



Community Healthcare Project

CHÉ

Community Health Education

Worker

Orientation

Guide

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Community Health Education (Ché) Workers



Provide informal outreach, education referral and follow-up, advocacy and home visiting services to residents within the project's target, majority African (African-American) community. Dedicated members of the community, including medical students, will provide the services. CHE workers create a bridge between providers of health, social and community services and the underserved and hard-to-reach populations within the community. They shall be trained to provide basic health education and referral assistance to a wide range of services. The core roles that Ché Workers will provide are:

1. Mediation between communities and health & human services systems.
2. Informal counseling and social support
3. Providing culturally appropriate health education, i.e., preventative health, exercise, healthy eating habits).
4. Advocating for a **Public** healthcare system, with a **Public** hospital at its core
5. Assuring people get the services they need
6. Developing and maintaining a relationship with the family during home visits, which are made weekly.

Ché also represents Ernesto “Ché” Guevara (1928—67), who was a revolutionary and political leader born in Argentina. Trained as a physician at the University of Buenos Aires, he took part (1952) in riots against the dictator Juan Perón in Argentina, joined agitators in Bolivia, and worked in a leper colony. In 1953 he went to Guatemala, joined the leftist regime of Jacobo Arbenz Guzmán, and when Arbenz was overthrown (1954) fled to Mexico, where he met Fidel Castro and other Cuban rebels. Guevara became Castro's chief lieutenant soon after the rebel armed assault against the Cuban dictatorship in 1956, in which he proved to be a resourceful guerrilla leader. As president of the national bank after the fall (Jan., 1959) of Fulgencio Batista he was instrumental in cutting Cuba's traditional ties with the United States and in directing the flow of trade to the Communist bloc. He served (1961—65) as minister of industry. At heart a revolutionary rather than an administrator, he left Cuba in 1965 to foster revolutionary activity in the Congo and other countries. In 1967, while involved in a guerrilla movement in Bolivia, he was wounded, captured, and executed by government troops. Guevara wrote *Guerrilla Warfare* (1961), *Man and Socialism in Cuba* (1967), *Reminiscences of the Cuban Revolutionary War* (1968), and *The African Dream* (2001), a forthright account of the failed Congo rebellion.

The Ché Worker is a positive reflection of the People Before Profit Care Project.

Session 1 Agenda (4 hours)

1. Icebreaker

Discussion – What do you think about healthcare...

- for my community?
- for my family?
- for me?

2. Background on *People Before Profit Community Healthcare Project* (PowerPoint presentation)

3. UN Charter and Cuban Constitution Regarding Healthcare

4. Screening of “¡Salud!”

5. Revisit Discussion Questions

6. Evaluation of Session by Participants

Harriet Tubman, PBPCHP Icon



The People Before Profit Community Healthcare Project strives to live up to the unmatched legacy and organizational integrity of the Underground Railroad, the resistance movement against US slavery at peak during the 1800's. As one of the best example for CHE Workers to follow we've chosen Harriet Tubman, the most outstanding conductor on "The Railroad". Those who facilitated the escape of enslaved people for The Railroad were called conductors. A woman frail of body and suffering from recurrent "sleeping spells" (narcolepsy), seizures (epilepsy), and chronic headaches, Harriet Tubman not only escaped from slavery herself but led more than three hundred others to freedom. The disorders that plagued her came from the time an overseer cracked her skull as a teenager with an iron weight. Harriet Tubman was unable to read or write and still demonstrated remarkable ingenuity in the management of her runaway caravans. With no tolerance for cowardice, Tubman was known for threatening to kill any slave who wanted to turn back. She was not only a conductor of the Underground Railroad but also one of its greatest financial contributors. She would take several months off whenever she was running low in funds and hire herself out as a domestic servant in order to raise money for conveying slaves to freedom.

Harriet Tubman's legacy includes a career of combining healthcare with revolutionary social justice. In 1863, when it was decided to use African (Black) troops in the Civil War, Harriet was instantly keen to begin serving as a nurse in the war that would eventually bring the legal end to slavery. Her success as a nurse, especially her ability to cure men of dysentery by means of native herbs, became so well known to the army surgeons that she was transferred by the War Department to a military base in Fernandina, Fla. Tubman nursed thousands of sick soldiers and treated them with extraordinary medicines that she made from roots and herbs.

