



# CHW ROLES

Michigan Community Health Worker Alliance (MiCHWA)

## SEVEN COMMUNITY HEALTH WORKER ROLES<sup>1</sup> SUPPORTED BY MICHWA

|   | Role                                  | Description and Related Tasks  |
|---|---------------------------------------|--|
| 1 | Case Management and Care Coordination | <ul style="list-style-type: none"> <li>• Family engagement • Assessing individual strengths and needs</li> <li>• Addressing basic needs • Promoting health literacy • Coaching on problem solving • Developing goals and action plans</li> <li>• Coordinating referrals and follow-ups • Providing feedback to medical providers</li> </ul>                |
| 2 | Community-Cultural Liaison            | <ul style="list-style-type: none"> <li>• Community organizing • Advocacy • Translation and interpretation of information • Assessing community strengths and needs</li> </ul>  |
| 3 | Health Promotion and Health Coaching  | <ul style="list-style-type: none"> <li>• Translating and interpreting health information</li> <li>• Teaching health promotion and prevention behaviors</li> <li>• Coaching on problem solving • Modeling behavior change</li> <li>• Promoting health literacy • Reducing harm</li> <li>• Promoting treatment adherence • Leading support groups</li> </ul> |
| 4 | Home-Based Support                    | <ul style="list-style-type: none"> <li>• Engaging family members in care • Home visiting and assessment</li> <li>• Promoting health literacy • Supportive counseling • Coaching on problem solving • Implementing care action plans • Promoting treatment adherence</li> </ul>   |
| 5 | Outreach and Community Mobilization   | <ul style="list-style-type: none"> <li>• Preparation and dissemination of materials • Case-finding and recruitment • Community strengthening/needs assessment • Home visiting • Promoting health literacy • Advocacy</li> </ul>  |
| 6 | Participatory Research                | <ul style="list-style-type: none"> <li>• Preparation and dissemination of materials • Engaging participatory research partners • Facilitating translational research</li> <li>• Computerized data entry and web searches</li> </ul>  |
| 7 | System Navigation                     | <ul style="list-style-type: none"> <li>• Translating and interpreting health information • Promoting health literacy • Patient navigation • Addressing basic needs like food and shelter • Coaching on problem solving • Coordinating referrals and follow ups</li> </ul>  |

## DEFINITIONS

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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.

*American Public Health Association Community Health Workers Section, 2009*

In Michigan, Community Health Workers go by many titles including, but not limited to, promotore(a) de salud, peer support specialist, recovery coach, community-based doula, outreach specialist, community neighborhood navigator, family health advocate, maternal child outreach worker, peer navigator, and community advocate.

## BACKGROUND: MICHWA

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## REFERENCES

1. Matos S, Findley S, Hicks A, Legendre Y, Do Canto L. Paving a path to advance the community health worker workforce in New York State: a new summary report and recommendations. CHW Network of New York City. 2011.



## OUR PARTNERS

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# CHW ROLES

## Case Management & Care Coordination

### ISSUE

Community Health Workers\* (CHWs) are an integral part of health and human service delivery in Michigan. As frontline public health workers, CHWs contribute to the health and human service delivery in a variety of ways but need to be recognized and utilized for their role in **case management and care coordination**.

### BACKGROUND

CHWs provide **case management and care coordination** by being a usual source of contact between care providers and individuals.<sup>1</sup> Tasks related to case management and care coordination include: family engagement, assessing individual strengths and needs, addressing basic needs, promoting health literacy, coaching on problem solving, developing goals and action plans, coordinating referrals and follow-ups, and providing feedback to medical providers.<sup>2</sup> CHWs effectively provide these services to underserved populations through the trusting relationships they form with patients from communities in which they have shared experience.

The inclusion of CHWs in case management and care coordination effectively improves the control and management of chronic conditions, including asthma, hypertension, diabetes, cancer, and HIV/AIDS.<sup>3</sup>

### EVIDENCE AND OUTCOMES

#### What did the CHW do?

Provided pregnant women with health education, service navigation, and social support.

