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ARIZONA PREVENTION  
RESEARCH CENTER

## NATIONAL COMMUNITY HEALTH WORKER ADVOCACY SURVEY

A project of the  
Arizona Prevention Research Center,  
Zuckerman College of Public Health, University of Arizona  
Tucson, Arizona.

The 2014 National Community Health Worker Advocacy Survey (NCHWAS) is the largest on-line survey of Community Health Workers ever conducted. 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 on-line survey was distributed to CHWs through local, state and national CHW professional associations, programs and allies and was available in English, Spanish and Korean. Data gathered through NCHWAS is intended to be 'open source' and available for states and CHW networks to use for planning and workforce sustainability efforts. Data reported here are intended for public presentations and reports and 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 1858 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. Tucson, Arizona: Arizona Prevention Research Center, Zuckerman College of Public Health, University of Arizona; 2014.*

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

### Total CHW Participants by US State and Territory

State/Territory	Number of Responses	%
Alabama	0	0%
Alaska	0	0%
Arkansas	0	0%
Delaware	0	0%
Iowa	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%
Mississippi	6	0%
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 ( <i>State Not Identified</i> )	48	3%

**Total**

**1,562**

**100%**

## CHW Demographics

### Years Worked as a CHW

Average Years Worked	7
Minimum Years Worked	3 months
Maximum Years Worked	50
<b>Total Responses</b>	<b>1,510</b>

### CHW Age

*Text Response*

Average Age in Years	45
Minimum Age in Years	20
Maximum Age in Years	77
<b>Total Responses</b>	<b>1,225</b>

### CHW Gender

Answer	Response	%
Male	127	11%
Female	1,064	89%
<b>Total Responses</b>	<b>1,191</b>	<b>100%</b>

### CHW Race and Ethnicity

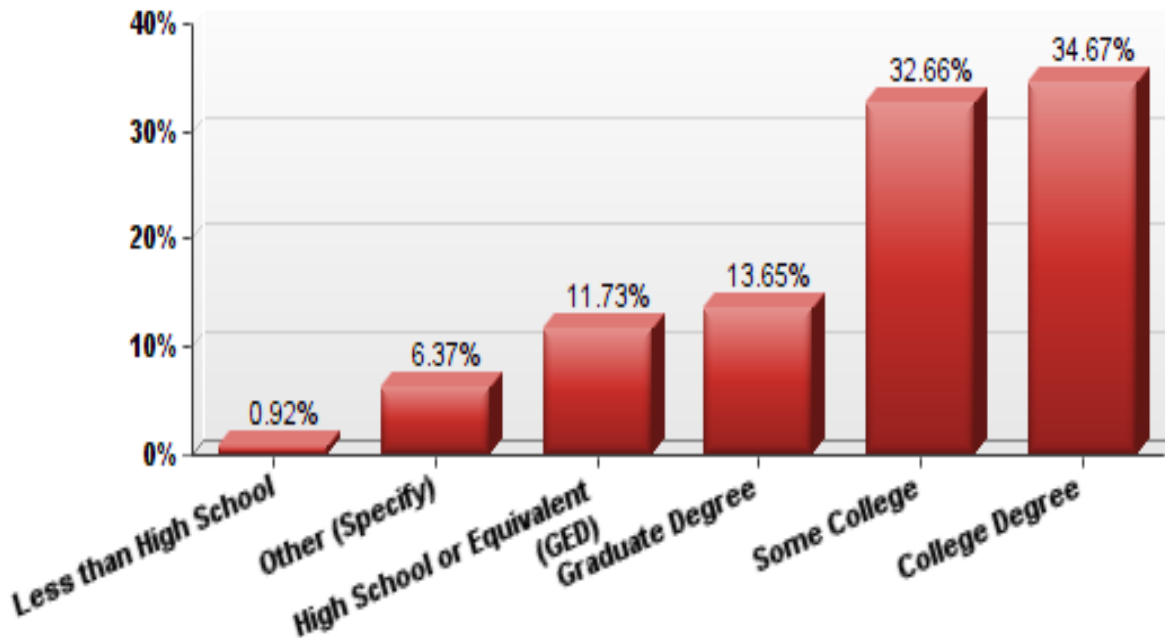
Answer	Response	%
Asian / Pacific Islander	25	2%
Other	47	4%
American Indian / Alaska Native	116	10%
Black / African American	235	20%
Non Hispanic White	276	23%
Hispanic / Latino(a)	532	45%
<b>Total Responses</b>	<b>1,183</b>	

### CHW Highest Level of Education

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 ( <i>Text Specific Not Listed</i> )	76	6%
<b>Total Responses</b>	<b>1,194</b>	<b>100%</b>