Harriet Tubman's deep faith and intuition are said to be her saving grace over and over again and her escapes from close calls were considered miraculous. In many African traditions disorders, such as those suffered by Harriet Tubman, are said to be the mark and calling of a healer. Referred to as "sacred illness," they are believed to create a more compassionate healer who understands and feels the pain of the human condition. The People Before Profit Community Healthcare Project wants to reflect the same compassion, fortitude, courage, dedication, and ingenuity of the Harriet Tubman.

Frantz Fanon: Prophet of Revolution



Frantz Fanon remains a luminary in the fields of revolution and liberation. His focus on decolonizing the mind offered a cogent analysis on the effects of European colonization of African people within the motherland and abroad in the Caribbean and the United States. Fanon was trained formally as a psychiatrist and used his studies of psychoanalysis to examine the symbolic racism and institutional oppression that created a dichotomous world of the colonized and the colonizer. His theories of internal group violence are still applicable as he noted that the frustration from colonization leads the colonized to “act in” harming other colonized citizens instead of the colonizer. Thus, the natural direction of liberation was for the colonized to assert their humanity in an act of self-defense which would simultaneously humanize the colonizer.

Fanon wrote a section on the effects of torture and war on the colonized that is still applicable to wars of occupation by imperial powers like the United States. If we were to analyze the high rates of suicide among US veterans in the current war, it would be easy to see how Fanon’s notions of trauma among the colonizer are directly related to their unjust “occupations” be they spatial (territorial) or vocational (job).

His impact on the world still continues to reverberate from his groundbreaking and revolutionary analysis of the impact of oppression delineated in *Black Skin, White Mask* and *Wretched of the Earth*. Fanon was interested in the application of psychology to healing the "tormented psyches" of those whom he referred to as the "wretched of the earth." Though Fanon only lived to be thirty-six years old, he gained immortality through his applied theoretical contributions to revolutionary re-conceptualizations of the plight of oppressed people, the effects and process of colonization, decolonization and neo-colonization, and the inevitability of African liberation.

In the context of liberation, Fanon’s work embodied and vocalized not only the Algerian spirit during the Algerian war, but spoke to plight of Black people throughout the diaspora, transforming him into a clarion call for voice for the voiceless and bidding the voiceless to exercise their collective voice.

Fanon was born July 20, 1925 on the Caribbean Island of Martinique into a middle-class Black family. At 17 Fanon left home to join the armed services in the fight for France's liberation.

Fanon was well aware of the insidious nature of racism and oppression on the island of Martinique (Fanon, 1963, 1967). He observed the overt acts of racism, harassment, and sexual exploitation at the hands of the French army who occupied the Caribbean island for most of his adolescence. Fanon experienced personal encounters with racism and bigotry when he was stationed in North Africa for military duty in the French army (Bulhan, 1985; Fanon, 1963). Fanon's development as a revolutionary scholar and leader was greatly influenced by his teacher and mentor Aime Cesaire. Cesaire coined the term *negritude* and began to advocate that Blacks abandon their efforts to assimilate into French culture and instead embrace their African roots. Being among the most vocal critics of Western civilization at the time, Cesaire was relentless in his attacks on French culture describing it as a civilization that is sick and morally decayed (Bulhan, 1985).

Cesaire's influence on Fanon was primarily at the level of critique and analysis of the role of black consciousness in the liberation of the oppressed -- *negritude*. Fanon later broke with Cesaire because he felt the *negritude* movement lacked a mechanism of transformation required for the liberation of the oppressed and alienated (Bulhan, 1985). This departure with Cesaire and the *negritude* movement demarcates Fanon's move toward a true revolutionary praxis for the liberation of oppressed people in the African diaspora. Indeed this departure typifies what he meant when he wrote the often quoted line paraphrased as: "Each generation must out of relative opacity define its generational mission and choose to betray it or fulfill it." The PBPCHP has defined its generational mission and is fulfilling it.

