Community Health Workers: Addressing Environmental Risk Factors for Childhood Cancer



Bridging Community Support and Environmental Awareness

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Community Health Workers (CHWs)

Lay frontline public health workers who connect communities to health care and social service providers

61,300 CHWs nationwide

Members of minority and underserved populations

Work either for pay or as volunteers

Identified by many titles

Role and Responsibility

- Cultural mediation between their communities and health and human service systems
- Informal counseling and social support
- Culturally and linguistically appropriate health education
- Advocating for individual and community needs
- Assisting people get the services they need
- Building individual and community capacity
- Referral and follow-up services

What Is Distinctive About CHWs?

- CHWs are different because they:
 - Do not provide clinical care.
 - Relate to community members as peers rather than purely as clients.
 - Rely on relationships and trust rather than clinical expertise.
 - Experience based on shared culture and life experience with population served.
 - Generally, do not hold another professional license or advanced degrees.

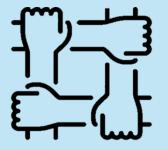
A CHW builds individual and community capacity through:

Outreach

CommunityInformEducationCount

Informal Counseling Social Support

Advocacy











Importance of CHWs

Bridge Between Communities and Healthcare Providers	 Culturally competent care Increased trust in healthcare system
Improving Access to Healthcare	 Especially in underserved and remote areas Reducing healthcare disparities
Health Education and Promotion	 Empowering individuals to make informed health decisions Prevention of diseases through education
Continuity of Care	 Ensuring follow-up on treatments and appointments Improving adherence to medical advice

1. Community-Clinical Linkages

2. Employment Within Health Care

3. Integration with Payers

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Evidence of Their Effectiveness



https://www.astho.org/globalassets/pdf/communityhealth-workers-summary-evidence.pdf

CHW PROGRAM SUCCESSES IN RURAL SETTINGS

Texas Health Educators Provided Asthma and General Health Promotion Education to Elementary School Children in a Rural School District

Improved asthma knowledge, self-management, and self-efficacy for managing symptoms and using metered dose inhalers.

South Dakota Patient Navigator/Community Health Representative Program Aimed to Reduce Cancer Disparities Among American Indians

Individuals with cancer who received services during radiation treatment had an average of three fewer days of treatment interruptions.

Alabama CHWs Delivered Cognitive Behavioral Training Intervention for Rural Patients with Diabetes and Chronic Pain

80% of the program participants completed the training, of whom 95% reported satisfaction.

INTERVENTIONS FOR CHRONIC DISEASE MANAGEMENT

Maryland Study on <u>Effects</u> of Nurse Care Managers and CHWs on Diabetes-Related Health Complications Among African Americans

Patients receiving services from both a CHW and a nurse case manager had the greatest declines in A1C (glycosylated hemoglobin) values, cholesterol triglycerides, and diastolic blood pressure.

Florida CHW-Led Educational Program and Service Coordination to <u>Address</u> Diabetes and Cardiovascular Disease

The project saw successes in motivating participants to take steps to delay or prevent diabetes and/or cardiovascular disease, and increased patients' reported desire to take better care of their health.

RANDOMIZED CONTROL TRIALS (RCTs):

Patient-Centered CHW Intervention to Improve Posthospital Outcomes (RCT Study) Through the Development of Individualized Action Plans for Recovery and Tailored Support

Increased likelihood of obtaining primary care, increased mental health improvements, and reduced likelihood of multiple 30-day readmissions from 40% to 15.2%.

<u>CHW Support</u> for Disadvantaged (High-Poverty and Publicly Insured Patients) with Multiple Chronic Diseases (RCT Study)

Improvements in mental health, increased support for disease self-management (63% compared to 38% control group), lower hospitalization (16% compared to 17.8% after six months, 23% compared to 32% after one year.)

SYSTEMATIC REVIEWS ON CHW INTERVENTIONS

<u>Effects</u> of CHW Interventions to Improve Chronic Disease Management and Care Among Vulnerable Populations

Interventions by CHWs appear more effective when compared with alternatives and are cost-effective for certain health conditions, particularly among underserved communities.