#### Why did it matter?

Women in CHW group reported improved self-confidence (double that of non-CHW group), assistance with prenatal appointments, and transportation.<sup>4</sup>

Led individual and group sessions about prenatal and postnatal care, provided referrals for mothers and children in migrant camps.

Increase in number of newborns that were breast-fed; increase in children under five with current immunizations.<sup>5</sup>

Visited homes of children with asthma; educated families about asthma and environmental triggers; created action plan to reduce environmental triggers.

Statistically significant increase in lung function, less frequent asthma symptoms, and fewer unscheduled health visits for children with CHW visits.<sup>6</sup>

### RECOMMENDATIONS

MiCHWA supports CHWs and their role in **case management and care coordination**.

**Community Health Workers should be included as part of care-based teams to provide **case management and care coordination** to vulnerable or at-risk community members to impact social determinants of health and improve outcomes.**

#### CASE MANAGEMENT AND CARE COORDINATION

Community-Cultural Liaison | Health Promotion and Health Coaching  
Home-Based Support | Outreach and Community Mobilization  
Participatory Research | System Navigation

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4. Roman LA, Raffo JE, Meghea CI. Maternal perceptions of help from home visits by nurse-community health worker teams. *Am J Public Health.* 2012;102:643-645.
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# CHW ROLES

## Community-Cultural Liaison

### ISSUE

Community Health Workers\* (CHWs) are an integral part of health and human service delivery in Michigan. As frontline public health workers, CHWs contribute to the health and human service delivery in a variety of ways but need to be recognized and utilized for their contribution as a **community-cultural liaison**.

### BACKGROUND

CHWs provide a bridge between systems of care and vulnerable or disadvantaged communities by educating health care professionals about the community's health needs and enhancing the cultural competency of health interventions.<sup>1</sup> Tasks related to **community-cultural liaison** include: assessing community strengths and needs, community organizing, advocacy, and translation and interpretation of information.<sup>2</sup> CHWs effectively provide these services to underserved populations through the trusting relationships they form with patients from communities in which they have shared connections.

The inclusion of CHWs as community-cultural liaisons effectively improves the control and management of chronic conditions, including asthma, hypertension, diabetes, cancer, and HIV/AIDs.<sup>3</sup>

### EVIDENCE AND OUTCOMES

#### What did the CHW do?

Participated in community organizing, worked with police to improve neighborhood safety, and conducted workshops on micro-enterprises.

Participated in advocacy and community organizing courses.

Participated in community organizing and advocacy.

Collaborated with university researchers to deliver media education campaign to increase cervical cancer awareness, knowledge, and screening.

#### Why did it matter?

CHWs were able to establish social support networks to address specific community stressors.<sup>4</sup>

Training courses enhanced CHW skills and knowledge on health promotion and helped CHWs address social and structural determinants of health.<sup>5</sup>

Demonstrated that CHWs who have more flexible work hours and autonomy were more likely to participate in community advocacy.<sup>6</sup>

CHWs used social network, cultural knowledge, and cultural sensitivity to reach underseved populations. Allowed researchers to expand overall capacity to address health issues.<sup>7</sup>

### RECOMMENDATIONS

MiCHWA supports CHWs and their role as a **community-cultural liaison**.

**Community Health Workers should be included as part of care-based teams to work as a **community-cultural liaison** for vulnerable or at-risk community members to impact social determinants of health and improve outcomes.**

Case Management and Care Coordination

**COMMUNITY-CULTURAL LIAISON** | Health Promotion and Health Coaching

Home-Based Support | Outreach and Community Mobilization

Participatory Research | System Navigation

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# CHW ROLES

## Health Promotion & Health Coaching

### ISSUE

Community Health Workers\* (CHWs) are an integral part of health and human service delivery in Michigan. As frontline public health workers, CHWs contribute to the health and human service delivery in a variety of ways but need to be recognized and utilized for their role in [health promotion and health coaching](#).

### BACKGROUND

Health promotion and health coaching helps patients gain the knowledge, skills, tools, and confidence to become active participants in their care in order to reach their self-identified health goals. Tasks related to [health promotion and health coaching](#) include: translating and interpreting health information, teaching health promotion and prevention behaviors, coaching on problem solving, modeling behavior change, promoting health literacy, reducing harm, promoting treatment adherence, and leading support groups.<sup>1</sup> CHWs effectively provide these services to underserved populations through the trusting relationships they form with patients from communities in which they have shared experience.

