

ARIZONA PREVENTION RESEARCH CENTER

# 2014 NATIONAL COMMUNITY HEALTH WORKER ADVOCACY SURVEY

A project of the
University of Arizona
Arizona Prevention Research Center

The 2014 National Community Health Worker Advocacy Survey (NCHWAS) is the largest on-line survey of Community Health Workers (CHW) conducted to date. NCHWAS represents the voices of approximately 1,767 CHWs from 45 United States and 4 US territories. Data gathered through NCHWAS is intended to be 'open source' and used for CHW workforce development and sustainability.

The NCHWAS aims to describe (1) the state of CHWs as a professional field and (2) the impact of CHW community advocacy on community engagement to address health disparities. Although Community Health Workers or CHWs go by a variety of titles including, *Promotora de Salud*, Community Health Representatives, Community Health Aides, Peer Educators, and Patient Navigators to name just a few, we use the term Community Health Worker or CHWs as the umbrella term to describe the workforce.

CHW workforce data collected by NCHWAS includes; gender, race/ethnicity, education, salary, experience, work environment, training, and health and social areas of focus, professional affiliation and leadership, engagement in Affordable Care Act outreach and enrollment, CHWs advocacy efforts and impact on the social determinants of health and CHWs -led initiatives to sustain and advance the CHW workforce.

The anonymous, on-line survey was distributed to CHWs through local, state, and national CHW professional associations, programs, and allies during the months of February and May of 2014 and was available in English, Spanish and Korean languages. Data reported here are not intended for publication in academic journals.

#### National Report Summary

This report represents preliminary data for 45 of 50 United States and 4 of 14 US territories. A total of 1,995 individuals initiated the on-line survey, of which 1,858 self-identified as a CHW of whom 1,767 had not taken the survey in the previous 12 months and were eligible to complete the survey. This report includes data for CHWs who initiated the survey and may or may not have completed the entire survey thus the number of participants fluctuates by question as responses were not required for every question.

State level reports will be made available on-line in Fall, 2014 for states with 25 or more CHW survey participants. This study was supported by Centers for Disease Control and Prevention (Grant U48DP001925) and should be cited as:

National Community Health Worker Advocacy Survey: 2014 Preliminary Data Report for the United States and Territories. Mel & Enid Zuckerman College of Public Health, Arizona Prevention Research Center, University of Arizona, Tucson, Arizona.

If you have questions or would like to discuss collaboration on NCHWAS data please contact us at the COPH-azprc@email.arizona.edu

Total CHW Participants by US State and To	erritory	
State/Territory	Number of Responses	%
Alabama	0	0%
Alaska	0	0%
Arkansas	0	0%
Delaware	0	0%
lowa	0	0%
North Dakota	0	0%
New Hampshire	1	0%
North Carolina	1	0%
Ohio	1	0%
Palau	1	0%
Puerto Rico	1	0%
Tennessee	1	0%
Virgin Islands	1	0%
Wyoming	1	0%
Guam	2	0%
South Dakota	2	0%
Hawaii	3	0%
Idaho	4	0%
Maine	5	0%
Georgia	6	0%
	6	0%
Mississippi Oklahoma	6	0%
Vermont	6	0%
Indiana	7	0%
Kentucky	7	0%
West Virginia	7	0%
Kansas	8	1%
Illinois	9	1%
Utah	9	1%
Minnesota	11	1%
Montana	11	1%
Missouri	13	1%
Nevada	13	1%
South Carolina	13	1%
Connecticut	14	1%
Pennsylvania	16	1%
New Jersey	19	1%
New York	19	1%
District of Columbia	20	1%
Rhode Island	23	1%
Virginia	24	2%
Louisiana	25	2%
Massachusetts	25	2%
Maryland	33	2%
Wisconsin	38	2%
Nebraska	41	3%
Florida	52	3%
Colorado	61	4%
New Mexico	66	4%
Washington	67	4%
California	81	5%
Oregon	95	6%
Michigan	102	7%
Arizona	152	10%
Texas	385	25%
Please choose a state (State Not Identified)	48	3%

Total 1,562 100%

## **CHW Demographics**

Average Years Worked	7
Minimum Years Worked	3 months
Maximum Years Worked	50
Total Responses	1,510

