

Incorporating *Promotores(as)* *de Salud* into Community Health Assessments



A Toolkit by MHP Salud



Introduction

Health Centers are vital resources in many underserved communities. One of the most important roles they play is ensuring responsiveness to current health needs and concerns and the appropriate use of resources. To meet these objectives, the Health Resources and Services Administration (HRSA) requires that a Health Center “demonstrates and documents the needs of its target population, updating its service area, when appropriate.”¹ In addition to helping direct funding and resources, community health assessments can assist Health Centers to improve health outcomes and promote healthy lifestyles. Successful and effective assessments require advanced planning and community involvement and collaboration.

There are many different types of health assessments, all with varying phases in the process. Some of the most common are surveys, individual interviews, asset mapping, a community census, and/or focus groups. In this toolkit, the community health assessment process is divided into three main phases that are included in virtually all forms of assessments:

- *Planning* - Define the purpose and scope of the assessment and identify and prepare the assessment team

- *Implementation* - Conduct assessments and collect data
- *Evaluation* - Set priorities and create an action plan based on the findings

This toolkit is intended to assist Health Centers and other organizations on how to incorporate *Promotores(as) de Salud*, the Spanish term for Community Health Workers, into each stage of the community health assessment. It provides guidelines on including *Promotores(as)* in the assessment process, but it is not intended to be a comprehensive plan.

Additionally, depending on the knowledge and experience of the *Promotores(as)* in community health assessments, some training may be needed. Throughout the toolkit, tips and activities are provided to reinforce the skills needed to contribute effectively to the assessment process.

What are Community Health Assessments?

A community health assessment is a tool used to determine the interests, strengths and needs of a community. There are many reasons to do a community health assessment. It can provide an accurate profile of the population being served. More importantly, by asking people for their opinions and experiences, assessments can identify health-related topics or activities that will be most helpful and important to them. This information can help prioritize services based on a community's resources. An assessment can also help focus the activities of the Health Center and the training staff may need. Furthermore, information gathered in the assessment can be used to support a request for funding in the future.

Why Include *Promotores(as) de Salud* in Community Health Assessments?

Promotores(as) de Salud are carefully chosen community members who promote health in their

own communities. As members of minority and underserved populations, they are in a unique position to build on strengths and to address unmet health needs in their communities. *Promotores(as)* integrate information about health and the health care system into the community's culture, language and value system, thus reducing many of the barriers to health services.

Promotores(as) are known by a variety of different names, including Community Health Worker (CHW). The Community Health Worker Section of the American Public Health Association defines a CHW as:

"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 and social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery."²

Although *Promotores(as)* engage in a broad range of activities, they share a number of common roles, including:

- Serving as a link between communities and health and human service agencies
- Providing informal counseling and support
- Delivering culturally-competent health education
- Advocating on behalf of the community
- Capacity-building on individual and community levels
- Offering direct services and emergency assistance

One of the most important elements of any community health assessment is creating community ownership. Involving the community from the beginning of the assessment process builds buy-in and support from community members, not only for the assessment itself, but also any actions that are taken as a result of it.³

As community members, *Promotores(as)* share culture, values, and similar life experiences with the Health Center's target population. The key expertise that *Promotores(as)* possess lies in their

understanding of the community and their ability to build relationships with peers. They establish trust in the community more easily than outsiders which allows for improved communication and understanding. By incorporating *Promotores(as)* into community health assessments, they can increase community engagement and participation in the assessment. Furthermore, involving *Promotores(as)* in community health assessments can strengthen the *Promotores(as)*' outreach and research skills, resulting in a stronger community-based workforce that will be better able to serve the community.

Health Centers can collaborate with *Promotores(as)* in different ways. Health Centers with existing *Promotor(a)* programs can include *Promotores(as)* in the assessment and benefit from the trust and expertise their *Promotores(as)* have developed within the community. For Health Centers that are just beginning their *Promotor(a)* programs, involving the *Promotores(as)* in the assessment process can serve as an introduction of him or her to the community. Finally, Health Centers that do not have a *Promotor(a)* program can still benefit from the work of *Promotores(as)* by collaborating with other local, community-based organizations that have *Promotor(a)* programs.