...

Having completed medical school Fanon returned to Martinique for a brief time where he practiced medicine as a general practitioner. He worked in France for a while before going to Algiers for what would become his defining work in psychiatry and revolution.

In Algiers Fanon witnessed the brutality of the torture and repression heaped upon the indigenous population by the French armed forces (Fanon, 1963). While in Algiers Fanon had begun secretly working on behalf of the Algerian liberation movement "Front de Liberation Nationale" (FLN); he would later be expelled from Algeria for his efforts toward the liberation of the Algerian people from French colonialism and oppression (Bulhan, 1985). Fanon's participation in the Algerian struggle for liberation made him the target of several assassination attempts. While traveling in Mali, Fanon suddenly became ill and in December of 1960 he was diagnosed with leukemia. A year later, after completing his most controversial work, *The Wretched of the Earth*, Fanon died in Bethesda, Maryland. His remains were flown back to Algeria to be buried beneath the soil he struggled to liberate (Bulhan, 1985).

A BLACK PANTHER Lesson for CHE Workers



In October of 1966, at the height of the civil rights movement, a few longtime friends including Huey Newton, Bobby Seale, and David Hilliard gathered and developed an outline for an organization that could be used as a platform to address longstanding grievances of the black masses in America. Their outline with a revolutionary ideology, promoted fundamental change by:

- Serving the needs of the oppressed people,
- raise their consciousness and motivate them towards total liberation
- Defend those oppressed against their oppressors.

The leadership outlined a ten point plan and program as guidelines of the fundamental needs of blacks who have been alienated from society. The Platform & Program was to demand the right to self defense, and a commitment of the membership to promote fundamental change in America.

According to former Panther leader, David Hilliard, in the 1960's, the Black Panther Party co-founder, Huey P. Newton put into effect social change by teaching practical lessons of community service. The Party pioneered free social service and medical programs which are now in the mainstream of American life. The Sickle Cell Anemia Research Foundation along with Oakland's Children's Hospital, was among the nations first sickle cell testing programs, and inspired the federal government's initial funding of sickle cell research. The Party initiated the Free Breakfast Program which served as a model for children's programs nationwide. Nutrition programs that are currently run by the government were adapted by the Black Panther Party such as, Meals on Wheels and the school lunch programs. According to the United States Department of Agriculture, the School Breakfast Program began in 1966 as a two-year pilot program and directed by Congress in 1971 as a high priority to low-income families.

However, by 1966, there were 48 chapters of Black Panther Party members within the United States. Some of the Party's ideals and activities were so radical, it was enough for the Federal Bureau of Investigation to take notice and acknowledge them as the "the greatest threat to the internal security of the United States." J. Edgar Hoover, then the director of the FBI, called for an attack on the Party that included COINTELPRO, a program that conducted misinformation campaigns and infiltrated the Party with provocateurs who often promoted violence. Shootouts with police and other violent confrontations left 34 Panthers and 15 police officers dead.

After this incident, there was a communication breakdown among the leaders. Some members were linked to extortion and other criminal activity in Oakland. By the end of the 1970s, the 5,000 member Black Panther Party was defunct.

While the media and government often portrayed them as Black Nationalist radicals, the Black Panthers were pioneers working with Latino, Asians, and African-Americans, to develop relationships within their communities and raising awareness of this disease that disproportionately affect those in the Black community. The Sickle Cell Disease Association of America emphasized, the disease originated in at least 4 places in Africa and in the Indian/Saudi Arabian subcontinent. It exists in all countries of Africa and in areas where Africans have migrated. The disease is an inherited disorder that affects red blood cells that become hard and pointed instead of soft and round. These cells cause anemia, pain and many other problems. Although no longer an entity, The Black Panther Party through its' former leaders, continue its quest to enhance community awareness nationwide, serving the needs of the most disempowered citizen, to build a meaningful inclusive society.

A YOUNG LORDS Lesson for CHE Workers



The Young Lords Party was second generation Puerto Ricans in the urban ghettos of America. They were high school students, mostly unemployed, who came out of the gang experience of the late '50s and '60s; Vietnam veterans, former junkies, and those disillusioned with the political system. It was an organizational alternative for to assimilate and reform and develop a code of behavior to unite and guide themselves to real problems confronting their community.

