



The Hastings Center
for Bioethics

Community Health Centers: Sixty Years of Doing the Right Thing

Evidence from a study of bioethics in community health

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Introduction

Our study sought to understand moral and ethical issues in community health practice.

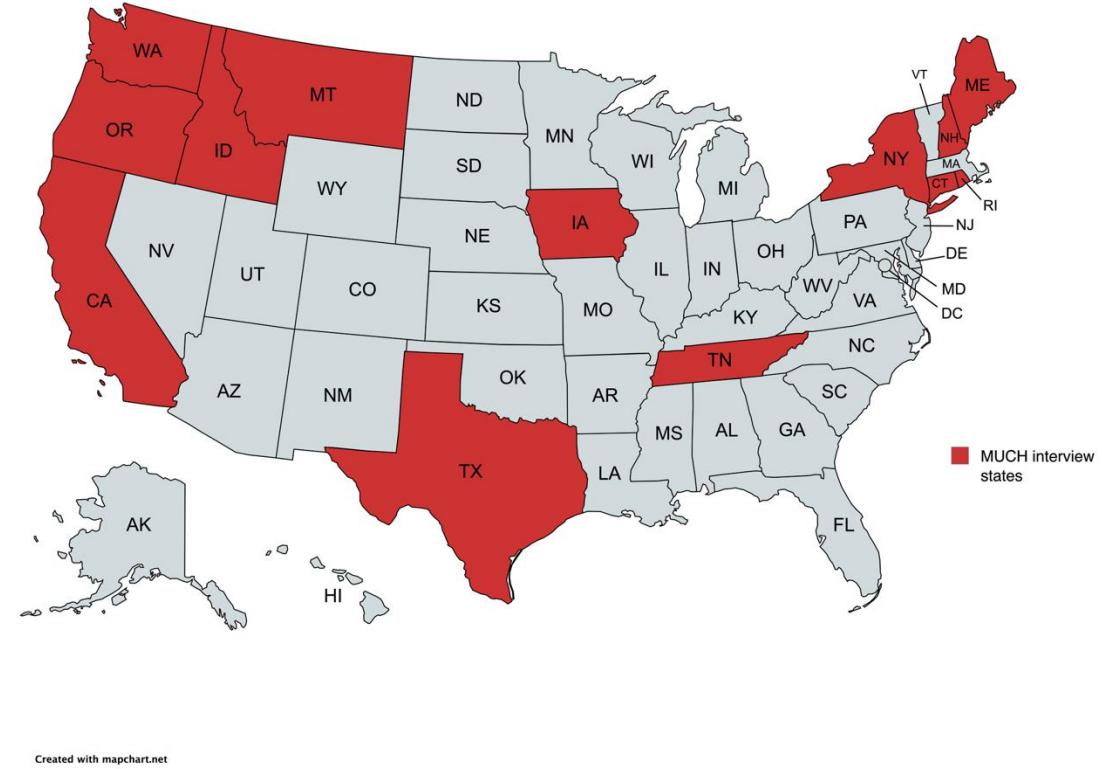
At its simplest, ethics is concerned with ideas about right and wrong, and what it means to flourish and live well together. Bioethics explores this in relation to healthcare and medical practice.

This research brief highlights what community health centers (CHCs) and clinicians can teach us about doing the right thing, with an eye toward celebrating community health as a bright spot in the fractured American healthcare system.

*Our study of Bioethics in Community Health
was funded by the Greenwall Foundation.*

Research background

- We conducted hourlong qualitative interviews with 24 CHC clinician-leaders across the US
- Interviews explored moral and ethical aspects of community health work



Findings

What CHC clinicians told us about doing the right thing in community health

Advancing justice

*“There's a reason it's so hard. There's a reason we don't have enough time. There's a reason we're understaffed. There's a reason that our systems could work better. And it's not that we don't know how to achieve operational excellence – it's that we're in a struggle against racism, **or a struggle for justice**. And so, just showing up at work is being part of a struggle, that you're accomplishing something.”*

CHC clinician in New York

90% of CHC patients have incomes below 200% of the federal poverty line.¹

Striving for Clinical Excellence

*“We try like hell to make it a place that people really want to practice and feel good about. And **the job is loaded with reward**. It’s an incredible thing to be able to say, ‘**We have 700 patients with HIV, and we have 100% viral clearing in those patients.**’ I make sure everybody in this organization knows they can go out and say that. You find me another organization where we have 100% of patients who’ve been with us for at least three months, with viral clearing ...That’s phenomenal.”*

CHC clinician in Connecticut

CHCs perform equally or better to private primary care on many quality measures, even though their patients bear a greater burden of chronic disease and socioeconomic precarity.²

Responding to community needs

“Community health centers are totally tuned into the needs of the community. And what goes on in internal medicine is just a tiny little piece of a huge pie of trying to respond to the needs of communities. And there’s so many very cool programs that are going on in terms of outreach, food programs, case management programs, you name it within the health center.”