Incorporating *Promotores(as)* into Community Health Assessments

Step 1: Planning

Include Promotores(as) in the Assessment Planning Team

Community representation and diversity on the planning team are important to obtaining an accurate assessment.⁴ *Promotores(as)* can offer a unique perspective to the planning team because they already have a deep understanding of the culture, norms, beliefs, values, and attitudes of the community. They can use this knowledge to speak to the strengths, challenges, atmosphere, and environment of the community that they serve. They can also identify other community members that could participate on the planning team as well.

Another benefit of having *Promotores(as)* on the planning team is that they can help guide the focus of the assessment. They can offer information on social determinants of health in the community and any health concerns they have seen in the community. *Promotores(as)* can also provide suggestions on what data collection methodology may work best with community members. Moreover, if questions need to be translated into another language, *Promotores(as)*

can review the questions in advance to make sure the assessment uses correct vocabulary and is at an appropriate literacy level for the target population.

TIP

To create an environment that will allow for greater participation and opportunity for engagement, consider the following elements in the planning of meetings:

Language: Conduct the meeting in the language that the majority of participants speak and/or provide interpreters. Also, make sure any materials or handouts are provided in the appropriate language or made bilingual.

Child care: Offer child care services or a space where children can be supervised by an adult.

Accessible location or transportation: Choose a central location that is accessible to the majority of participants and/or consider providing transportation or gas cards for those with limited access/resources to or without transportation.

Time: Be considerate of team member's time commitments and responsibilities (work, family, etc.) and try to schedule meetings at convenient times for the majority of the group.

Welcoming atmosphere: Provide refreshments or snacks if meetings occur over meal times or right after work hours. Also plan activities such as icebreakers and breaks to encourage members to get to know each other personally.⁵

Prepare Promotores(as) for Conducting the Assessment

Define key terminology and methodologies

Although many *Promotores(as)* collect data as part of their daily activities, many are not trained on research skills. Providing a basic introduction on the terms and methods in a community health assessment can help



Promotores(as) broaden their understanding of the process and heighten their appreciation of health data in their work.⁶

Activity: Review the Terms

1. Ask the *Promotores(as)* to study the key terms provided in the Appendix.
2. Divide the *Promotores(as)* into two teams and decide which team will go first.
3. Quiz the *Promotores(as)* on the key terms by giving the first team the chance to answer a question. If they are unable to answer the question correctly, give the second team the opportunity to answer the question. If the first team does answer the question correctly, pose a new question to the second team.
4. Award each team a point for each question they answer correctly.
5. After all of the questions have been answered, give the winning team a small prize.

Practice using the chosen assessment tool

Once the methodology for doing the assessment has been chosen, it is important that the *Promotores(as)* are familiar with the tool and how it should be used. Practicing conducting the assessment in advance will help ensure that the *Promotores(as)* are comfortable with the activities and completing any required forms. Also, any unclear wording or vocabulary can be identified and changed.

Discuss strategies to build rapport

It is likely that the *Promotores(as)* were selected based on their existing rapport in the community, or because the *Promotores(as)* have demonstrated the ability to build rapport in new situations. Even though this may be one of the *Promotores(as)*' strongest abilities, it is still a good idea to review some strategies to build rapport in the context of a community health assessment as this may be a new experience for the *Promotores(as)*.



- *Promotores(as)* should emphasize that the participant's knowledge of the community can provide influential feedback to help shape policies or programs.
- Finding common ground to connect on can help community members feel at ease.
- Although the *Promotores(as)* will most likely have a relationship with the participants, it is still important for them to present themselves as a professional, not as a friend. This may become increasingly complicated when trying to make a participant feel comfortable, but being too informal and familiar may hinder the *Promotores(as)*' ability to collect impartial information.⁷

Activity: Building Rapport

Building trust and relationships with different people – for example, people of different ages, genders, occupations, etc. - may require various kinds of approaches.

