

CONFERENCE ABSTRACT

Impact of a local health and hospital service placing a Community Link Worker in a high need social housing area of inner Sydney, Australia

ICIC20 Virtual Conference – September 2020

Lisa Parcsi¹, Margo Barr²

1: Sydney Local Health District, Camperdown, NSW Australia

2: Centre for Primary Health Care and Equity, University of New South Wales, Kensington, NSW, Australia

Introduction

There are several high need social housing areas in Australia all with vulnerable populations i.e. those who are economically disadvantaged, Aboriginal, from ethnic minorities, and older. These populations often have health conditions that are exacerbated by barriers to accessing health care and their health problems often overlap social issues related to housing, poverty, and educational disadvantage. A social housing community had concerns with 'street drinking', drug and mental health issues. Two health forums, attended by 130 people including residents, community representatives, Non-Government Organisations, health staff, and other government agencies, were held to look for solutions. Following the fora, a specific Healthy Living Link Worker role was established to bridge the gap between social housing residents and local health and hospital services. Methods: In 2019 the University of New South Wales reviewed the role. Specifically examining: (i) expectations of the role at establishment (establishment interviews), (ii) the literature to find examples of similar roles, and (iii) if the role had achieved the requirements of the job description and the expectations of the community (key informant interviews).

Results and Discussion

The establishment interviews identified the theory behind the role was capacity building using examples from other parts of Australia, Scotland and USA. The informants stated the main purpose of the role was to: be a point of connection, liaison and navigation between the health and hospital service and the social housing residents; address health and wellbeing issues through better access to services; and improve the systems responsiveness to high need residents. The literature review identified 21 articles using terms: community health worker, patient navigator, social prescribing link workers, and limiting it to review articles in English from OECD countries published in 2012 to 2019. It provided evidence that similar roles had significant health and wellbeing gains for chronic disease management, mental health needs, physical activity, appropriate health service

use, health literacy, quality of life, and health screening. Findings from the key informant interviews will be provided as part of the presentation.

Conclusions

The link worker role was established to meet specific needs of a disadvantaged community. The aims of the role were to: address health literacy at individual and community levels whilst also attempting to drive change within the system; take on a community voice seeking to disrupt the system whilst also empowering individuals to access the help, care and support; and consult and report directly to the community. The review found that some of these roles were being achieved. However, to achieve all of them the position needs more support from both the health service and the community.

Lessons learned

Having clear, achievable responsibilities, coupled with authority to act are important; as is having mechanisms to monitor how well the role is meeting community needs.

Limitations and future research

Currently only one link worker positions exists, and the position has only been in existence for 2 years. However, a possible outcome of the review is to expand to other disadvantaged areas. Further research measuring health outcome improvements would be beneficial.