









The Role of Community Health Workers in Diabetes Self Management

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Community Health Workers

- Peers, from the communities they serve
- Known by many different names
- Long history of "natural helpers" in all cultures
- Not new to health care
- Resurgence in 90s in US
- Range of activities and roles as diverse as titles
- In 1998, survey documented 12,500 CHWs in the US across a number of programs
- Few studies evaluating impact/ effectiveness, particularly in chronic diseases like diabetes



Definition of a Community Health Worker...

- Many and varied, but generally they
 - carry out functions related to health care delivery
 - are trained in some way in the context of the intervention
 - have no formal professional or paraprofessional certificate or degree
- In the US, the primary role of CHWs is to fill the gap in the health care system that is particularly acute among underserved communities



Key roles of community health workers....

The National Community Health Advisor Study¹, identified seven core roles played by CHWs:

- Bridging cultural mediation between communities and the health care system
- Providing culturally appropriate and accessible health education and information, often by using popular education methods
- Assuring that people get the services they need
- Providing informal counseling and social support
- Advocating for individuals and communities within the health and social service systems
- Providing direct services (such as basic first aid) and administering health screening tests; and
- Building individual and community capacity



Various Job Titles



- Community Health Worker is an umbrella term that refers to many different job titles
 - Coach
 - Lay Health Educator
 - Community Health Representative
 - Community Health Outreach Worker
 - Promotora

Characteristics of Sites with CHW Interventions

Site	Audience	Area Served	Setting	CHW title
Campesinos Sin Fronteras Somerton AZ	Hispanic	Urban/ rural	Community, Clinic	Promotora
Galveston County Health District, La Marque TX	Hispanic, African Am, White	Urban/ rural	Community	Coach
Gateway Community Health Center, Laredo TX	Hispanic	Urban/ rural	Clinic	Promotora
Holyoke Health Center Holyoke MA	Hispanic	Urban	Clinic/ community	Promotora
LaClinica de La Raza Oakland CA	Hispanic	Urban	Clinic, community	Promotora
MaineGeneral Health Waterville ME	White	Urban/Rural	Community Worksite	Lay Health Educator
MT-WY Tribal Leaders Council, Billings MT	American Indian	Indian Country	Community	Community Health Representative
Open Door Health Center Homestead FL	Hispanic, African Am	Urban/ rural	Clinic/ Community	Promotora



Recruiting and Retention of CHWs

- Methods used to recruit CHWs
 - Newspaper advertisement
 - Networking with other CHW programs
 - Referrals from providers and other professionals
 - Word of mouth
- Methods used to recognize and retain CHWs
 - Certificate from program
 - Graduation ceremony
 - Promotions
 - Wage increase*
 - Recognition ceremonies
- * Compensation varies: CHWs may be unpaid volunteers or they may receive wages including being paid as employees with benefits)



Training of CHWs

- Requires orientation plus continuing education or training by a CHW supervisor or health professional
- Examples of areas in which CHWs are trained:
 - Ability to access resources
 - Coordination of services
 - Crisis management
 - Knowledge of medical services
 - Knowledge of social services
 - Leadership
 - Organizational skills
 - Interpersonal communication skills
 - Disease prevention and management
 - Confidentiality
 - Stanford Chronic Disease Self Management Program (CDSMP)



Roles and Activities of CHWs

- Bridging/cultural mediation between communities and the health and social services systems
- Providing culturally appropriate health education and information
- Assuring that people get the services they need
- Providing informal counseling and social support
- Advocating for individuals and for community needs
- Building individual and community capacity
- Leading exercise groups
- Using social marketing strategies to encourage behavior change



Recruitment of clients for CHWs

- Referrals from other agencies or health care providers
- Recruitment through screening programs
- Flyers/poster/brochures
- Recruitment through outreach activities
- Churches and other nonprofit agencies
- Newspapers
- Word of mouth



Places for Delivery of CHW Services

- Client's home
- Community activity or health center
- Faith-based organization
- Migrant camp
- On the street/not defined
- Public Health Clinic
- Work site

Key CHW Roles in Community-based Programs

- Screen for depression at home visit using PHQ-9
- Refer as needed to health care providers
- Follow up in person and via telephone for problem solving and goal setting
- Lead support groups
- Build trust and develop a supportive relationship



Key CHW Roles in Clinic/Community-based Programs

- Assess symptoms and negative emotions (trained by mental health specialists)
- Be part of the mental health team with bi-directional referral
- Participate with patient in nurse led medical management group
- Refer to health care provider for PHQ-9 screening and diagnosis
- Recruit, encourage and retain support group participants
- Conduct weekly telephone follow up for support
- Focus on group interventions
- Strengthen linkages to community resources



Key Roles of CHWs in Addressing Emotional Health

- Provide education and address myths and stigmas
- Teach coping skills
- Conduct assessments/ screen
- Encourage and assist with problem solving and goal setting
- Connect clients with resources/ encourage access to care
- Provide informal counseling and support
- Support treatment plan
- Monitor and follow up
- Prepare for dealing with emergencies
- Bridge cultural beliefs and language issues



What makes CHWs effective?

- CHWs have access to the population they serve
- The unique relationship they have with clients provides social support that is critical to self management
- This trusting relationship lays the foundation for good self management
- CHW's have great flexibility to meet clients needs, e.g.,
 - Amount of time spent
 - Time of day services are provided
 - Place of contact
 - Range and extent of services



CHWs Address Barriers



- Bridge cultural beliefs and language issues
- Encourage access to care
- Minimize stigma of emotional problems
- Create understanding of disease
- Respect spiritual beliefs
- Break symptom cycle
- Improve relationship with providers
- Communicate emotional issues more clearly



Lessons Learned/Recommendations

- CHWs serve as role models for healthy coping by taking care of themselves
- Involving health care team in developing protocols is key to program success
- It is essential to establish clear roles and procedures for emergencies
- Only clinicians can diagnose mental disorders
- Provide education materials and activities that are culturally appropriate
- Recognize the importance of your unique relationship with the client in addressing emotional health
- Assessment of risk factors for people with diabetes should include assessment of emotional health
- Healthy coping is as important as physical activity and healthy eating



CHW Resources

- http://www.famhealth.org/CHWResources/index.htm
- http://rho.arizona.edu/Resources/Studies/chastudy/default.aspx
- http://www.usm.edu/csho/
- http://www.usm.edu/csho/program_links.html
- http://www.chwnetwork.org/page5.html
- http://www.cdc.gov/diabetes/projects/comm.htm

For more information, see

http://diabetesiniative.org