With the *Promotores(as)*, create a list of the different types of groups within the community – for example, elderly males, elderly females, teenage males, teenage females, etc. and brainstorm how building rapport would be different for each group.⁸

Develop listening skills

Capturing all of the important information from someone in an interview, focus group, or other direct interaction takes strong, active listening skills. To some this skill comes naturally, but for others it takes practice. Even for those with stronger listening skills, collecting the right feedback and information through listening in a research context may be new. Going through role plays during training is a good way to prepare *Promotoras(es)* for any sort of interactions they may encounter while conducting research in the field. *Promotores(as)* should be prepared to:

- *Invite conversation* – Posture, positioning, eye contact, and body language can all influence the impression the *Promotor(a)* makes on a speaker. The *Promotores(as)* should show they are interested in the speaker's comments by monitoring all of these unspoken expressions. As experts on the local norms and culture, they should already know which nonverbal forms of expression are most appropriate, but discussing it as a group will bring these nonverbal gestures to the forefront of their minds.
- *Remain neutral* – To get an honest and true perspective, *Promotores(as)* should carefully mask any responses they may have to the information, especially if it is a negative response. This may be difficult because of the *Promotores(as)*' personal connection to the participants and the topics they are discussing,

but the smallest responses could be perceived as judgment and make the participants unwilling to share personal information.

- *Understand nonverbal communication* – Nonverbal communication is a two-way conversation. The *Promotores(as)* should not only be aware of their own body language and nonverbal gestures, but of the participant's as well. The participant's nonverbal gestures may convey a completely different message from what they are saying, and sometimes be more informative than their words. The *Promotores(as)* should learn to apply their knowledge of local norms to interpret this information.
- *Effectively use silence* – In any direct interaction, even the shortest period of silence can feel uncomfortable, but it can also encourage the speaker to provide more information. It gives the speaker a chance to collect their thoughts and elaborate on the topic.
- *Summarize* – Rephrasing or summarizing shows the speaker that the *Promotor(a)* is listening. It also ensures that the *Promotor(a)* understood what the speaker was trying to communicate, and gives the speaker an opportunity to clarify or elaborate on anything that was vague or unclear. Good rephrasing or summarizing statements include "I hear you saying that..." or "Let me see if I got what you were saying..."⁹

Activity: Learning to Listen

Give all group members a handout that says:

- "Six things I would like to stay the same in my community:"
 - "Six things I would like to change about my community:"
1. Ask group members to spend 5 minutes jotting down responses to both statements
 2. Divide the group up into pairs
 3. Each pair decides who is 'A' and 'B'
 4. "A" people speak for one minute about the things they would like to stay the same and for one minute about the things they would like to change.
 5. "B" people paraphrase back to 'A' people what they heard
 6. Switch speakers and repeat the activity¹⁰



Activity: Body Language Charades

1. Write down different emotions and/or traits (e.g., timid, nervous, aggressive, joyful) on small pieces of paper (one emotion/trait per piece of paper) and put them in a hat. Be sure you have enough for each person.
2. Have one person come to the front of the group and pick a piece of paper from the hat.
3. Ask the person to act out the feeling indicated on the paper using only nonverbal forms of communication. Emphasize that the performer is not allowed to speak. The audience should shout out their guesses as to which emotion or trait the person is demonstrating until someone gets it right.
4. After each person has gone, discuss how body language can convey a message. Talk about body language or gestures that are common in their culture. Discuss how to read body language and other nonverbal cues and how to convey them as a facilitator.

