



Evaluation of Community Health Workers in Pennsylvania

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Where did the concept of community health worker derive

Concept of community health worker developed in Latin America, Asia, and Africa in poor communities. They wanted to bring concept of health care to poor and isolated communities. Neighbors would become community health workers and aid and assist others in ensuring that care was provided.



Community Health Workers (CHW)

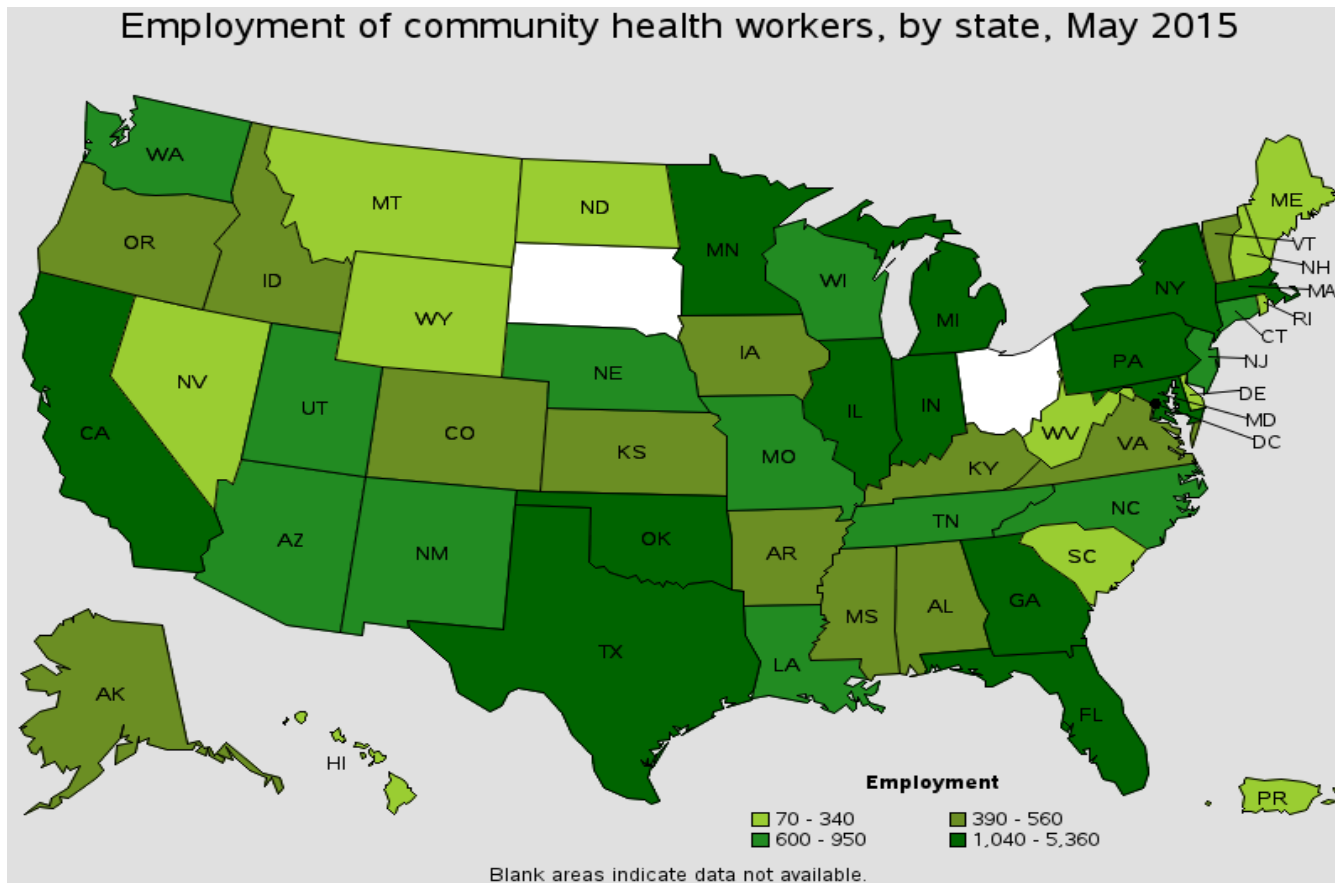
- Community Health Workers (CHWs), are used around the globe to improve health outcomes by reducing barriers to health care.
- In the United States these barriers include a lack of insurance coverage, poor access to services, and unaffordable costs (Alfaro-Trujillo, Valles-Medina, & Vargas-Ojeda, 2012; DeVoe, Baez, Anger, Krois, Edlund, & Carney, 2007).
- Community health workers provide cultural mediation, counseling and support, health education, advocacy, and screening services (Goodwin & Tobler, 2008).

CHWs

Nationally community health workers are seen as advisers, patient navigators, outreach workers, and peer educators.

Community Health Workers in the U.S.

There are about 1200 community health workers in Pennsylvania as of 2015.
(Dept. of Labor) About 45,000 in the U.S.A.