<u>CHW Interventions</u> to Improve Glycemic Control in People with Diabetes: Findings from 13 Randomized Controlled Trials (RCTs)

CHW interventions showed a modest reduction in hemoglobin compared to usual care.

Mental Health Interventions with CHWs: Findings From Nine Studies in the United States

CHW-supported interventions show promise, particularly given evidence of feasibility and acceptability with underserved populations.

Evidence of Their Effectiveness



https://www.astho.org/globalassets/pdf/communityhealth-workers-summary-evidence.pdf

RETURN ON INVESTMENT (ROI) STUDIES ON CHW INTERVENTIONS

<u>Nevada</u> CHW ROI Study: Health Plan Hired Three CHWs to Work With an Average of 37 Patients Each for 30-60 Days

Average medical costs decreased from \$1,223 pre-intervention to \$983 post-intervention.

Maryland CHW Outreach Program on Healthcare Utilization

Patients saw savings of \$2,245 per year with a total saving of \$262,080 across 117 patients per year.

Kentucky Homeplace Program ROI Study Rural Health Information Hub

The ROI was \$11.20 saved for every \$1 spent on CHW training.

New Mexico: 448 High-Resource-Consuming Medicaid Managed Care Clients Received Support From CHWs for Six Months

Total cost differential across categories of services provided was \$2,044,465 less post-intervention compared to pre-intervention.

Social ROI Research Report on CHWs in Cancer Outreach and Education Across the United States

CHWs generated lifetime benefits of \$12,348 per person served by a CHW, or \$851,410 by every CHW that serves at least 69 individuals per year.

East Texas ROI From Employment of CHWs in Two Hospitals Working with Emergency Department Patients

There was an ROI ranging from 3:1 to over 15:1.

Denver Health Community Voices Program Piloted a CHW Outreach Program for 590 Men

The ROI was \$2.28 for every \$1 spent with a total annual savings of \$95,941.

CMMI Health Care Innovation Awards (HCIA) Meta-Analysis and Evaluators Collaborative

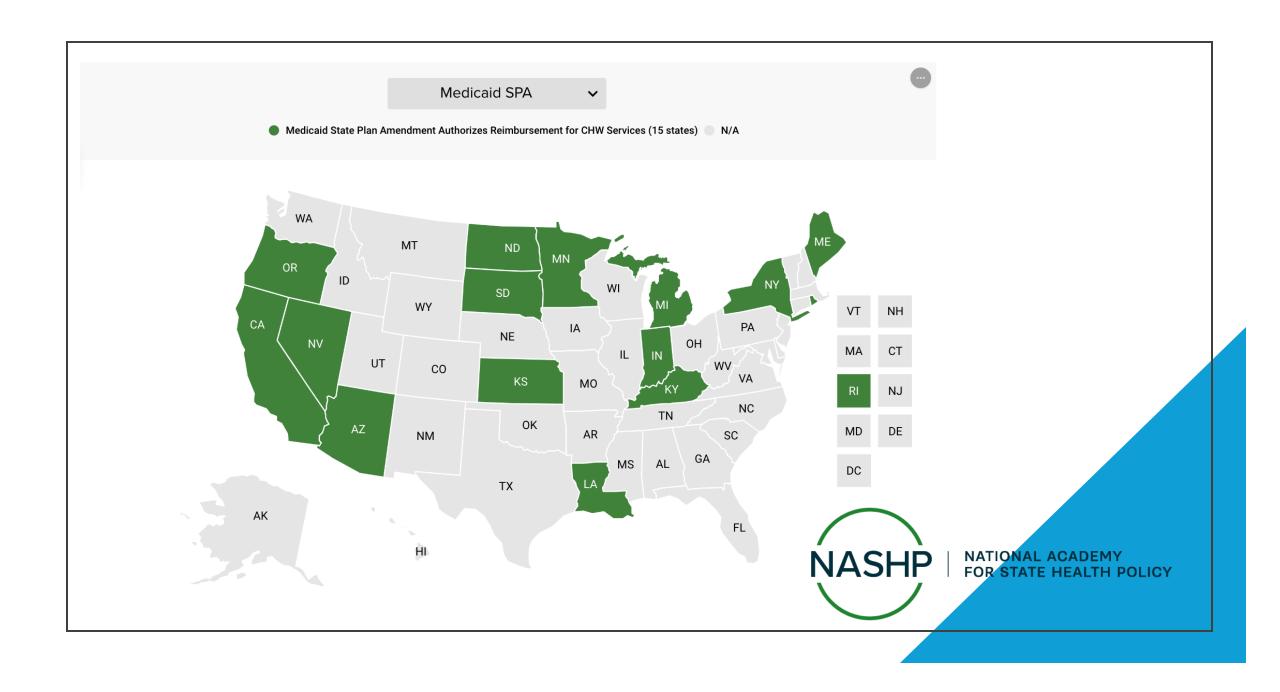
An investigation of over a hundred innovative care delivery models revealed that only those using CHWs lowered cost (\$138 per beneficiary per quarter).