Facilitation skills

Acting as a facilitator may be intimidating to *Promotores(as)*, especially if they have limited experience or do not feel comfortable with public speaking. Before beginning the assessment activities, the *Promotores(as)* should master the following facilitation skills:

- *Planning group sessions* – Prior to a group session the *Promotor(a)* should have planned what questions they will ask, what materials and/or required forms they will need, who will participate, have acquired any incentives they will distribute (if applicable), and have selected an appropriate location. It is a good idea to provide the *Promotores(as)* with tools, like a planning worksheet, that will help them plan each detail for any data collection activity.
- *Using probing or clarifying questions* - *Promotores(as)* should understand how to gently encourage group session participants to elaborate on topics of interest. Some examples of probing questions are “Could you tell me more about...” or “Could you explain to me what you

mean when you say...”¹¹

- *Avoiding using yes/no questions* – Work with the *Promotores(as)* to develop alternate ways to ask a question that will initiate discussion as opposed to eliciting only one or two word answers. For example, direct the *Promotores(as)* to ask open-ended questions like “What kind of recreational activities do you do in the community?” rather than close-ended questions like “Do you do participate in any recreational activities in the community?”
- *Managing time* – Review strategies on how to politely direct people to the next topic when they are spending too much time on one topic or dominating the conversation. These might include statements like “I’m sensing that this is a very important topic to you, but I’d also really like to hear what you think about...”
- *Encouraging equal participation* – *Promotores(as)* should be equipped with some tools to include even the shiest participants. Some strategies they could use include integrating a game like hot potato into the session so that everyone has a designated time to speak, or simply redirecting the conversation to group members that haven’t spoken much.

The *Promotores(as)* may need help translating some of these skills into their local culture. For example, if it is not traditional for women to voice their opinions when men are present, review how each of these skills can be adapted in the specific cultural context.

Activity: Steps to a Successful Group Session

1. Write out or print each of the following statements on a separate piece of paper:
 - Develop a plan for the session and collect the materials.
 - Review the information that will be presented in the session.
 - Create a positive environment. For example, put the chairs in a circle, offer snacks.
 - Introduce yourself, say your name, and

thank everyone for coming.

- Ask the participants to introduce themselves.
 - Do a *dinámica*.
 - Explain the objectives or the reasons for the session.
 - Find out what the participants know – flow of ideas or experiences.
 - Increase their knowledge using interactive activities!
 - Ask participants if they have comments or questions.
 - Do an evaluation of the session using a questionnaire, quiz, or game. It can evaluate the knowledge of the participants or the quality of the session.
 - Tell them how they can contact you and where they can get more information.
 - Pass out brochures or gifts, if you have any.
 - Breathe deeply and give yourself a pat on the back for doing a good job!
2. Mix up the pages so that the steps are not in order.
 3. Distribute one page per participant (if there are fewer participants, give each participant a few pages).
 4. Have the participants work as a team to put the steps in the proper order for demonstrating all of the steps to running a successful group session.



TIP

One way to get a group to know one another and energized is by using icebreakers or *dinámicas*. For some examples of different *dinámicas*, see MHP Salud's [*Dinámicas Booklet*](#).

Activity: Get Out the Nerves

1. Divide *Promotores(as)* into pairs.
2. Give everyone a minute to silently think about something they do when they are nervous, for example: over-using words like “Um” or “Like,” fidgeting, or talking with their hands. Instruct them to keep this to themselves
3. Assign one person as the facilitator and one person as the participant in each pair.
4. Ask each pair to come in front of the group and role-play an interview. The interview can be on a topic as basic as their favorite places to eat in the community. While the facilitator is conducting the interview, tell them to exaggerate the nervous habit they previously thought of. For example, if a person says “Um” a lot when they are nervous, in the role play they might say “So, um, tell me, um, what are, um, your favorite, um, places to eat, um, in the community.” Encourage them to have fun with it.
5. After a few minutes, have the audience guess what the nervous habit of the facilitator was.
6. Have the facilitator and participant switch roles and complete steps 4 and 5 again.
7. Give each pair an opportunity to come in front of the group to act out their nervous habits.
8. As a group, discuss the commonalities in the nervous habits people displayed and strategize ways to avoid doing them.