Community Health Worker Research

The project was sponsored by a grant from the Center for Rural Pennsylvania, a legislative agency of the Pennsylvania General Assembly.

The goal of the research is to understand the utilization of community health workers(CHWs) in rural counties in Pennsylvania. Below Pa. Center for CHWs



Community Health Worker Study

This included identifying various types of organizations that use CHWs and how CHWs are utilized in rural counties. Objectives of the research included understanding the growth and labor market for CHW's, various models of using CHW's, and addressing barriers and opportunities.

Sample of the study

Health departments, hospitals, hospices, mental health centers, day cares, faith based organizations (i.e. churches, synagogues and mosques) , and community health centers.

Methodology

Quantitative Research	Qualitative Research	Quantitative analysis	Qualitative Analysis
1. Community Health worker Survey on Survey Monkey 2. Supervisor/Administrator Community Health Worker Survey on Survey Monkey	1. Leadership phone interviews 2. Focus groups.	1. SPSS	1. NVIVO

Preliminary Results of the Study

CHW Survey- 183 Surveys-139-142 could be used.

Demographics

Table 1-Gender, Mean years working, and age of study participants

Male	9.22%	13
Female	90.78%	128
Total		141

Mean number of years worked	9.08
SD	9.07

Mean Current Age	48.21
SD	15.24

Demographics-Table 2 - Continued

African American	2.88%	4
Hispanic	4.32%	6
Non-Hispanic White	89.21%	124
Asian American	.72%	1
Native American	1.44%	2
Pacific Islander	0%	0
Other	1.44%	2
Total		139

Demographics-Paid Employee or Volunteer

Table 3- Paid employee or volunteer

Paid Employee	75.89%	107
Volunteer	24.11%	34
Total		141

Demographics continued

Table 4 Highest Educational Background

No H.S. Degree	.71%	1
H.S./GED	13.57%	19
Some College	20.71%	29
Associates Degree	21.43%	30
Bachelor's Degree	21.43%	30
Some Graduate School	2.86%	4
Master's Degree	17.86%	25
Doctorate Degree	1.43%	2
Total		140

Demographic continued

Table 5 Average Number of Hours Worked per Week

0	14.18%	19
1-5	8.21%	11
6-10	2.99%	4
11-15	2.24%	3
16-20	2.99%	4
21-25	5.97%	8
26-30	6.72%	9
31-35	9.70%	13
36 or more	47.01%	63
Total		134

Opinion Questions

Table 6- Three Opinion Questions

Questions –percentage	SD	D	SD	N	SA	A	SA
Health outcomes have improved as a result of my work	3.52	2.11	1.41	15.49	18.31	38.03	21.13
There are opportunities to increase use of CHWs on team	2.11	7.04	.70	26.35	10.56	38.03	16.2
There is adequate funding for CHWs in my agency	12.95	16.55	9.35	32.37	5.76	17.27	5.76

Supervisor/Administrator Survey

Table 7: Average number of patients or clients supported by CHW.

1-20	27.54	19
21-40	23.19	16
41-60	7.25	5
61-80	5.80	4
81-100	5.80	4
101-120	4.35	3
121or more	26.09	18
Total		69

Supervisor/Administrator Survey

Table 8 Average daily caseload.

1-3	27.14	19
4-6	47.14	33
7-9	4.29	3
10 or more	21.43	15
Total		70

Supervisor/Administrator Survey

Table 9: What skills to be hired.

Advocacy	42.86	30
Bilingualism	4.29	3
Capacity building	15.71	11
Communication skills	87.14	61
Confidentiality	87.14	61
Interpersonal skills	87.14	61
Knowledge base	72.86	51
Organizational skills	57.14	40
Service Coordination	44.29%	31
Teaching	38.57%	27
Other	25.71%	18
Total		70

Focus Group Themes-7 groups

Roles and responsibilities of CHW's

Trusted member of the community

Responsibility to understand the resources

Connect to resources

Passionate about the community

Peer health promotor and peer health educator

Do screenings, blood work, and make referrals.

Holistic response to the community

Empower mental health clients to function

Certify as a person with a mental health issue.

Patient education

Focus Group Themes

Models for effective service delivery for CHW's

Model of certification of CHW

Current model of volunteers and grants.

Improved utilization of services with peer specialist

Coordinate care for those who come home from hospital.

Maintain workers for long enough time.

Focus Group Themes

Health outcomes of population served by CHW

Focus on wellness

Decrease obesity

Mental health seen as joke by community

Decrease in hospitalization for mental health

Increased number of peer specialists.

Focus Group Themes

Education, training and certification issues for CHW's

Lack of training and certification.

Certified as a peer specialist

Peer specialist need to learn to document

Improvement in overall training for peer specialist including documentation.

Need personal experience and also book education.

Payment for learning to be CHW or peer specialist

Certification of unlicensed caregivers as a barrier.

Focus Group Themes

Barriers to effective service delivery for CHW

Funding and support

Only grants to offer support

No effective model for community development

Transportation.