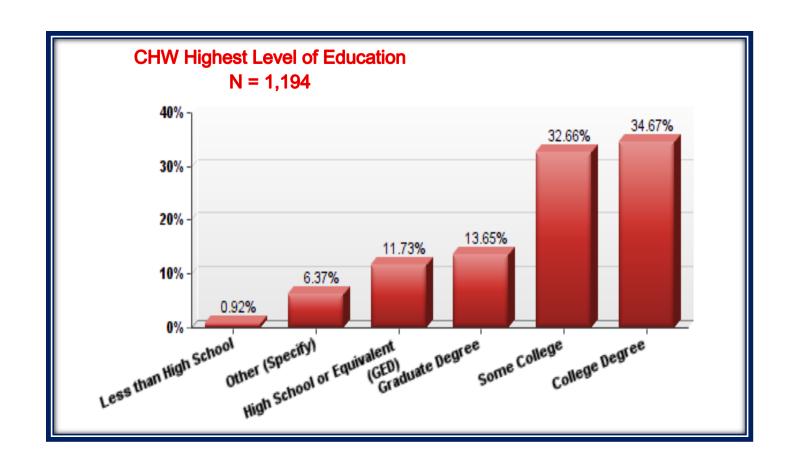
# Text Response Average Age in Years Minimum Age in Years 20

Maximum Age in Years	77
Total Responses	1,225

CHW Gender		
Answer	Response	%
Male	127	11%
Female	1,064	89%
Total Responses		1,191

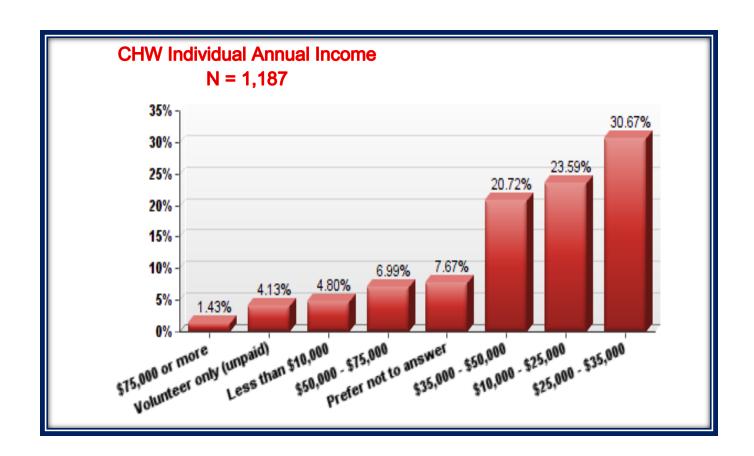
Answer	Response	%
Asian / Pacific Islander	25	2%
Other	47	4%
American Indian / Alaska Native	116	10%
Black / African American	235	20%
Non Hispanic White	276	23%
Hispanic / Latino(a)	532	45%

Answer	Response	%
Less than High School	11	1%
High School or Equivalent (GED)	140	12%
Some College	390	33%
College Degree	414	35%
Graduate Degree	163	14%
Other (Text Specific Not Listed)	76	6%



Number of Hours CHW Work	ed or Voluntee	red in a	Typical Week		
Paid			Voluntee	r	
Average Hours Worked	37		Average Hours Worked	12	
Minimum Hours Worked	01		Minimum Hours Worked	00.5	
Maximum Hours Worked	80		Maximum Hours Worked	70	
Total Responses		1,093	Total Responses		728

CHW Individual Annual Income		
Answer	Response	%
Less than \$10,000	57	5%
\$10,000 - \$25,000	280	24%
\$25,000 - \$35,000	364	31%
\$35,000 - \$50,000	246	21%
\$50,000 - \$75,000	83	7%
\$75,000 or more	17	1%
Volunteer only (unpaid)	49	4%
Prefer not to answer	91	8%
Total Responses		1,187



CHW with Employer-based Health Insuran	ce		
Answer		Response	%
Yes		920	78%
No		257	22%
Total Responses			1,177

Answer	Response	%
Urban Indian Health Center	9	1%
Education Program (School, HeadStart)	11	1%
Indian Health Service	21	1%
Health Insurance	66	4%
Tribal Health Department	99	6%
University	105	7%
Clinic (Not FQCHC)	149	10%
Local Health Department	183	12%
Hospital	218	14%
Federally Qualified Community Health Center (FQCHC)	259	17%
Other* (Text Specific Not Listed Here)	304	20%
Community-based Organization	566	37%

<sup>\*</sup> CHWs could select more than one place of employment. CHWs often selected a primary place of employment listed above and marked Other to specify.