CHC clinician in New York

“There’s so many services here that I’m sure I take for granted that, if I were to go to somewhere else that didn’t have these services, I think I’d really feel that lack.”

CHC clinician in Idaho

Nearly two-thirds of CHC primary care clinicians coordinate their care with local organizations, much more than solo primary care providers.³

Deeply connecting with patients

*“People are able to make wonderful connections with their patients. I don’t think that most of the time, you know, going to a specialist once a year, they’re ever gonna find out that that 86-year-old woman is climbing up on her roof to fix the shingles because her son’s in jail and her granddaughter’s pregnant. There’s nobody else to do it. **And so, you learn people. You learn about their families. You know the context in which they live...**So, it brings a depth to the medical practice that you don’t get in some other places.”*

CHC clinician in New Hampshire

CHC patients overwhelmingly describe health center clinicians as showing respect for what they had to say.⁴

Compassionately serving the underserved

*“The beauty of it is **we attract extremely dedicated, heart-, mission-minded kind of people** that care about taking care of underserved populations. That are passionate about it. And they want to do the very best for these patients who have so little oftentimes. And who our healthcare system and society at large has just chewed up and spit out.*

*...**We are filled with people that care deeply about other people.** ...**I'm so proud of the fact that we are inclusive, that we're welcoming.** I want people to feel like **this is their medical home**, and they are comfortable coming here, and they look forward to coming here.”*

CHC clinician in Tennessee

97% of patients would recommend their health center to family and friends.¹

*“I still think the most important thing about healing is what goes on in that room between **two people trying to make sense out of what somebody's experiencing and trying to... well, actually, for both people to make their lives a little better.**”*

CHC clinician in Iowa

*“My patient said, I had my stuff at a friend's house, and it wasn't anything, but it was so important to me. It was my family photos. These things aren't on the internet. And the people who I left it with, they were like, 'well, that was junk. I threw it out,' and she literally felt like she'd been erased. She's like, 'Now I'm just me in this van.' I just didn't know what to say. At least I can be there. I'll just be like, **‘Call me tomorrow. I'm part of your world.’**”*

CHC clinician in Maine

Preventing burnout and moral injury

“The anti-moral injury is to be in a high integrity organization, doing work that is appreciated and respected.”

CHC clinician in Connecticut

*“I really feel like if any time that I’m working if I’m gonna be away from my kid or spending as much time as we have to spend in medicine to care for people, **I need to feel like morally I’m part of something bigger than myself.** ...It’s easier for me when you’re so burnt out and tired to be like, ‘Yeah, but we’re doing it for a good reason,’ so it’s worth the effort.”*

CHC clinician in Maine

The social justice mission of CHCs provides a sense of meaning, mission, and belonging that works to prevent burnout and moral injury among staff.⁵

Developing clinical expertise

“I think there is no better clinical environment if you are a physician who wants to keep up your repertoire or learn new expertise than a community health center, because most other practices really impose or restrict your practice parameters because they want defined referral patterns. In the community health center world...you naturally become a clinician with a wider range of capabilities and skills. And that’s a big reason why I continue to stay.”

CHC clinician in New York

CHCs offer comprehensive services for adults and children spanning primary care, women's health, behavioral health, substance use treatment, HIV care, dental, vision, and pharmacy.²

Pursuing solution-oriented innovation

*“The other thing is the opportunity, the fertile ground we have here that drives innovation. **The fact that we have challenges sparks the idea of how do we fix, what are solutions, let’s try something.** ...And I think that’s really big, the community and the opportunity for innovation.”*

CHC clinician in Texas

*“[We’re] a group pf people that are just like, “Yeah, let’s figure this out. We’ve got limited resources, we’ve got nothing. Let’s make it happen.” **And I think that’s an energy you don’t get everywhere**, and so I think that’s really, really beautiful...”*

CHC clinician in Connecticut

*“The word that comes to mind is scrappy. **Community health will figure stuff out.**”*

CHC clinician in California

CHCs are crucibles of innovation oriented towards addressing challenges in healthcare and health equity.⁶

Rising to the occasion: Pandemic response

“We became a community testing site [when Covid started]....One day, it literally kind of went [like] wildfire through the Tyson meatpacking plant. And one of the hospital-owned practices basically locked their doors. People were pounding on the doors. And they all came to our parking lot. We called people in from home, and we were seeing people in the parking lot.”

CHC clinician in Iowa

CHCs were critical points of access to care for underserved populations during the Covid pandemic.⁷

The future of primary care

“I think we are the leading edge of primary care in the United States. I think we do it better than anybody else. And we're looking to expand and grow. We've been growing. I think this vision of saying, ‘Make primary care universal, and just do it all through community health centers,’ is a potentially viable vision, and I think would be a great thing for the country.”

CHC clinician in New York

CHCs provide high quality services to underserved patients, with positive health outcomes and reduced hospitalization and costs. But many patients still have unmet care needs. Expanding CHC funding and services could benefit millions of patients.⁸

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