The inclusion of CHWs in health promotion and health coaching on multidisciplinary teams effectively improves the control and management of chronic conditions, including asthma, hypertension, diabetes, cancer, and HIV/AIDs.<sup>2</sup>

### EVIDENCE AND OUTCOMES

| What did the CHW do?  | Why did it matter?   |
|---|--|
| Spanish-speaking CHWs provided health education and coaching to pregnant Latinas.   | Participants experienced a significant decline in depressive symptoms. Program decreased consumption of added sugar by 22% and increased vegetable servings by 26%. <sup>3,4</sup> |
| Offered education for healthy lifestyle behaviors and diabetes self-management twice per month.   | Participants had a significant decrease in HbA1c levels (0.8 points), improved adherence to blood glucose testing, and improved LDL cholesterol levels. <sup>5</sup>               |
| Provided in-home support to Medicaid-insured pregnant women and their infants; promoted health behaviors, stress management, and assisted in developing personal goals. | Participants had fewer depressive symptoms, less stress, and more in-person prenatal care. <sup>6,7</sup>  |
| Offered breast cancer screening and prevention education during home visits.  | Participants increase health literacy scores and knowledge of breast cancer screening. <sup>8,9,10,11</sup>  |

### RECOMMENDATIONS

MiCHWA supports CHWs and their role in [health promotion and health coaching](#).

**Community Health Workers should be included as part of care-based teams to work as a [health promoter or health coach](#) for vulnerable or at-risk community members to impact social determinants of health and improve outcomes.**

Case Management and Care Coordination  
 Community-Cultural Liaison | **HEALTH PROMOTION AND HEALTH COACHING**  
 Home-Based Support | Outreach and Community Mobilization  
 Participatory Research | System Navigation

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3. Kieffer EC, Welmerink DB, Sinco BR, et al. Dietary outcomes in a Spanish-language randomized controlled diabetes prevention trial with pregnant Latinas. *Am J Pub Health.* 2013; e1-e8.
4. Kieffer EC, Caldwell CH, Welmerink DB, Welch KB, Sinco BR, Guzmán JR. Effect of the Health MOMs Lifestyle intervention on reducing depressive symptoms among pregnant Latinas. *Am J Community Psychol.* 2013;51:76-89.
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## Home-Based Support

### ISSUE

Community Health Workers\* (CHWs) are an integral part of health and human service delivery in Michigan. As frontline public health workers, CHWs contribute to the health and human service delivery in a variety of ways but need to be recognized and utilized for their role in **home-based support**.

### BACKGROUND

**Home-based support** services provide opportunities for individuals to receive care in their home or community. Types of home-based support services include: engaging family members in care, home-visiting and assessment, promoting health literacy, supportive counseling, coaching on problem solving, implementing care action plans, and promoting treatment adherence.<sup>1</sup> CHWs effectively provide these services to underserved populations through the trusting relationships they form with patients from communities in which they are intimately familiar. This connection is vital when working in client homes in the community.

CHWs provide home-based care that complements care provided by providers in clinical settings. Health issues addressed through home-based support include: cancer education and prevention, depression, obesity, type 2 diabetes and hypertension management, asthma management, and maternal and child health support.

### EVIDENCE AND OUTCOMES

| What did the CHW do?  | Why did it matter?   |
|---|--|
| Offered breast cancer screening and prevention education during home visits.  | Participants increased health literacy scores and knowledge of breast cancer screening. <sup>2,3,4,5</sup>   |
| Spanish-speaking CHWs provided health education and coaching to pregnant Latinas in the home.   | Participants experienced a significant decline in depressive symptoms. Program improved dietary behaviors during pregnancy. <sup>6,7</sup>               |
| Provided in-home support to Medicaid-insured pregnant women and their infants. Promoted health behaviors, stress management, and assisted in developing personal goals. | Participants had fewer depressive symptoms, less stress, and more in-person prenatal care. <sup>8,9</sup>  |
| Offered in-home education for healthy lifestyle behaviors and diabetes self-management twice per month.   | Participants had a significant decrease in HbA1c levels, improved adherence to blood glucose testing, and improved LDL cholesterol levels. <sup>10</sup> |

### RECOMMENDATIONS

MiCHWA supports CHWs and their role in **home-based support**.