CHW Top Three Health Issues  Answer	Response	%
Tuberculosis - TB	18	1%
Occupational Health	27	2%
Injury Control	69	5%
Environmental Health	108	7%
Asthma	123	8%
Dental Health	123	8%
Adolescent Health	132	9%
Cardio Vascular Disease - CVD (Screening and Management)	133	9%
HIV / AIDS	155	11%
Sexual or Reproductive Health	162	11%
Cancer (Screening and Treatment)	214	15%
Elder Health	223	15%
Alcohol / Substance / Tobacco Use	255	17%
Maternal and Child Health	296	20%
Behavioral Health / Mental Health	352	24%
Chronic Disease Prevention	458	31%
Diabetes (Screening and Self-management)	494	34%
Accessing Health Services	529	36%
Prevention (Nutrition and/or Physical Activity)	530	36%
Total Responses		1,47

Primary Race or Ethnicity of Population Served by CHV  Answer	1	Response	%
		<u> </u>	
Other (Text Specific Not Listed)		88	6%
Asian / Pacific Islander		173	12%
American Indian / Alaska Native		245	16%
Non-Hispanic White		563	38%
Black / African American		614	41%
Hispanic / Latino(a)		975	65%
Total Responses			1,49

## CHW Professional Development

# Level of Agreement with the *American Public Health Association* definition of a Community Health Worker

A Community Health Worker (CHW) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the CHW to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

A CHW also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy text.

Level of agreement	57 (4%)	27 (2%)	476 (39%)	642 (53%)	1,202
	Strongly Disagree	Disagree	Agree	Strongly Agree	Total Responses

CHW Perceptions on Opportunities for Better Pay in Current Place of Employment					
Answer		Response	%		
Yes		237	20%		
No		392	32%		
I don't know		582	48%		
Total Responses			1,211		

Desired Aspects of a Community Health Worker Group		
Answer	Response	%
	776	66%
Getting peer support from others.		
Opportunities to work with other CHWs on issues that are important to the CHW profession.	858	72%
Opportunities to gain leadership skills.	884	75%
Opportunities to share information or learn about community events.	885	75%
Opportunities to network with other CHWs.	929	78%
Opportunities to work with other CHWs on issues that are important to my community.	964	81%
Training or seminars.	1,071	90%
Total Responses		1,184

### CHW Community Advocacy Readings and Resources

#### **Publications**

• Establishing a Professional Profile of Community Health Workers: results from a national study of roles, activities, and training. Ingram M, Reinschmidt K, Schachter KA, Davidson CL, Sabo S, De Zapien JG, Carvajal SC. Journal of Community Health 2012:37(2):529-37. doi:10.1007/s10900-001-9475-2. PubMed PMID: 21964912

http://link.springer.com/article/10.1007/s10900-011-9475-2/fulltext.html

Predictors and a Framework for Fostering Community Advocacy as a Community Health Worker Core Function to Eliminate Health Disparities. Sabo S, Ingram M, Reinschmidt K, Schachter K, Jacobs L, Guernsey de Zapien J, Robinson L, Carvajal C. *American Journal of Public Health* 2013; 103(7):e67-e73. doi: 10.2105/AJPH.2012.301108. Epub 2013:15(2):427-36. PubMed: PMID: 23678904.

http://ajph.publicatons.org/doi/abs/10.2105?AJPH

- Developing an Action Learning Community Advocacy/Leadership Training Program for Community Health Workers and Their Agencies to Reduce Health Disparities in Arizona Border Communities. Schachter K, Ingram M, Jacobs L, Guernsey de Zapien J, Hafter H, Carvajal S. Journal of Health Disparities Research and Practice, Volume 7(2)Spring 2014, 34-49.
- A community health worker intervention to address the social determinants of health through policy change. Ingram M, Schachter K, Sabo, S Reinschmidt K, Gomez S, Guernsey de Zapien J, Carvajal SC.. Journal of Primary Prevention. April 2014, Volume 35, <a href="Issue 2">Issue 2</a>, pp 119-123 <a href="http://link.springer.com/article/10.1007/s10935-013-0335-y">http://link.springer.com/article/10.1007/s10935-013-0335-y</a>

#### **CHW Advocacy and Leadership Curriculum**

#### Acción Para La Salud (Action for Health)

The Acción Para La Salud core research project aims to determine the effectiveness of integrating community advocacy into community health worker (CHW) outreach and education activities in increasing community-driven policy change related to chronic disease prevention.

#### **English Version**

http://azprc.arizona.edu/sites/azprc.arizona.edu/files/Accion-Para-La-Salud-English.pdf

#### Spanish Version

http://azprc.arizona.edu/sites/azprc.arizona.edu/files/Accion%20Para%20la%20Salud%20Guia%20Curricular.pdf

#### **NCHAWS National, Regional and State Reports**

• Reports: <a href="http://azprc.arizona.edu/resources/reports">http://azprc.arizona.edu/resources/reports</a>