Challenges

Training and Education: Standardizing training programs and ensuring ongoing education.

Integration into Healthcare Systems: Collaborating with healthcare providers and being recognized as valuable members of the healthcare team.

Sustainability: Securing funding and community support for CHW programs.



Children Living in a Colonia in Hidalgo, Texas

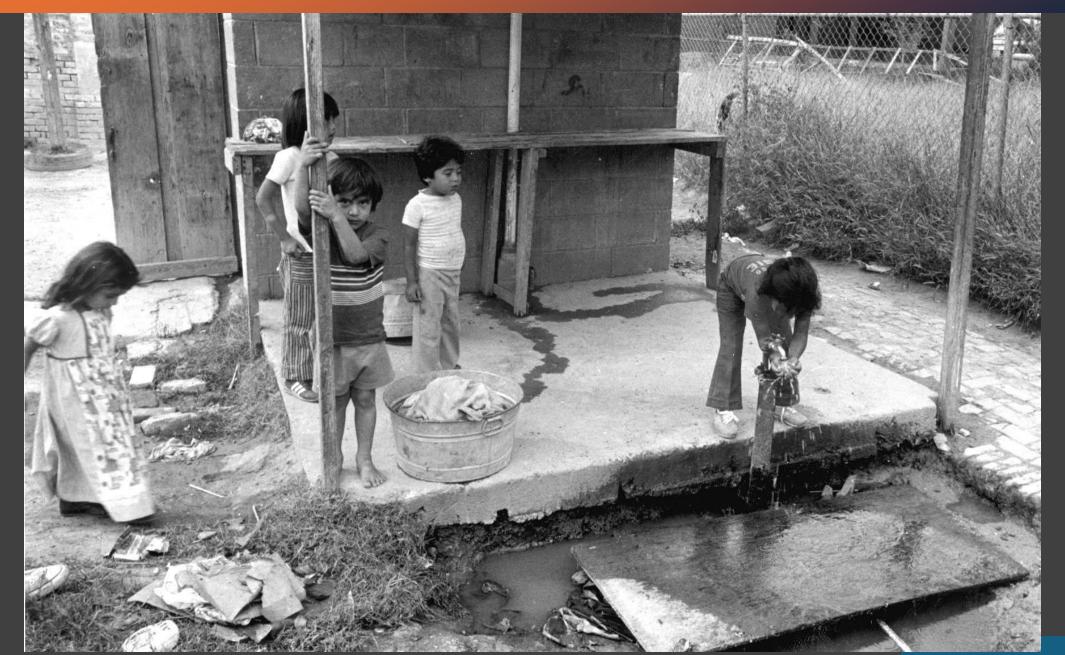


Image Credit: Alan Pogue, 2000



PEHSU Incorporating Promotoras into Community Outreach

Get the facts about reducing risk of childhood cancer





Childhood Cancer & the Environment

A project to raise awareness of environmental influences on childhood cancer

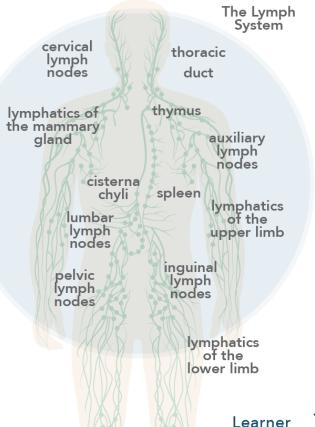


What is Cancer?