Primary events that affected these young people were the Black Liberation Movement, the struggle to end the Vietnam War, and the Cultural Revolution that occurred in the 1960s. As oppressed people, they struggled to reconnect to their own history, and determined their own course for the future.

In the Bronx, unemployment was 10% compared to 7% for African Americans and 4% for whites. Only 13% of the Puerto Ricans 25 and older completed high school compared to 40% of the white population. In 1963, of the 21,000 academic diplomas granted to high school students, only 331 diplomas went to Puerto Ricans, and 762 went to African Americans. Many students read below grade level because of the lack of

bilingual programs and the prevailing attitude about Puerto Ricans and African Americans.

As a starting point for the future, young activists created the first Puerto Rican community-based anti-poverty program in 1964. The Puerto Rican Community Development Project as a self-help project to strengthen families and open opportunities for youth and education. The Young Lords worked closely with Black Panther leaders in New York in creating and student group called WANTU-GENTE (WANTU is people in Swahili, GENTE is people in Spanish). As a model, the student group made up of Black and Puerto Ricans combined the of the principles of the Young Lords 13-Point Program and the Black Panther 10-Point Program with demands of freedom of assembly, speech, and the press through student led discussions.

As a revolutionary group, the YLP were militant and organized and believed that violent struggle would ultimately be needed for liberation. If confrontation or breaking the law was necessary to move an issue, that's what they did.

At the peak of their activities, educating their community and building a base of support, teams, of Young Lords, supporters and doctors went door to door, testing for tuberculosis and lead poisoning. High concentrations of people in El Barrio tested positive either, for tuberculosis or had been exposed to tuberculosis. The city government refused to station a TB testing truck in East Harlem. So, the YLP stole the truck and with the help of doctors and health care workers, tested hundreds of people. When the police came to retrieve the truck, the community surrounded it and prevented the arrest of the Lords and the return of the truck. This incident drew national attention and forced city officials to allocate resources to poor communities and to deal with the problems of tuberculosis and lead poisoning. The Lords were instrumental in setting up detox clinics in the old Lincoln Hospital and providing preventive medicine in the auditorium. The old Lincoln Hospital was a condemned building and severely understaffed and under-financed. But, it was the central location where acupuncture-detoxification program was established with licensed doctors, acupuncturists, and staff hired from the community including the Young Lords and the Black Panther Party. The YLP were ahead of their time with the model of treating heroin and alcohol addiction with acupuncture instead of substituting methadone. With the help of the media, a new hospital was built and continues the legacy of the Young Lords Party. Their organization served as a bridge that allowed people, young and old, to fight for survival, education and unity for freedom and respect.

Article 25 of the Universal Declaration of Human Rights, adopted and proclaimed in 1948 by the General Assembly of the United Nations, asserts that *“Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.”*

In accordance with this declaration Cuba regards healthcare as a human right, not a privilege and has enshrined it as such within their constitutions.

Article 50 of the Cuban Constitution states:

“Everyone has the right to health protection and care. The state guarantees this right:

- By providing free medical and hospital care by means of the installations of the rural medical service network, polyclinics, hospitals, preventative and specialized treatment centers
- By providing free dental care
- By promoting the health publicity campaigns, health education, regular medical examinations, general vaccinations and other measures to prevent the outbreak of disease. All the population cooperates in these activities and plans through the social and mass organizations.

Session 2 Agenda (4 hours)

1. Discuss What You Know and How You Feel about Healthcare...

- Locally?
- Nationally?
- Internationally?

2. Health Indices for District of Columbia and How DC's System Works

- DC Healthcare Alliance; What It Is and How It Works
- History of DC General
- DC Health Disparities

3. National Perspective – Medicare, Medicaid, Third Party Payer, Uninsured, Underinsured, Single-payer

4. Screening of “Sicko” and Al Jazeera’s “Fault Lines; US Healthcare”

5. Discussion of Questions:

- What do you know now that you didn't know before?
- How can this help you become an effective CHE worker?