Confidentiality

By respecting the confidentiality of the participants, the *Promotores(as)* are more likely to get honest and candid feedback. *Promotores(as)* should know and abide by HIPPA regulations as well as any organizational policies regarding confidentiality. Be sure that *Promotores(as)* know that they should explicitly communicate the purpose of collecting information, that the participants' identities will be kept confidential, and the parameters for which the information will be used.

In addition, provide *Promotores(as)* with tools to protect confidentiality. If taking notes or using paper forms, covered clipboards or brown paper envelopes are cost-effective ways to conceal confidential documents. If using technology, be sure that the device and any data storage systems are password protected. Also remind the *Promotores(as)* to completely sign out of any applications or programs used to collect and/or store information.

Maintaining trusting relationships

In addition to adhering to confidentiality regulations, the *Promotores(as)* should be transparent about the purpose of collecting information. To maintain their trusting relationships with community members, it is important that the *Promotores(as)* do not make any

Activity: Confidentiality Role Play

Ask for two volunteers to act out a role play. Give each volunteer a role – either Susana or Miguel – and ask them to read the following background information on their characters. Do not share the information with the rest of the group.

Susana:

You are a *Promotora* and you have had a busy day hosting a focus group with some community members about their health needs. At the end of the focus group, a neighbor approaches you to ask about counseling services available for survivors of domestic violence. When you come home, you greet your husband, Miguel. He asks you how your day was, and you tell your husband about the neighbor who wanted counseling for domestic violence. It's nice to have someone to talk to about this.

Miguel:

You are happy to see your wife after a long day at work. You know that she goes out into the community and talks with a lot of people about their health, but she does not really tell you that much about who she talks to and what they talk about. You'd like her to tell you more and not keep things secret from you. You ask her about who she talked to today and what she did. You are happy when she starts to tell you what she really did today.

Ask the volunteers to act out the situation and have the audience observe what is being played out.

Discuss with the group the following questions:

- Is the *Promotora* respecting the confidentiality of her clients?
- Should Susana share the information with her husband, Miguel?
- What should Susana and Miguel understand in regard to confidentiality?

promises about what services can be delivered to participants at this point. It is also important that the participants understand that while their feedback is valued, ideas or suggestions they make may not necessarily come to fruition.

Step 2: Implementation

Setting Up the Community Health Assessment

Leveraging their inside knowledge of the community, *Promotores(as)* are the most qualified candidates to coordinate the following details of the community health assessment. Provide them with some modest guidance, but trust them to make the following decisions:

- *Who:* One of the greatest strengths the *Promotores(as)* bring to a community assessment is understanding the social dynamics of the community. The *Promotores(as)* will know who the key resources in the community are and how to access them. They will also understand the nuances of local culture and know how to navigate social norms when coordinating group activities, etc. Even so, they may need some guidance from someone with a more objective opinion to be sure they are including participants that represent a diverse range of perspectives.
- *What:* *Promotores(as)* can give suggestions on the types of questions or assessment formats that would be most appropriate for the target community or population. Their baseline knowledge of the community can help provide some direction for the questions.
- *Where:* Instruct the *Promotores(as)* to select a location that is familiar, comfortable, and accessible to all participants. Depending on the planned activities for the assessment, suitable locations may include participant's homes, community centers, libraries, churches, or the Health Center. The *Promotores(as)* will be able to identify these locations.
- *When:* The *Promotores(as)* will know when the busiest times of day in the communities are and will be able to plan around them.

- *Incentives:* Offering an incentive to participants can encourage participation. *Promotores(as)* will have a good idea of what kinds of incentives will appeal to the participants. Work with them to decide on an appropriate and feasible incentive.



TIP

Have your *Promotores(as)* wear an identifying name badge or shirt with your organization's logo while working in the field to give them more credibility.

