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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.

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

A total of 252 individuals initiated the on-line survey, of which 252 self-identified as a CHW of whom 252 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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*National Community Health Worker Advocacy Survey: 2014 Preliminary Data Report for HRSA Region IX – (AZ, CA, HI, NV, Guam, Republic of Palau, American Samoa, The Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Republic of the Marshall Islands)
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If you have questions please contact us at the COPH-azprc@email.arizona.edu

CHW Demographics

States

<i>Answer</i>	<i>Response</i>	<i>%</i>
Palau	1	0%
Guam	2	1%
Hawaii	3	1%
Nevada	13	5%
California	81	32%
Arizona	152	60%
TOTAL RESPONSE		252

Years Worked as a CHW

	<i>Response</i>
Average Years Worked	8
Minimum Years Worked	3 months
Maximum Years Worked	33
TOTAL RESPONSE	244

CHW Age

	<i>Response</i>
Average Age in Years	45
Minimum Age in Years	20
Maximum Age in Years	73
TOTAL RESPONSE	204

CHW Gender

<i>Answer</i>	<i>Response</i>	<i>%</i>
Male	17	8%
Female	192	92%
TOTAL RESPONSE		209

CHW Race and Ethnicity

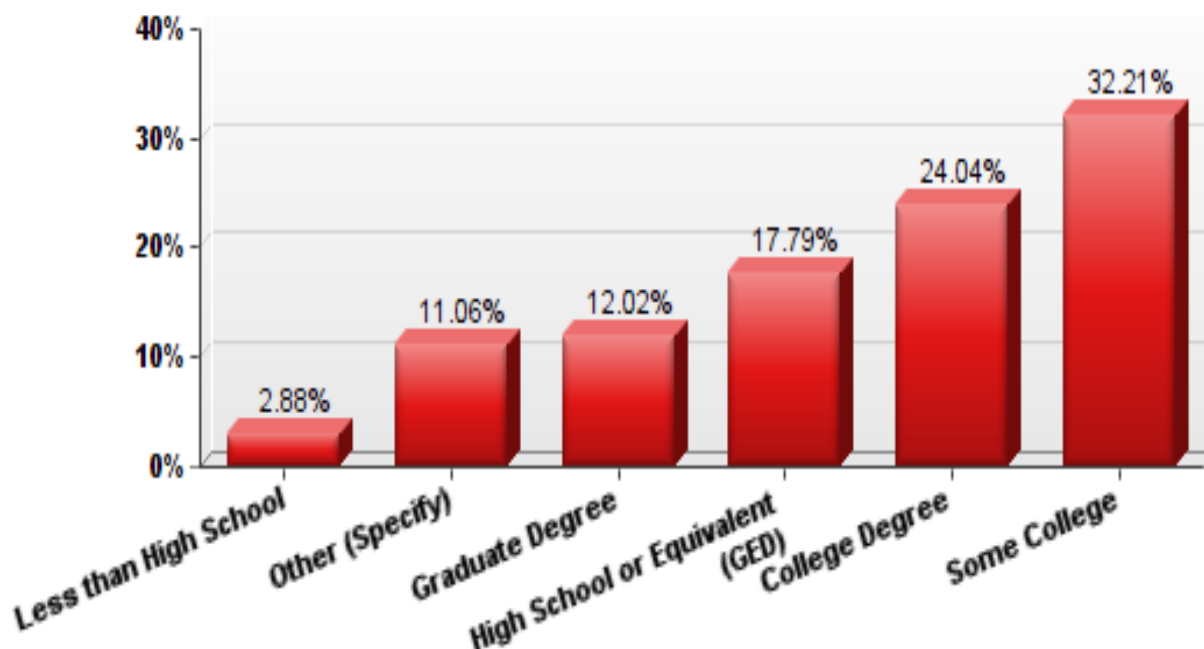
Answer	Response	%
Asian / Pacific Islander	8	4%
Black / African American	9	4%
Other (Specify)	10	5%
Non Hispanic White	22	11%
American Indian / Alaska Native	46	22%
Hispanic / Latino(a)	131	63%
TOTAL RESPONSE		208