## CHW Highest Level of Education

N = 1,194



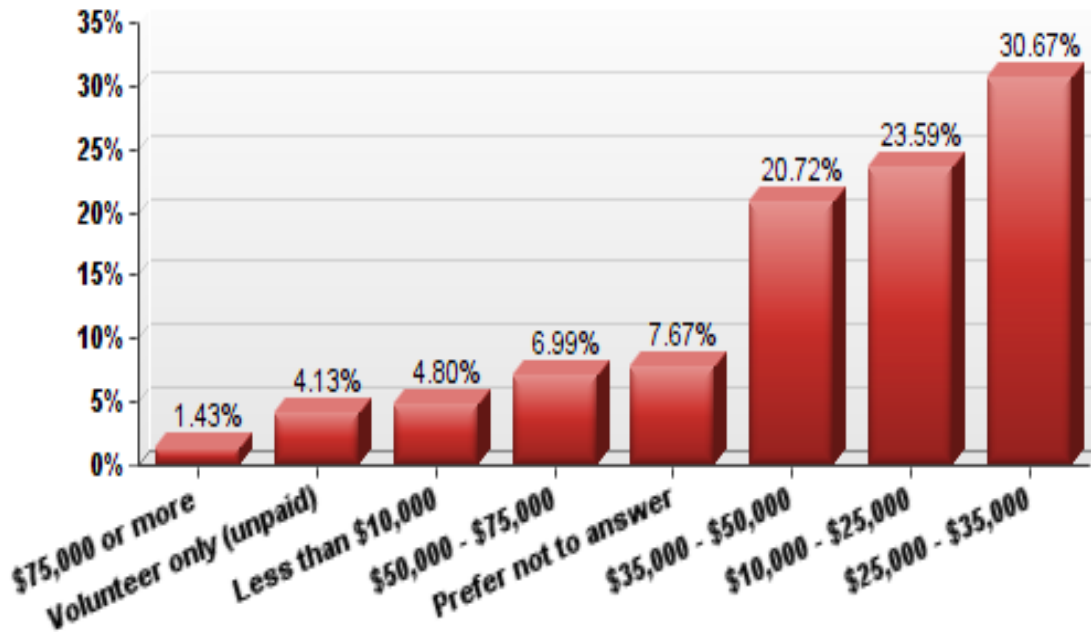
### Number of Hours CHW Worked or Volunteered in a Typical Week

	<i>Paid</i>		<i>Volunteer</i>
Average Hours Worked	37	Average Hours Worked	12
Minimum Hours Worked	1	Minimum Hours Worked	.5
Maximum Hours Worked	80	Maximum Hours Worked	70
<b>Total Responses</b>	<b>1,093</b>	<b>Total Responses</b>	<b>728</b>

### CHW Individual Annual Income

<i>Answer</i>	<i>Response</i>	<i>%</i>
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%
<b>Total Responses</b>	<b>1,187</b>	<b>100%</b>

**CHW Individual Annual Income**  
**N = 1,187**



**CHW with Employer-based Health Insurance**

Answer	Response	%
Yes	920	78%
No	257	22%
<b>Total Responses</b>	<b>1,177</b>	<b>100%</b>

**CHW Place of Employment**

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* ( <b>Text Specific Not Listed Here</b> )	304	20%
Community-based Organization	566	37%
<b>Total Responses</b>	<b>1,531</b>	

\* 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

<i>Answer</i>	<i>Response</i>	<i>%</i>
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%
<b>Total Responses</b>		<b>1,473</b>

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

<i>Answer</i>	<i>Response</i>	<i>%</i>
Other ( <i>Text Specific Not Listed</i> )	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%
<b>Total Responses</b>		<b>1,492</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.

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

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

<i>Answer</i>	<i>Response</i>	<i>%</i>
Yes	237	20%
No	392	32%
I don't know	582	48%
<b>Total Responses</b>	<b>1,211</b>	<b>100%</b>

### Desired Aspects of a Community Health Worker Group

<i>Answer</i>	<i>Response</i>	<i>%</i>
Getting peer support from others.	776	66%
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%
<b>Total Responses</b>	<b>1,184</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://download.springer.com/static/pdf/668/art%253A10.1007%252Fs10900-011-9475-2.pdf?auth66=1384969874\\_597840e1a0c7569bc0cd970c26a08557&ext=.pdf](http://download.springer.com/static/pdf/668/art%253A10.1007%252Fs10900-011-9475-2.pdf?auth66=1384969874_597840e1a0c7569bc0cd970c26a08557&ext=.pdf)
- **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>
- **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>

### 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>