

Mel and Enid Zuckerman College of Public Health

# 2014 NATIONAL COMMUNITY HEALTH WORKER ADVOCACY SURVEY

A project of the
University of Arizona,
Arizona Prevention Research Center

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.

This report represents preliminary data for HRSA Region IV.

A total of 86 individuals initiated the on-line survey, of which 86 self-identified as a CHW of whom 86 had not taken the survey in the previous 12 months and were eligible to complete the survey. All reports include 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.

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If you have questions please contact us at the <a href="mailto:COPH-azprc@email.arizona.edu">COPH-azprc@email.arizona.edu</a>

# **CHW Demographics**

#### **States**

Answer	Response	%	
Alabama	0	0%	
North Carolina	1	1%	
Tennessee	1	1%	
Georgia	6	7%	
Mississippi	6	7%	
Kentucky	7	8%	
South Carolina	13	15%	
Florida	52	60%	
TOTAL RESPONSE			86

#### Years Worked as a CHW

	Response
Average Years Worked	7
Minimum Years Worked	6 months
Maximum Years Worked	30
TOTAL RESPONSE	85

#### **CHW Age**

	Response
Average Age in Years	46
Minimum Age in Years	22
Maximum Age in Years	72
TOTAL RESPONSE	67

#### **CHW Gender**

Answer	Response %	
Male	7 10%	
Female	60 90%	
TOTAL RESPONSE		67

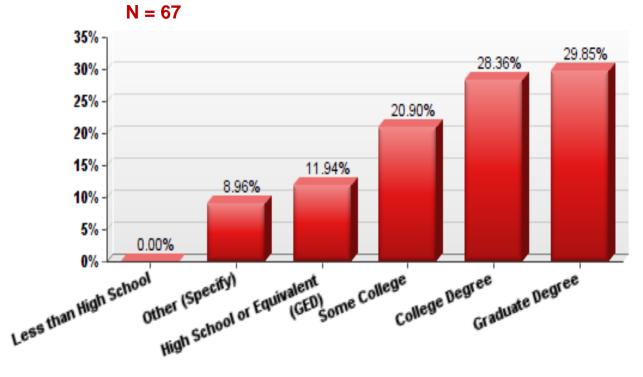
#### **CHW Race and Ethnicity**

Answer		Response	%
Asian / Pacific Islander	T	1	1%
Other (Specify)		1	1%
American Indian / Alaska Native		6	8%
Non Hispanic White		12	18%
Black / African American		21	31%
Hispanic / Latino(a)		27	41%
TOTAL RESPONSE			68

#### **CHW Highest Level of Education**

Answer	Response	%
Less than High School	0	0%
High School or Equivalent (GED)	8	12%
Some College	14	21%
College Degree	19	28%
Graduate Degree	20	30%
Other (Specify)	6	9%
TOTAL RESPONSE		67

# **CHW Highest Level of Education**



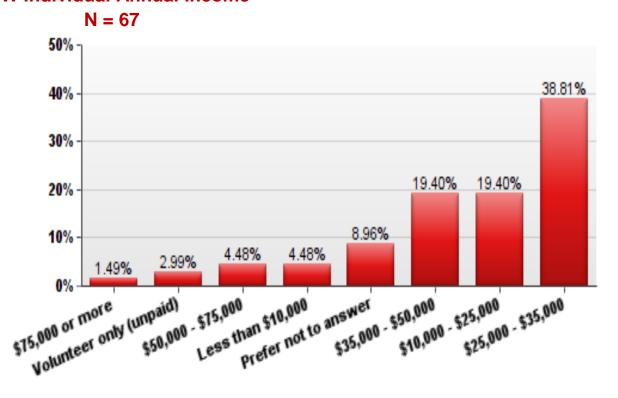
#### Number of Hours CHW Worked or Volunteered in a Typical Week

Paid		Volunteer	
Average Hours Worked	38	Average Hours Worked	13
Minimum Hours Worked	5	Minimum Hours Worked	1
Maximum Hours Worked	80	Maximum Hours Worked	70
TOTAL RESPONSE	62	TOTAL RESPONSE	45

#### **CHW Individual Annual Income**

Answer	Response	%
Less than \$10,000	3	4%
\$10,000 - \$25,000	13	19%
\$25,000 - \$35,000	26	39%
\$35,000 - \$50,000	13	19%
\$50,000 - \$75,000	3	4%
\$75,000 or more	1	1%
Volunteer only (unpaid)	2	3%
Prefer not to answer	6	9%
TOTAL RESPONSE		67