The word "cancer" is used to describe a group of diseases in which abnormal cells reproduce without control, invade nearby tissues, and spread to other parts of the body through the blood circulation and the lymph systems. The lymph system is part of the immune system and looks similar to the circulatory system. It collects waste products, bacteria, and damaged cells so that they can be destroyed or removed from the body.

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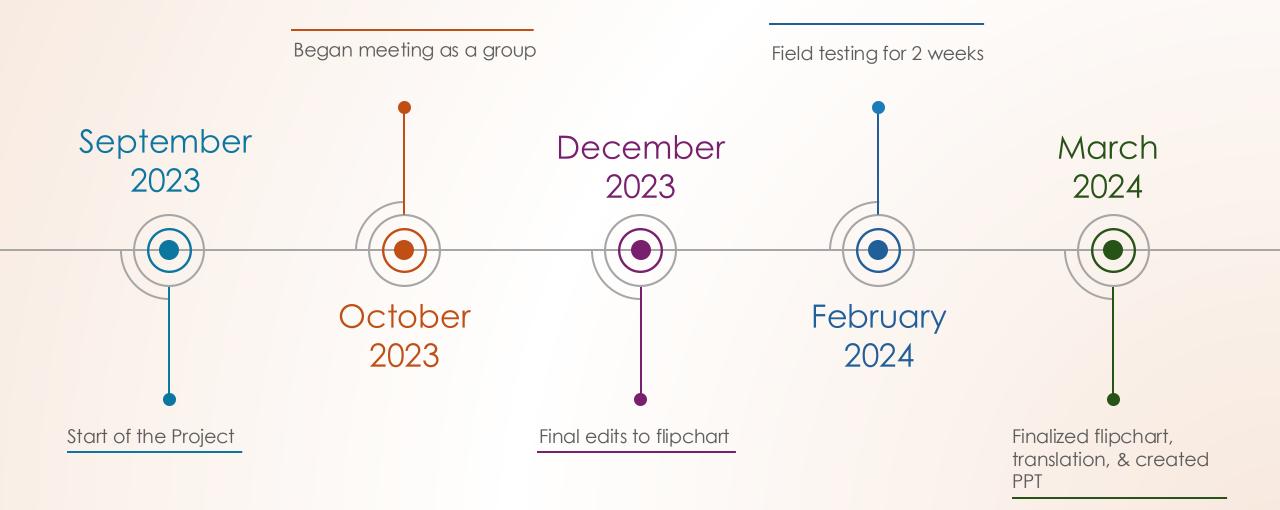


