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ARIZONA PREVENTION  
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## 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.

This report represents preliminary data for **HRSA Region VI**.

A total of 482 individuals initiated the on-line survey, of which 482 self-identified as a CHW of whom 482 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.

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 HRSA  
Region VI – (AR, LA, NM, OK, TX)  
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If you have questions please contact us at the [COPH-azprc@email.arizona.edu](mailto:COPH-azprc@email.arizona.edu)

## CHW Demographics

### States

<i>Answer</i>	<i>Response</i>	<i>%</i>
Arkansas	0	0%
Oklahoma	6	1%
Louisiana	25	5%
New Mexico	66	14%
Texas	385	80%
<b>TOTAL RESPONSE</b>		<b>482</b>



### Years Worked as a CHW

	<i>Response</i>
Average Years Worked	7
Minimum Years Worked	6 months
Maximum Years Worked	50
<b>TOTAL RESPONSE</b>	<b>457</b>

### CHW Age

	<i>Response</i>
Average Age in Years	46
Minimum Age in Years	22
Maximum Age in Years	75
<b>TOTAL RESPONSE</b>	<b>343</b>

### CHW Gender

<i>Answer</i>		<i>Response</i>	<i>%</i>
Male		31	9%
Female		317	91%
<b>TOTAL RESPONSE</b>			<b>348</b>

### CHW Race and Ethnicity

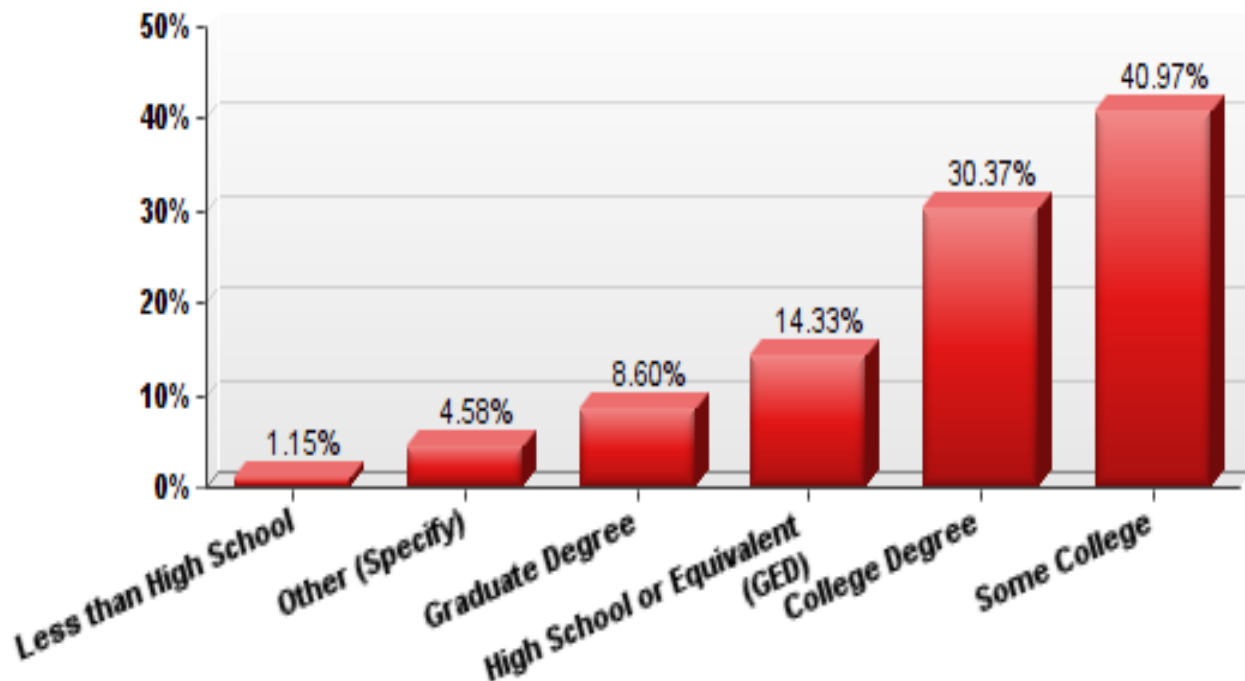
<i>Answer</i>	<i>Response</i>	<i>%</i>
Asian / Pacific Islander	3	1%
Other (Specify)	9	3%
American Indian / Alaska Native	30	9%
Non Hispanic White	43	12%
Black / African American	70	20%
Hispanic / Latino(a)	200	57%
<b>TOTAL RESPONSE</b>		<b>348</b>