CHW Highest Level of Education

Answer	Response	%
Less than High School	6	3%
High School or Equivalent (GED)	37	18%
Some College	67	32%
College Degree	50	24%
Graduate Degree	25	12%
Other (Specify)	23	11%
TOTAL RESPONSE		208

CHW Highest Level of Education

N = 208



Number of Hours CHW Worked or Volunteered in a Typical Week

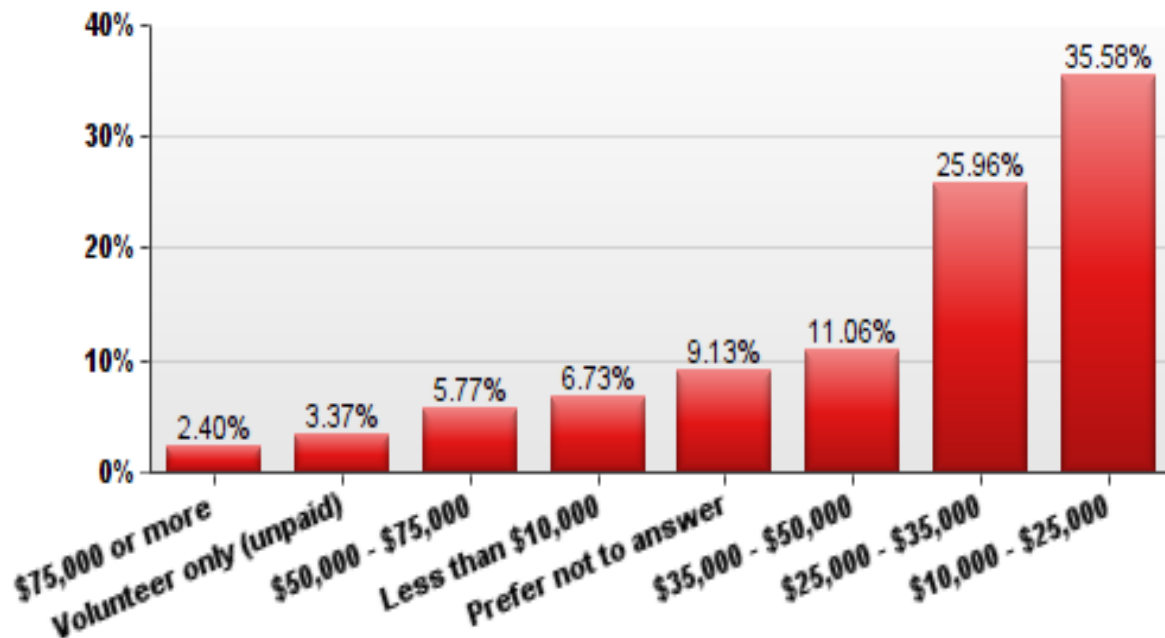
<i>Paid</i>		<i>Volunteer</i>	
Average Hours Worked	37	Average Hours Worked	11
Minimum Hours Worked	2	Minimum Hours Worked	1
Maximum Hours Worked	80	Maximum Hours Worked	50
TOTAL RESPONSE	183	TOTAL RESPONSE	110

CHW Individual Annual Income

<i>Answer</i>		<i>Response</i>	<i>%</i>
Less than \$10,000		14	7%
\$10,000 - \$25,000		74	36%
\$25,000 - \$35,000		54	26%
\$35,000 - \$50,000		23	11%
\$50,000 - \$75,000		12	6%
\$75,000 or more		5	2%
Volunteer only (unpaid)		7	3%
Prefer not to answer		19	9%
TOTAL RESPONSE			208