**Community Health Workers should be included as part of care-based teams to provide **home-based support** for vulnerable or at-risk community members to impact social determinants of health and improve outcomes.**

Case Management and Care Coordination  
Community-Cultural Liaison | Health Promotion and Health Coaching  
**HOME-BASED SUPPORT** | Outreach and Community Mobilization  
Participatory Research | System Navigation

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# CHW ROLES

## Outreach & Community Mobilization

### ISSUE

Community Health Workers\* (CHWs) are an integral part of health and human service delivery in Michigan. As frontline public health workers, CHWs contribute to the health and human service delivery in a variety of ways but need to be recognized and utilized for their contribution of **outreach and community mobilization**.

### BACKGROUND

CHWs conduct **outreach and community mobilization** in underserved and vulnerable communities.<sup>1</sup> Tasks related to outreach and community mobilization include: preparation and dissemination of materials, case-finding and recruitment, community strengthening/needs assessment, home visiting, promoting health literacy, and advocacy.<sup>2</sup> CHWs effectively provide these services to underserved populations through the trusting relationships they form with patients from communities in which they have shared experience.

### EVIDENCE AND OUTCOMES

#### What did the CHW do?

Participated in a comprehensive capacity-building program to better assist in advocacy efforts.

Participated in community organizing to improve availability of healthy foods and exercise groups.

Promoted health and access to care for underserved neighborhoods.

Trained in advocacy and community organizing.

#### Why did it matter?

Program enhanced CHW knowledge of advocacy. Demonstrated importance of partnering with CHWs in development of new training programs.<sup>3</sup>

New healthy foods and exercise classes available within community. Reduced stress for community members.<sup>4</sup>

Increased awareness of community resources, dental care, and blood pressure screening. Decreased inappropriate emergency room use.<sup>5</sup>

Program demonstrated that CHWs are effective in outreach and community mobilization when trained in health promotion and health disparities.<sup>6</sup>

### RECOMMENDATIONS

MiCHWA supports CHWs and their role in **outreach and community mobilization**.

**Community Health Workers should be included as part of care-based teams to conduct outreach and community mobilization to vulnerable or at-risk community members to impact social determinants of health and improve outcomes.**

Case Management and Care Coordination  
Community-Cultural Liaison | Health Promotion and Health Coaching  
Home-Based Support | **OUTREACH AND COMMUNITY MOBILIZATION**  
Participatory Research | System Navigation

## DEFINITIONS

\*Community Health Worker is a term that encompasses a health professional as defined by the American Public Health Association:

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.

*American Public Health Association Community Health Workers Section, 2009*

In Michigan, Community Health Workers go by many titles including, but not limited to, promotore(a) de salud, peer support specialist, recovery coach, community-based doula, outreach specialist, community neighborhood navigator, family health advocate, maternal child outreach worker, peer navigator, and community advocate.

## BACKGROUND: MICHWA

The Michigan Community Health Worker Alliance (MiCHWA) is a statewide coalition that unites CHWs and stakeholders from health systems, health plans, community organizations, federally qualified health centers, academic research units, CHW programs, workforce development organizations, community colleges, and local health coalitions. MiCHWA targets systems-level issues that restrict CHW programs from thriving and impacting Michigan's communities most in need. These barriers include a lack of defined educational standards, a limited understanding of the CHW role among health and human service systems, and a lack of financial reimbursement for CHW contributions to patient health. MiCHWA's mission is: To promote and sustain the integration of Community Health Workers into Michigan's health and human service systems through coordinated changes in policy and workforce development.

## REFERENCES

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# CHW ROLES

## Participatory Research

### ISSUE

Community Health Workers\* (CHWs) are an integral part of health and human service delivery in Michigan. As frontline public health workers, CHWs contribute to the health and human service delivery in a variety of ways but need to be recognized and utilized for their contribution to **participatory research**.