PEDIATRIC ENVIRONMENTAL HEALTH SPECIALTY UNITS

Educator

CHILDHOOD CANCER AND THE ENVIRONMENT

POCES CHW PROJECT TIMELINE



POCES CHW PROJECT TIMELINE



· 548 community members! ·

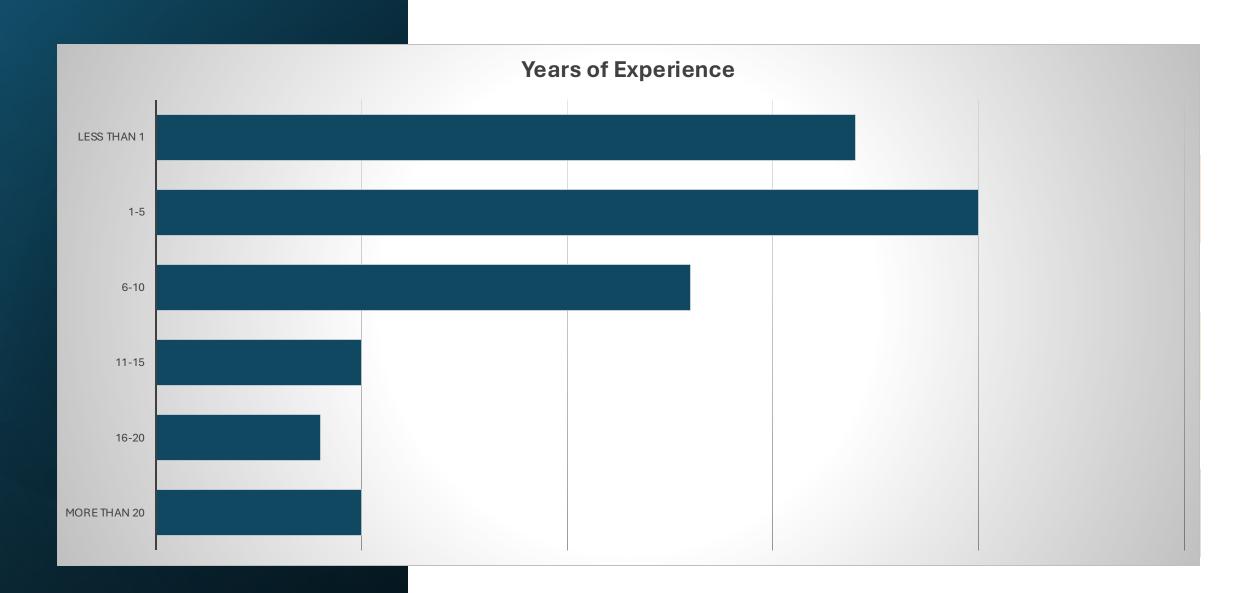
Showcasing the Power of CHWs

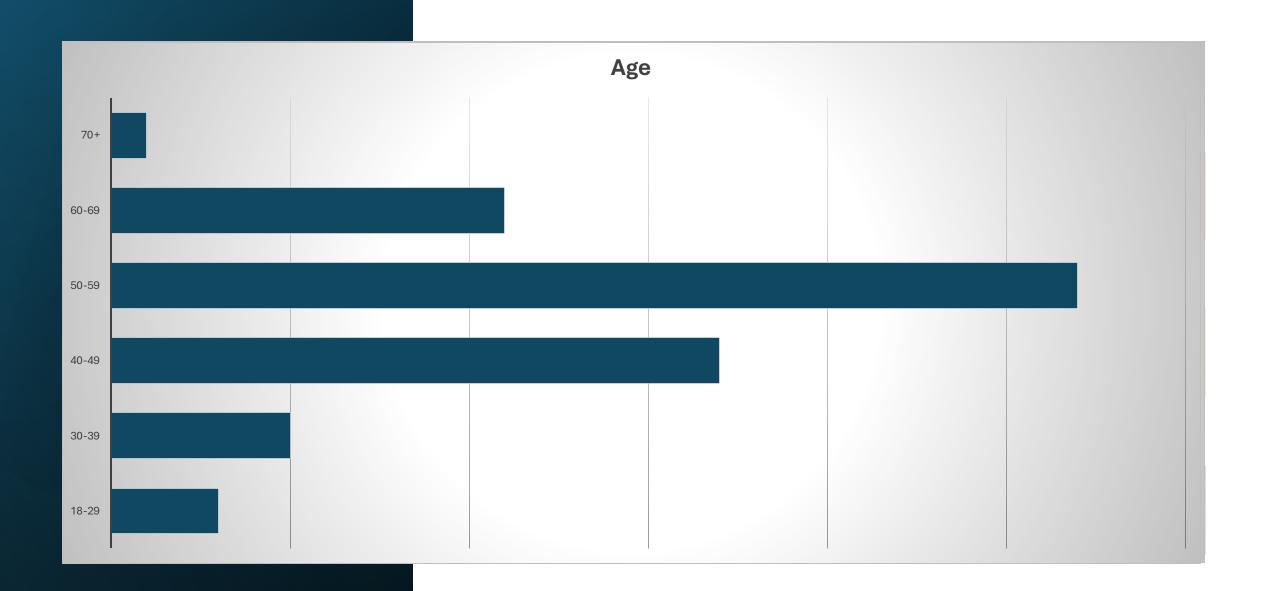
POCES CHW Training Data

89% Female

98% Hispanic

88% Spanish- speaking





71% had not been educated on childhood cancer and the environment

POCES CHW Training Data



"Magic Key"



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The Six Pillars of Community Health Workers



The workforce we need for the world that we want!