CHW Individual Annual Income

N = 208



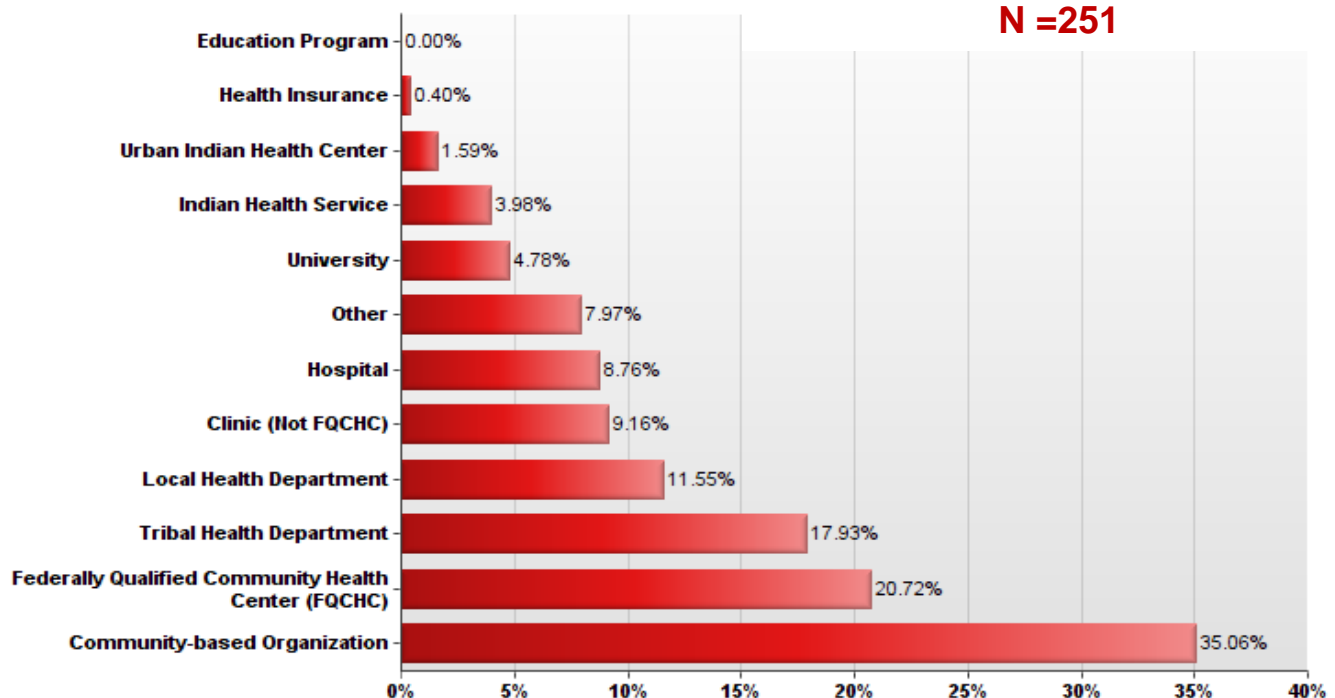
CHW with Employer-Based Health Insurance

Answer	Response	%
Yes	154	75%
No	50	25%
TOTAL RESPONSE		204

CHW Place of Employment

Answer	Response	%
Education Program	0	0%
Health Insurance	1	0%
Urban Indian Health Center	4	2%
Indian Health Service	10	4%
University	12	5%
Other	20	8%
Hospital	22	9%
Clinic (Not FQCHC)	23	9%
Local Health Department	29	12%
Tribal Health Department	45	18%
Federally Qualified Community Health Center (FQCHC)	52	21%
Community-based Organization	88	35%
* 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		
TOTAL RESPONSE		251