### CHW Highest Level of Education

<i>Answer</i>	<i>Response</i>	<i>%</i>
Less than High School	4	1%
High School or Equivalent (GED)	50	14%
Some College	143	41%
College Degree	106	30%
Graduate Degree	30	9%
Other (Specify)	16	5%
<b>TOTAL RESPONSE</b>		<b>349</b>

### CHW Highest Level of Education

**N = 349**



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

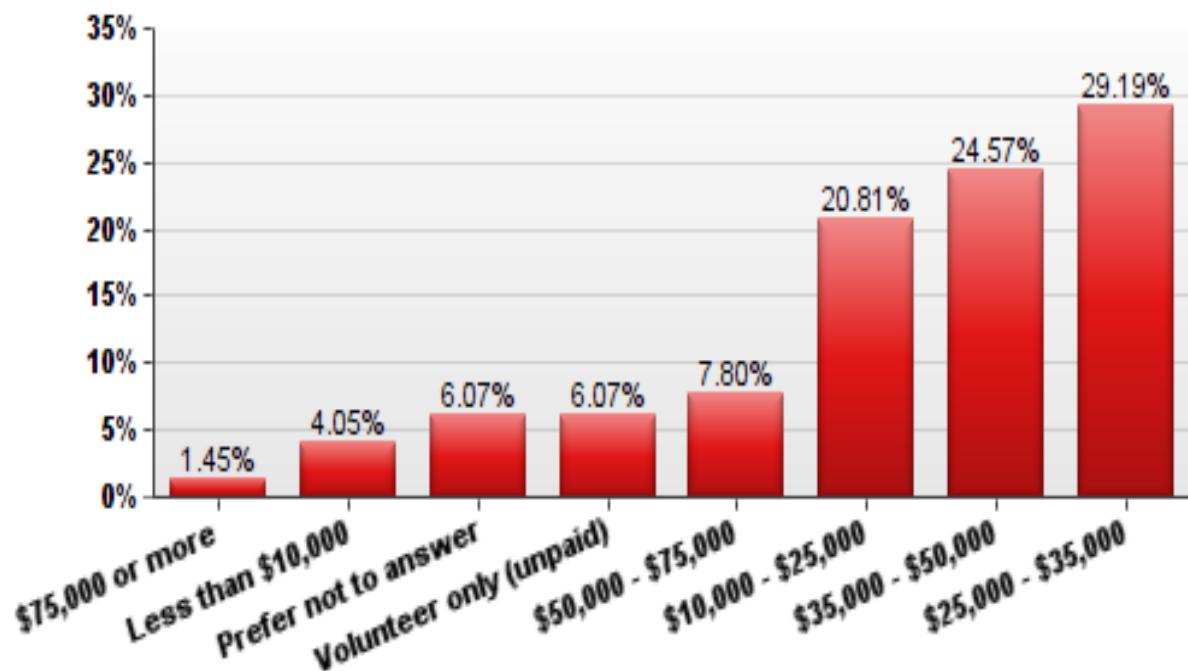
<i>Paid</i>		<i>Volunteer</i>	
Average Hours Worked	39	Average Hours Worked	12
Minimum Hours Worked	4	Minimum Hours Worked	6 months
Maximum Hours Worked	80	Maximum Hours Worked	50
<b>TOTAL RESPONSE</b>	<b>312</b>	<b>TOTAL RESPONSE</b>	<b>231</b>

### CHW Individual Annual Income

<i>Answer</i>		<i>Response</i>	<i>%</i>
Less than \$10,000		14	4%
\$10,000 - \$25,000		72	21%
\$25,000 - \$35,000		101	29%
\$35,000 - \$50,000		85	25%
\$50,000 - \$75,000		27	8%
\$75,000 or more		5	1%
Volunteer only (unpaid)		21	6%
Prefer not to answer		21	6%
<b>TOTAL RESPONSE</b>			<b>346</b>