6. Evaluation of Session by Participants (get readings for next session on community organizing)

About the DC Healthcare Alliance

From <http://dhs.dc.gov/>

INTRODUCTION 4.1

The DC HealthCare Alliance (Alliance) program is designed to provide medical assistance to needy District residents who are not eligible for federally-financed Medicaid benefits. This includes non-disabled childless adults, non-qualified aliens and some individuals who are over-income for Medicaid. Effective September 1, 2009, applicants who are enrolled in any part of Medicare or who have third party insurance are not eligible for the DC HealthCare Alliance. The Alliance program provides comprehensive health services, including preventative, primary, acute, and chronic care services such as clinic services, emergency care, immunizations, in-patient and out-patient hospital care, physician services and prescription drugs.

Residency 4.3.2

To be eligible for program benefits, a person must be a presently living in the District of Columbia voluntarily and not for a temporary purpose and have no current intention of moving out of the District. See Part IV: Chapter 2, Non-Financial Eligibility Requirements: Residency, for additional information on establishing and verifying residency eligibility.

Citizenship/Alienage 4.3.6

Unlike other Medical Assistance programs, the applicant/recipient does not need to be a U.S. citizen or a qualified alien as defined under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. However, customers who claim to be qualified aliens should be asked to provide their Alien Identification number so that an evaluation of federal Medicaid eligibility may be done. See Part IV: Chapter 7, Non-Financial Eligibility Requirements: Citizenship/ Alienage, for additional information on determining when non-citizens can receive Medicaid benefits.

Although there is no citizenship/alienage requirement for Alliance eligibility, an applicant must be a DC resident. Temporary non-immigrants such as embassy personnel do not meet the residency requirement. See Part IV, Chapter 2, Section 2.3: Determining Residency.

Application Timeframes 4.5.3

Applications for the Alliance program must be processed within 45 days, counting from the day after the application was filed. A verification checklist, listing all information or actions still needed to determine eligibility must be issued through ACEDS and given

to the applicant at the time the application is filed. The checklist and the date the application was filed are essential for the timely issuance of all application notices and timely disposition of the application.

If an applicant fails to provide all necessary verification by the tenth day following the application date, ACEDS will issue a Ten-Day Notice that lists the information or actions needed to complete the eligibility determination. If the applicant still has not provided all necessary verifications by the 30th day following the application date, ACEDS will issue a 30-Day notice that also reports what is needed to complete the eligibility determination.

If by the 15th day following the 30-day notice (or the next available workday), the applicant has not provided all verifications, ACEDS will issue a denial notice and deny the application.

It is IMA's goal to complete the eligibility determination within 10 days from the date that all information necessary to determine eligibility has been submitted.

Other notes from Juliana:

- Alliance generally covers individuals and families at or below 200% of the federal poverty line
- Alliance is administered by 3 different managed care organizations (MCOs) - I believe they are Chartered, Unison, and HealthRight

Session 3 Agenda (4 hours)

1. Discuss Readings on Basics of Community Organizing
 - Check homework discussion questions
 - Role of community organizing
2. Show PBPCHP Short Video on Trip to Venezuela
3. Lessons From “Empower DC” and “Take Back the Land”
4. Diversity Training – Nuts and Bolts of Being A CHE Worker
 - Door-to-door conduct and methods
 - Role playing and group feedback
 - Test run in the community
5. Evaluation of Session by Participants

Basic of Community organizing:

Four Ways to Solve Social Problems (Marshall Ganz, from *People, Power and Change*)

Direct Service improves the lives of people by directly linking them to resources that stabilize daily life. Direct service alleviates immediate crises but often leaves the root causes of problems untouched.

Advocacy interprets institutional processes for the poor and disadvantaged. It does not address nor change basic power relationships between people and the institutions that control their lives.

Mobilization engages people in short-term, direct action to create immediate results

Organizing is people working together to get things done. It serves as a tool, a weapon, and a means of getting people to learn, to think, to act and to reflect about their lives in a new way. By doing so, the poor and the disadvantaged are able to reclaim their strengths, roots and heritage.