CHW Place of Employment N =251



Where CHWs Work
SUMMARY – City Only

City	Response	City	Response
Alameda - Health System	1	Phoenix	22
Apple valley	1	Porterville	1
Arcata	1	Prescott	3
Banning	1	Prescott Valley	1
Barrigada	1	Red Bluff	1
Bishop	1	Redding	1
Burbank	1	Reno	3
Chinle	8	Rock Point	1
Chula Vista	1	Rohnert Park	1
Cottonwood	1	Rough Rock	1
Dennehotso	1	Sacaton	1
Dilkon	1	Sacramento	3
Duarte	1	San Bernardino	3
Elko	1	San Carlos	2
Ely	1	San Diego	11
Flagstaff	3	San Francisco	3
Fort Defiance	3	San jose	1
Ganado	4	San Leandro	1
Greasewood Springs	1	San Luis	17
Happy Camp	1	San Ysidro	1
Henderson	1	Santa Maria	8
Holbrook	3	Santa rosa	2
Hopland	1	Scottsdale	2
Indian Wells	1	Sells	1
Inscription House - Health Clinic	1	Shonto	1
Jeddito	1	Show Low	1
Kaunakakai	1	Somerton	16
Kingman	2	Springerville	2
Koror	1	Stockton	1
Lakeport	2	Tamuning	1
Lanai	1	Teec Nos Pos	1
Las Vegas	5	Tempe	1
Las Vegas & North Las Vegas	1	Tuba City	2
Lemon Grove	1	Tucson	14
Long Beach	3	Tulare	1
Los Angeles	10	Van Nuys	3
Lupton	1	Victorville	1
Maricopa	1	Wailuku	1
Modesto	1	Wells	1
Moencopi	1	Wellton	2
Nogales	13	Whippoorwill	1
North Hollywood	1	White Cone	1
Oakland	4	Willows	2
Parker	1	Window Rock	1
Pechanga	1	Winslow	1
Petaluma	1	Yuma	8
TOTAL RESPONSE		248	

Top Three Health Issues CHWs Work On

<i>Answer</i>	<i>Response</i>	<i>%</i>
Tuberculosis - TB	5	2%
Occupational Health	5	2%
Dental Health	14	6%
Injury Control	19	8%
Asthma	19	8%
Adolescent Health	21	9%
Environmental Health	23	9%
HIV / AIDS	23	9%
Cardio Vascular Disease - CVD (Screening and Management)	30	12%
Sexual or Reproductive Health	32	13%
Cancer (Screening and Treatment)	35	14%
Elder Health	48	20%
Behavioral Health / Mental Health	55	22%
Accessing Health Services	56	23%
Maternal and Child Health	58	24%
Alcohol / Substance / Tobacco Use	58	24%
Diabetes (Screening and Self-management)	90	37%
Chronic Disease Prevention	104	42%
Prevention (Nutrition and/or Physical Activity)	118	48%
TOTAL RESPONSE	246	

Primary Race or Ethnicity of Population Served by CHWs

<i>Answer</i>	<i>Response</i>	<i>%</i>
Other (Specify)	9	4%
Asian / Pacific Islander	27	11%
Black / African American	32	13%
Non-Hispanic White	48	19%
American Indian / Alaska Native	77	31%
Hispanic / Latino(a)	169	68%
TOTAL RESPONSE	247	

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	12 (6%)	4 (2%)	86 (41%)	108 (51%)	210

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

Answer	Response	%
Yes	50	23%
No	71	33%
I don't know	94	44%
TOTAL RESPONSE	215	

Desired Aspects of a Community Health Worker Professional Association or Group

<i>Answer</i>	<i>Response</i>	<i>%</i>
Getting peer support from others.	145	69%
Opportunities to work with other CHWs on issues that are important to the CHW profession.	149	71%
Opportunities to share information or learn about community events.	159	76%
Opportunities to gain leadership skills.	160	77%
Opportunities to network with other CHWs.	162	78%
Opportunities to work with other CHWs on issues that are important to my community.	167	80%
Training or seminars.	190	91%
TOTAL RESPONSE		209

A CHW Member Of A CHW Professional Association or Group

<i>Answer</i>	<i>Response</i>	<i>%</i>
Yes	80	38%
No	133	62%
TOTAL RESPONSE		213

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>