Data Collection

The *Promotores(as)* can either be the primary or sole data collectors for a community health assessment. After training they should be ready to head out into the communities. Be sure to provide them with all of the materials they will need to collect data and provide on-going support by scheduling regular supervision meetings.

Secondary data

In addition to secondary data the Health Center may have from their records and reports, information from *Promotor(a)* program records may be a useful secondary data point as well. Many of the activities completed as part of a *Promotor(a)* program can help you learn about the interests and needs of the community. For example:

- *Program forms:* Health topics or concerns that most commonly appear on program forms *Promotores(as)* have submitted can identify a need or gap in services in the community.
- *Supervision and training:* During supervision and training meetings, what problems or topics do the *Promotores(as)* say that people are experiencing? What solutions do they suggest? These comments are like mini community health assessments.
- *Previous evaluations:* Trends in data and feedback collected from previous evaluations can help point to needs or areas for improvement in service delivery.



TIP

Devise a reporting system so that someone from the agency, ideally the Program Coordinator, always knows where the *Promotores(as)* are when they are out in the community. This is especially important if the *Promotores(as)* are working in remote areas.

Supervision and Support

Regular supervision meetings should be scheduled so the *Promotores(as)* will have time with their supervisor at least once before the community health assessment is completed. If the community health assessment will span over several weeks, supervision meetings should be scheduled weekly. Before supervision meetings, set a deadline by which the *Promotores(as)* need to submit all collected information and forms so that they can be reviewed by the supervisor prior to the meeting. Use supervision meetings as an opportunity to review the submitted data with the *Promotor(a)*, problem-shoot challenges that have arisen, and provide any necessary training or support.

Group supervision meetings that include all *Promotores(as)* are another option that may prove to be more helpful for some programs. Collectively sharing experiences and discussing progress as a group can help to keep the *Promotores(as)* motivated, provide additional support, and allow the group to

Activity: Managing Difficult Situations

1. Ask the *Promotores(as)* to brainstorm a list of problems they have or might encounter while facilitating individual or group discussions in the community (e.g., dominant speaker, shy participant, etc.)
2. Put each problem on an index card.
3. Ask for three to four volunteers to participate in a role play as participants in a group session.
4. Distribute one problem role card to each volunteer and tell them not to reveal their role except through their behavior.
5. Ask for one other volunteer to play the role of the group session leader.
6. Assign a topic for the group of role players to discuss – for example, health care needs in the community. The volunteers with the role cards should act out their roles accordingly and the volunteer group leader should act out how he/she would handle the situations.
7. For those not participating in the role play, tell them to observe the following:
 - What does the leader do?
 - How do the group members respond?
 - What else would you do to handle these different situations?
8. Stop the role play after five to 10 minutes, and ask the group to discuss what happened in the role play. Discuss the questions listed above.¹²

collectively problem-solve any issues encountered in the communities. It will also offer an opportunity to discuss activities that have been completed and where. This will prevent the *Promotores(as)* from duplicating their colleague's work.

Documenting Community Resources

As the *Promotores(as)* complete the different community health assessments activities they will likely come into contact with various community-based organizations or resources. Ask them to keep a running list of these resources that may be relevant to community needs. This list will be helpful in the evaluation process when brainstorming activities to respond to the needs that were identified through the assessment. Community resources may include non-profits serving the area, community-based organizations, libraries, meeting places, grocery stores, unused open spaces, community gardens, etc.

TIP

Design a flyer with information on the *Promotores(as)* and organization to distribute to community members and organizations while collecting information.

Step 3: Evaluation

Apply Key Findings

Typically, the *Promotores(as)* will not participate in the data analysis, but they can still play an important role in applying the key findings to practical solutions for the community. Once you have the results of the data analysis, share them with the *Promotores(as)* and *Promotor(a)* Program Director or Coordinator. Ask the *Promotores(as)* for input on the results and brainstorm activities that could help people with the needs identified in the assessment. For example, if a key finding was that the Health Center hours are not convenient for the community, the *Promotores(as)* can help identify the best hours for people in the community to access the Health Center.