The Role of an Organizer

Organizers challenge people to act on behalf of their shared values and interests. They lead by developing the relationships, understandings, and actions that enable people to gain new understanding of their interests, new resources, and new capacity to use these resources on behalf of their interests (*the human right to healthcare*). Organizers work through “dialogues” in relationships, understanding and action carried out as campaigns. They identify, recruit and develop leadership, build community around that leadership, and build power from that community.

Organizers interweave relationships, understanding and action so that each contributes to the other. One result is new networks of relationships wide and deep enough to provide a foundation for a new community in action. Another result is a new story about who this community is, where it has been, where it is going – and how it will get there. A third result is action as the community mobilizes and deploys its resources on behalf of its common interests (*the human right to healthcare*) – as services or as advocacy. Organizers develop new relationships out of old ones – sometimes by linking one person to another and sometimes by linking whole networks of people together.

Organizers work with people to reinterpret their understanding of their world in terms of why they should act --their motivation-- and how they can act --their strategy--. Organizers motivate people by enacting a story rooted in people’s values in which feelings of anger, hopefulness, a sense of self-worth, urgency, and community can challenge those

feelings of fear, apathy, self-doubt, inertia, and isolation that inhibits action. Organizers deepen understanding of how to act by creating opportunities for people to deliberate about their circumstances, reinterpret them in ways that open up new opportunities, and strategize to make creative use of their resources.

Organizers focus on the taking of responsibility to act. Empowerment for a person begins with taking responsibility. Empowerment for an organization begins with commitment: the responsibility its members take for it. Responsibility begins with choosing to act. Organizers challenge people not only to understand, but also to take responsibility, to choose, to make commitment, to act.

Organizers work through campaigns. Campaigns are highly energized, intensely focused, concentrated streams of activity with specific goals and deadlines. People are recruited, programs launched, battles fought and organizations built through campaigns. Campaigns polarize by bringing out those ordinarily submerged conflicts contrary to the interests of the constituency (*the human right to healthcare*). One dilemma is how to depolarize in order to negotiate resolutions of these conflicts. Another dilemma is how to balance campaign work with the ongoing work of organizational growth and development.

Organizers build community by developing leadership. They focus on identifying leaders and enhancing their skills, values and commitments. They also focus on building strong communities: community through which people can gain new understanding of their interests (*the human right to healthcare*) as well as power to act on them. Organizers work at constructing communities which are bounded yet inclusive, communal yet diverse, solidaristic yet tolerant. They work at developing a relationship between community and leadership based on mutual responsibility and accountability.

Elements of An Organizing Campaign

(Developed by Mark Tony, Center for Third World Organizing, Oakland California)

Framing the Issues

1. How do you describe the core community you want to organize?
2. What are the challenges facing that community?
3. How have people tried to change the conditions in that past?
4. How are these conditions rooted in larger systemic problems?

Research

1. What is the basic information you already have?
2. What additional information needs to be researched?
3. What additional resources need to be found?
4. Who are the resource people you need to bring on board?

Identifying Targets

1. Potential legislative targets (power to adopt laws)

2. Administrative targets (power to adopt regulations and enforce laws)
3. Corporate and individual targets (power to profit privately)

Developing Message

1. What are you going to tell people?
2. What policy changes advance your issue and create opportunities for learning?

Finding and Mobilizing the Constituency

1. What is the composition of your core constituency?
2. Who are the people ready to take action?
3. Where can you go to recruit them?
4. What tools will you need to establish contact and develop relations?

Finding and Recruiting Allies

1. What organizations have a self interest that may be serviced by the issue?
2. What should you ask each organization to contribute to your efforts?
3. How can organizations become involved in campaign events?

Neutralizing Potential Opposition

1. What organizations have a self interest that may not be served by this issue?
2. How can you convert potential opposition into allies?
3. How can you get potential opposition to remain neutral?

Determine the Tactics to Use

How do we want the campaign to take place? What forms of collective actions do we want to use?

- Direct Action
- Accountability session
- Media blasts

Adopting a Timeline for the Campaign

1. How long will the periodic hot phases in our campaign last?
2. How will we measure success?
3. Post campaign, what will be the next phases of action?
- 4.