### CHW Individual Annual Income

**N = 346**



### CHW with Employer-Based Health Insurance

Answer	Response	%
Yes	275	80%
No	70	20%
<b>TOTAL RESPONSE</b>		<b>345</b>

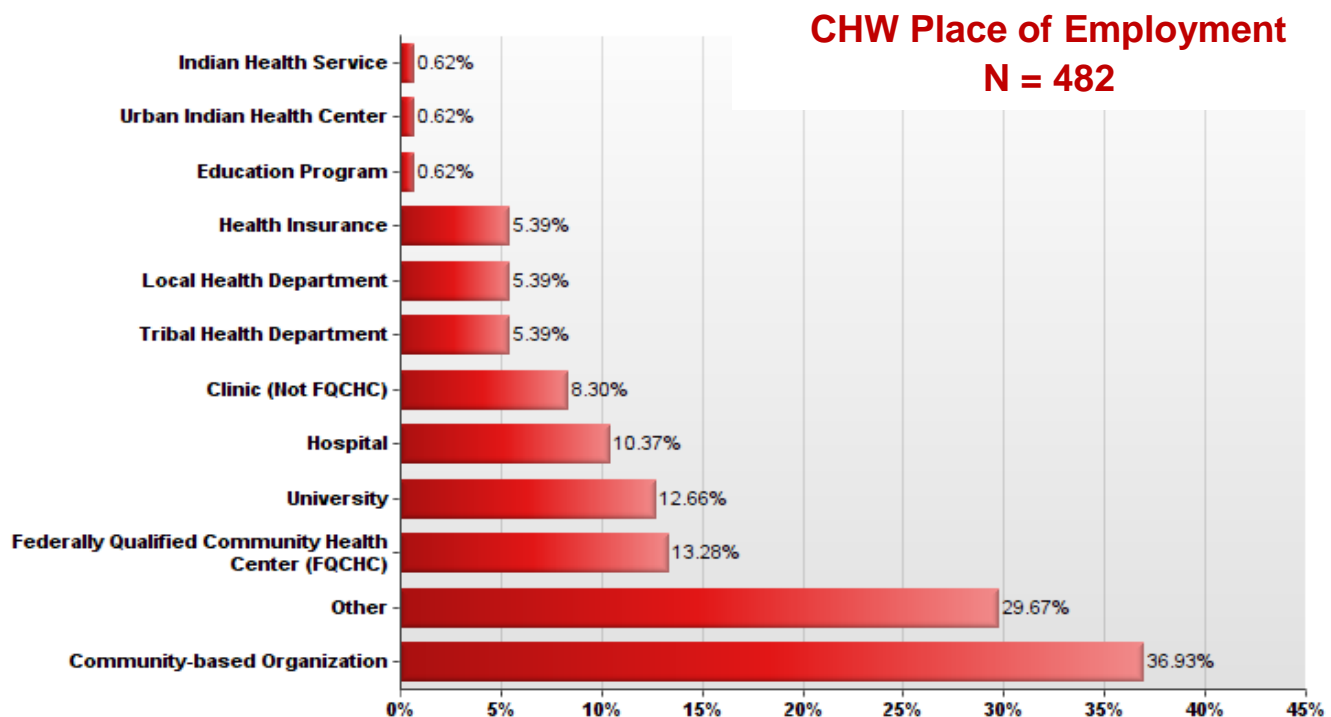
### CHW Place of Employment

Answer	Response	%
Indian Health Service	3	1%
Urban Indian Health Center	3	1%
Education Program	3	1%
Health Insurance	26	5%
Local Health Department	26	5%
Tribal Health Department	26	5%
Clinic (Not FQCHC)	40	8%
Hospital	50	10%
University	61	13%
Federally Qualified Community Health Center (FQCHC)	64	13%
Other	143	30%
Community-based Organization	178	37%

\* CHWs could select more than one place of employment.

CHWs often selected a primary place of employment listed above and marked Other to specify Where CHWs Work

<b>TOTAL RESPONSE</b>	<b>482</b>
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### Where CHWs Work

**SUMMARY – City Only**

<b>City</b>	<b>Response</b>	<b>City</b>	<b>Response</b>
Acoma	1	League City	1
Ada	2	Lordsburg	6
Alamo	2	Louisiana	1
Albany	1	Lubbock	16
Albuquerque	18	Lufkin	2
Alton	2	Mansfield	1
Amarillo	1	Manuelito	1
Arlington	4	Maverick	1
Austin	25	McAllen	2
Bay City	1	Mescalero	1
Beaumont	3	Midland	1
Bee Busy Inc.	1	Mineral Wells	2
Beeville	1	Missouri City	2
Belle Chasse	1	Morton	1
Brackettville	2	Nacogdoches	4
Bridgeport	1	New Braunfels	1
Brownsville	18	New Orleans	20
Carlsbad	2	Oklahoma City	2
Chaparral	1	Overton	1
Cleveland	1	Paris	2
Conroe	2	Pasadena	1
Corpus Christi	9	Pharr	1
Counselor	2	Plano	2
Crownpoint	7	Port Arthur	1
Cuba, Ojo Encino	1	Purcell	1
Cuero	1	Raymondville	1
Dallas	24	Richmond	2