Clients not have concern for health problems.

Communication barriers by phone

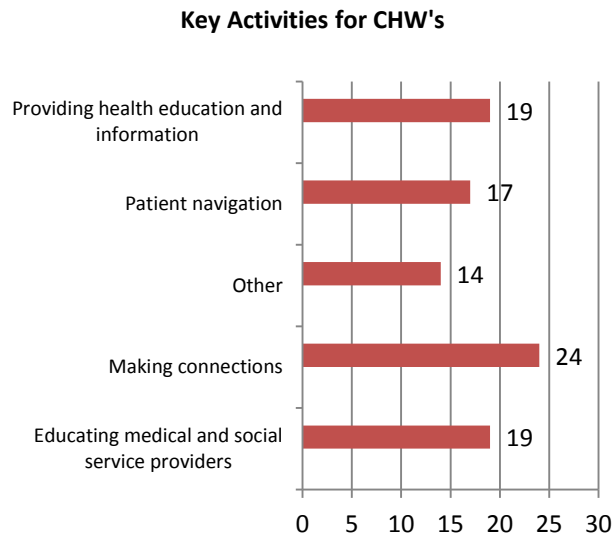
Not see the value of community health worker

Workers work long hours in difficulty conditions.

Low wages of workers.

Leadership Phone interviews N=24

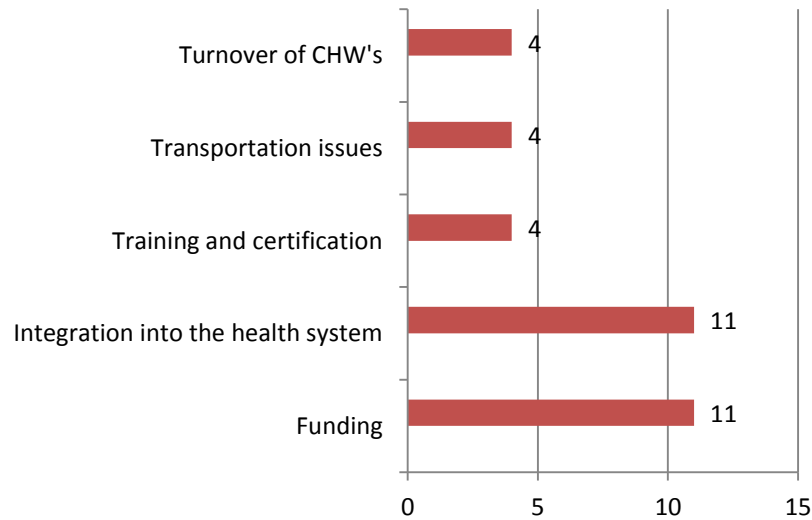
Key activities for CHW



Leadership interview

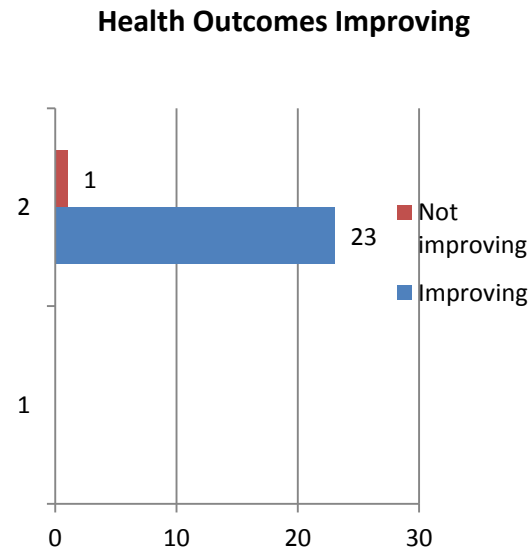
- Barriers to success

Barriers to success of CHW's



Leadership interviews

Health outcomes improving



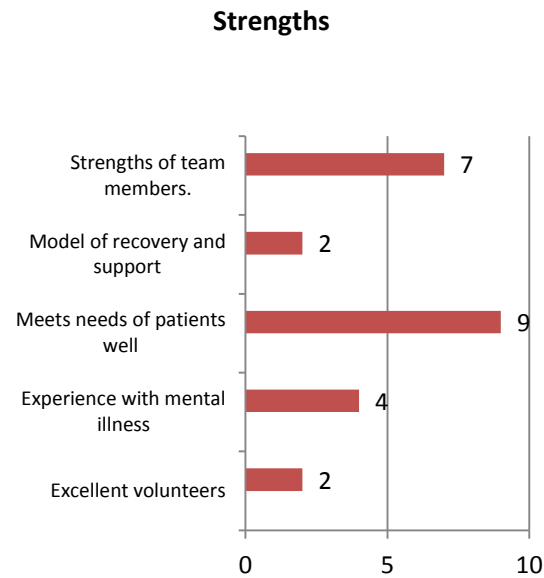
Leadership interview

- Weaknesses



Leadership interviews

- Strengths



References

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Questions