#### **CHW Individual Annual Income**



#### **CHW** with Employer-Based Health Insurance

Answer	Response	%
Yes	46	70%
No	20	30%
TOTAL RESPONSE		66

#### **CHW Place of Employment**

Answer	Response	%
Urban Indian Health Center	0	0%
Education Program	0	0%
Indian Health Service	0	0%
Tribal Health Department	0	0%
Health Insurance	2	2%
Clinic (Not FQCHC)	3	3%
Hospital	10	12%
University	10	12%
Federally Qualified Community Health Center (FQCHC)	11	13%
Other	16	19%
Local Health Department	19	22%
Community-based Organization	39	45%
* CHWs could select more than one place of employment.		
CHWs often selected a primary place of employment listed abov	re and marked Other to spec	eify
Where CHWs Work	·	-
TOTAL RESPONSE		86

**CHW Place of Employment** N = 86Urban Indian Health Center - 0.00% Education Program - 0.00% Indian Health Service - 0.00% Tribal Health Department -0.00% Health Insurance Clinic (Not FQCHC) 3.49% 11.63% Hospital -11.63% University -Federally Qualified Community Health 12.79% Center (FQCHC) 18.60% Other 22.09% **Local Health Department** 45.35% Community-based Organization 10% 20% 30% 40% 50% 0% 60%

#### Where CHWs Work SUMMARY – City Only

City	Response	
Atlanta	4	
AvonPark	2	
Beaufort, Bluffton, Ridgeland	1	
Belzoni	1	
Bonifay	1	
Boynton Beach	1	
Casselberry	2	
Charleston	1	
Clearwater	1	
Columbia	7	
Cutler Bay	1	
Durham	1	
Fort Myers	1	
Grennville	5	
Hazard	1	
Hialeah	2	
Hinds	1	
Hollywood	1	
Homestead	1	
Hudson	1	
Jacksonville	5	
Jupiter	1	
Land O Lakes	1	
Lawrenceville	1	
Lexington	2	
Memphis	1	
Miami	12	
Miami Gardens	2	
Montgomery	1	
Mt. Sterling	4	
North Miami. NM Beach. Little Haiti	1	
Ocoee	1	
Orange Park	1	
Orlando	1	
Pembroke Pines	1	
Pensacola	1	
Rome	1	
Sebring	1	
St. Petersburg	1	
Sumter	1	
Tallahassee	4	
Tampa	4	
Winter Haven	1	
Yazoo City	1	
TOTAL RESPONSE		86

#### **Top Three Health Issues CHWs Work On**

Answer		Response	%
Occupational Health	T	0	0%
Environmental Health		0	0%
Injury Control	T	1	1%
Tuberculosis - TB		2	2%
Asthma		6	7%
Elder Health		6	7%
Adolescent Health		8	10%
Dental Health		9	11%
Cardio Vascular Disease - CVD (Screening and Management)		9	11%
Behavioral Health / Mental Health		10	12%
Cancer (Screening and Treatment)		16	19%
Maternal and Child Health		16	19%
Sexual or Reproductive Health		19	23%
Alcohol / Substance / Tobacco Use		19	23%
HIV / AIDS		22	27%
Prevention (Nutrition and/or Physical Activity)		22	27%
Accessing Health Services		23	28%
Chronic Disease Prevention		26	31%
Diabetes (Screening and Self-management)		30	36%
TOTAL RESPONSE			83

#### **Primary Race or Ethnicity of Population Served by CHWs**

Answer	Response	e %
Asian / Pacific Islander	6	7%
American Indian / Alaska Native	6	7%
Other (Specify)	8	10%
Non-Hispanic White	30	36%
Black / African American	46	55%
Hispanic / Latino(a)	54	64%
TOTAL RESPONSE		84

### **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.

Question	Strongly Disagree	Disagree	Agree	Strongly Agree	Total Responses
Level of agreement	4 (6%)	1 (2%)	26 (38%)	37 (54%)	68

#### CHW Perceptions on Opportunities for Better Pay in Current Place of Employment

Answer	Response	%
Yes	8	12%
No	22	32%
I don't know	38	56%
TOTAL RESPONSE		45

#### Desired Aspects of a Community Health Worker Professional Association or Group

Answer	Response	%
Getting peer support from others.	31	46%
Opportunities to work with other CHWs on issues that are important to the CHW profession.	41	61%
Opportunities to share information or learn about community events.	45	67%
Opportunities to network with other CHWs.	47	70%
Opportunities to work with other CHWs on issues that are important to my community.	47	70%
Opportunities to gain leadership skills.	51	76%
Training or seminars.	57	85%
TOTAL RESPONSE		67

## A CHW Member Of A CHW Professional Association or Group

Answer	Response	%
Yes	26	39%
No	40	61%
TOTAL RESPONSE		66

#### 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://aiph.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. <u>Journal of Health Disparities Research and Practice, Volume 7(2)Spring 2014, 34-49</u>.
- 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>