**SUMMARY – City Only**

*Continued...*

<i>City</i>	<i>Response</i>	<i>City</i>	<i>Response</i>
Del Rio	2	Rio Grande Valley	1
Denton	1	Robstown	2
Dickinson	1	Rosenberg	2
Donna	1	Round Rock	1
Dulce	1	San Angelo	1
Eagle Pass	10	San Antonio	23
El Paso	20	San Benito	1
Espanola	1	San Elizario	3
Falfurrias	1	San Juan	2
Fort Worth	20	San Marcos	1
Friona	1	Ship rock	2
Fruitland	1	Silver City	5
Gretna	1	Socorro	1
Harlingen	2	Stafford	1
Hatch	1	Sugar Land	1
Hempstead	1	Sulphur	1
Houston	93	Taos	1
Huerfano	1	Taylor	1
Irving	2	Tenaha	2
Isleta	1	Texarkana	1
Jasper	1	Thibodaux	1
Jemez Pueblo	1	Tomball	1
Kingsville	1	Two Grey Hills	1
Laguna	4	Tyler	20
Laredo	5	Weslaco	8
Las Cruces	4	Whitehorse Lake	1
<b>TOTAL RESPONSE</b>		<b>474</b>	

### Top Three Health Issues CHWs Work On

<i>Answer</i>	<i>Response</i>	<i>%</i>
Tuberculosis - TB	6	1%
Occupational Health	9	2%
Injury Control	24	5%
Cardio Vascular Disease - CVD (Screening and Management)	30	6%
Environmental Health	36	8%
Asthma	37	8%
Adolescent Health	47	10%
Dental Health	49	11%
HIV / AIDS	49	11%
Sexual or Reproductive Health	52	11%
Cancer (Screening and Treatment)	63	14%
Alcohol / Substance / Tobacco Use	75	16%
Elder Health	80	17%
Maternal and Child Health	85	18%
Behavioral Health / Mental Health	108	23%
Chronic Disease Prevention	127	27%
Diabetes (Screening and Self-management)	167	36%
Prevention (Nutrition and/or Physical Activity)	167	36%
Accessing Health Services	176	38%
<b>TOTAL RESPONSE</b>	<b>463</b>	

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

<i>Answer</i>	<i>Response</i>	<i>%</i>
Other (Specify)	19	4%
Asian / Pacific Islander	45	10%
American Indian / Alaska Native	58	12%
Non-Hispanic White	139	30%
Black / African American	200	43%
Hispanic / Latino(a)	358	76%
<b>TOTAL RESPONSE</b>	<b>468</b>	



## 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	16 (5%)	5 (1%)	116 (33%)	211 (61%)	348

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

Answer	Response	%
Yes	76	22%
No	105	30%
I don't know	33	46%
<b>TOTAL RESPONSE</b>	<b>350</b>	

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

<i>Answer</i>	<i>Response</i>	<i>%</i>
Getting peer support from others.	227	65%
Opportunities to gain leadership skills.	257	74%
Opportunities to work with other CHWs on issues that are important to the CHW profession.	273	79%
Opportunities to share information or learn about community events.	273	79%
Opportunities to network with other CHWs.	281	81%
Opportunities to work with other CHWs on issues that are important to my community.	292	84%
Training or seminars.	324	93%
<b>TOTAL RESPONSE</b>		<b>347</b>

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

<i>Answer</i>	<i>Response</i>	<i>%</i>
Yes	148	42%
No	203	58%
<b>TOTAL RESPONSE</b>		<b>351</b>

## 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.*  
<http://link.springer.com/article/10.1007/s10935-013-0335-y>
- **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, Issue 2, pp 119-123 <http://link.springer.com/article/10.1007/s10935-013-0335-y>

### 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 : <http://azprc.arizona.edu/resources/reports>