### BACKGROUND

CHWs play a unique role as members of **participatory research** teams.<sup>1</sup> Tasks related to participatory research include: preparation and dissemination of materials, engaging participatory research partners, facilitating translational research, and computerized data entry and web searches.<sup>2</sup> CHWs effectively provide these services to underserved populations through the trusting relationships they form with patients from communities in which they have shared experience.

The inclusion of CHWs on participatory research teams effectively improves the management of data, data collection, and research efficacy.

### EVIDENCE AND OUTCOMES

#### What did the CHW do?

Administered questionnaires, described project at community gatherings, delivered group education intervention, followed-up for 10-year colorectal cancer screening project.

Collaborated with university researchers to deliver media education campaign to increase cervical cancer awareness, knowledge, and screening.

Assisted with randomized community intervention for hypertension control; conducted community forums, developed community plan with other CHWs, led focus groups, implemented survey, and intervention.

#### Why did it matter?

CHWs played central roles in delivery of program, delivery of training modules, implementing protocols, and sustainability planning.<sup>3</sup>

CHWs used social network, cultural knowledge, and cultural sensitivity to reach underseved populations. Allowed researchers to expand overall capacity to address health issues.<sup>4</sup>

CHWs are effective in assisting with randomized community interventions and should be included at all stages of research.<sup>5</sup>

### RECOMMENDATIONS

MiCHWA supports CHWs and their role in **participatory research**.

**Community Health Workers should be included as part of care-based teams to work in **participatory research** for vulnerable or at-risk community members to impact social determinants of health and improve outcomes.**

Case Management and Care Coordination  
 Community-Cultural Liaison | Health Promotion and Health Coaching  
 Home-Based Support | Outreach and Community Mobilization  
**PARTICIPATORY RESEARCH** | System Navigation

## DEFINITIONS

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# CHW ROLES

## System Navigation

### ISSUE

Community Health Workers\* (CHWs) are an integral part of health and human service delivery in Michigan. As frontline public health workers, CHWs contribute to the health and human service delivery in a variety of ways but need to be recognized and utilized for their role in [system navigation](#).

### BACKGROUND

CHWs play a unique role as culturally competent mediators between systems of care and underserved and vulnerable communities to improve care and treatment adherence related to [system navigation](#).<sup>1</sup> Tasks related to system navigation include: translating and interpreting health information, promoting health literacy, patient navigation, addressing basic needs like food and shelter, coaching on problem solving, and coordinating referrals and follow-ups.<sup>2</sup> CHWs effectively provide these services to underserved populations through the trusting relationships they form with patients from communities in which they have shared experience.

### EVIDENCE AND OUTCOMES

#### What did the CHW do?

Provided pregnant women with health education, service navigation, and social support.

Provided referrals for education, mental health, substance abuse, maternal and child health services, and breast cancer screening and prevention.

Offered motivational interviewing, HIV education, and created a change plan.

Held small “house parties” where CHWs promoted screening for high blood pressure and glucose testing. Attendees received referrals to appropriate agencies.

#### Why did it matter?

Women in CHW group reported increase in self-confidence (double that of non-CHW group), assistance with prenatal appointments, and transportation.<sup>3</sup>

Led to increase in knowledge about stress and depression, increase in appropriate prenatal care when needed.<sup>4</sup>

Led to increase in HIV testing and counseling.<sup>5</sup>

Over 1,000 individuals were screened. Demonstrated effectiveness in reaching women at high risk for hypertension and diabetes.<sup>6</sup>

### RECOMMENDATIONS

MiCHWA supports CHWs and their role in [system navigation](#).

**Community Health Workers should be included as part of care-based teams to provide [system navigation](#) to vulnerable or at-risk community members to impact social determinants of health and improve outcomes.**

Case Management and Care Coordination  
Community-Cultural Liaison | Health Promotion and Health Coaching  
Home-Based Support | Outreach and Community Mobilization  
Participatory Research | **SYSTEM NAVIGATION**

## DEFINITIONS

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