Sometimes the needs identified may be out of the scope of work for a Health Center. However, that does not mean the *Promotor(a)* program or other community organizations won't benefit from it. Spread the information around to anyone who could benefit from it to help increase efficiency in overall service delivery in the community. Also, give each *Promotor(a)* the results from their community so that they can follow up on any specific needs that were identified.

Present to the Communities

After taking the time to provide thoughtful feedback to the *Promotores(as)*, the community members may feel a heightened sense of investment in the results and the Health Center's response. Help the *Promotores(as)* design a presentation that will summarize the findings and proposed action steps. Also prepare them to lead a discussion with community members on the findings. This will be a great opportunity for *Promotores(as)* to develop their presenting skills.

Reflection

Finally, provide the *Promotores(as)* and the participating communities with the opportunity to reflect on the assessment process. Ask them what went well and what could be improved in the future. This can most easily be done through surveys, focus groups, or a community forum. For



professional development, it is important to also give the *Promotores(as)*' constructive feedback on their performance and offer on-going training and education opportunities.

Conclusion

Promotores(as) can be a valuable asset to a community health assessment. Their insights into the community can help direct the assessment, get candid feedback from hard to reach populations, and add a different perspective to the final data analysis. To successfully integrate *Promotores(as)* into the process, provide interactive training, plenty of support and supervision, and offer opportunities for the *Promotores(as)* to voice their ideas.

The involvement in this process should act as a stepping stone to a continued leadership and advocacy role in the community for the *Promotores(as)*. The assessment is just one small part of what *Promotores(as)* are capable of doing in the community, so keep the *Promotores(as)* actively involved in future assessments. Help them build on the foundation of skills they developed through participating in the assessment through different training and professional development opportunities.



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Appendix: Key Community Health Assessment Terms

Community Health Assessment - A process of finding out the interests, strengths and needs of a community.

Need - The gap between a present state (what is) and a desired state (what should be).

Resources - Assets that the community possesses, which can include individuals, organizations, infrastructure, natural resources, or anything that can be used to improve the quality of life in a community.

There are both direct and indirect assessment instruments to conduct a community health assessment. Direct methodologies include:

Individual interviews – Interviews that are conducted with key stakeholders from the community. Key stakeholders may include community members, community activists or advocates, elected officials, local authority figures, police, other health and human service organizations, health professionals, school staff, local non-profits or service groups, clergy, or business owners. Those chosen should accurately reflect the community and provide a diverse range of perspectives.

Key informant surveys – A group of key stakeholders will be selected to complete a survey. Again, the group selected should be representative to the community, even if some of the people selected represent a dissenting opinion.

Focus groups – Small, but representative, groups of people that come together to discuss the strengths and challenges that exist in the community or on a specific topic. The discussion is guided by a facilitator.

Asset or community mapping – There are a variety of ways to complete an asset or community map, but regardless of the method employed, this is an interactive instrument to illustrate the strengths in a community, and where desired changes might be.



Community census – A community census is used to better understand the demographics of any given community. Basic demographic information from community residents, such as age or sex, is collected from the target population or community.

Indirect methods include:

Encounter/contact records – Records that are collected every time a health service provider has an interaction with a community member. *Promotores(as)* typically complete and submit a form for every interaction they have with a community member, so files like this should be available from any active *Promotor(a)* program.

Observations – Observations are notes on the environment, attitudes, culture, norms, values, and beliefs held by community members. The sense of familiarity that *Promotores(as)* have with the community makes them the prime candidates to make observations. These observations may have been reported during supervision meetings or other team meetings.



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This publication was made possible by grant number U30CS09744 from the Health Resources and Services Administration (HRSA), Bureau of Primary Health Care. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the HRSA.

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