricting funding or inequitable funding.

Flexibility: Ensure funding and programmatic flexibility (e.g., timeline, determining funding priorities), remove funding silos: CHWs respond to immediate, ongoing, and long-term needs in difficult and changing environments, in close collaboration and partnership with community members. This requires adaptation, flexibility and responsiveness to changes.

- **CHW Employers:** Ensure CHW employees have time and flexibility to innovate, adapt and improve programs and services.

■ **Funding flexibility is essential for effective CHW-led innovation, including:**

- ◆ **Ensure time for community buy-in and acceptance**, this can require time-intensive planning, relationship building, and ongoing engagement with community partners for innovations to be sustained and effective.
- ◆ **When possible, remove restrictions** (e.g., overhead, administrative and indirect costs, diverse programs and activities) and barriers to eligibility (e.g., requirements of audited documents, operations budget to match funds)—these can prevent CHWs from accessing needed startup funds.
- ◆ **Funding for less recognized activities that improve programming and promote CHW leadership development** like travel to present at conferences, building capacity in different locations, incentives for community members to attend an event, and translate culturally relevant materials to the community.

Support sustainability of funding: Partners support pathways toward sustainability for existing CHR/W programs and emerging CHW-led innovations.

- The SUSTAIN²⁸ framework provides guidance around sustainable financing for CHW programs and roles to enable CHWs to build on and sustain “what works.” The ability of CHWs to innovate requires sustainable, flexible funding—if innovations aren’t sustained, community members lose the trust that is the hallmark of CHW work. Examples of support for sustainability may include:
 - ◆ unrestricted funding or long-term targeted funding
 - ◆ funding that builds toward sustainability through activities such as evaluation, capacity building, advocacy, business development, and ongoing fundraising.

MAINTAIN CHW LEADERSHIP IN EVALUATION AND DISSEMINATION

Support CHW leadership in evaluation and dissemination: Ensure that CHW-led innovations are included in the public health evidence base through integration of CHW leadership in program evaluation, funding for evaluation of CHW-led innovations, support for dissemination and championing CHW-led innovations.

In addition, addressing upstream social, economic and political determinants of health is critical to advancing “what works.” The social failures to address upstream determinants of health erodes CHWs ability to focus on addressing long-term immediate needs such as affordable housing, cost of living, immigration barriers, language access, and barriers to accessing healthcare. These immediate needs often took precedence and took focus away from longer term needs to close the gaps in health equity.



The best thing a policy maker, funder, or provider can do is to listen to the life experience of those that have become successful out of climbing out the bottom. But few do listen and few have walked in our shoes. They make policies that create barriers and harm.

— Wanda Price, CHW