

# COMMUNITY HEALTH WORKERS: A RESOURCE FOR HEALTHY AGING AND ADDRESSING DEMENTIA

Community health workers (CHWs) are both a partner of and a resource within many state and local health departments on the frontline serving communities. As they work with community members, CHWs can promote healthy aging and help address some of the challenges related to Alzheimer's and all dementia. The National Prevention Strategy describes healthy aging as “[p]romoting health, preventing injury, and managing chronic conditions; optimizing physical, cognitive, and mental health; and facilitating social engagement.”<sup>1</sup>

This resource guide provides an easy way for health departments to learn about available CHW-related training, education, frameworks, and tools that can help them build CHW capacity to address the needs of older adults and challenges of dementia. Users will also find examples of state health department initiatives to train and support CHWs as they educate their communities about healthy aging and cognitive health, provide supportive services, encourage early detection of cognitive impairment and dementia, and help caregivers for people living with dementia access available support.

The resource guide is organized into the following sections:

- Training and Continuing Education about Healthy Aging for CHWs
- Training for CHWs Regarding Alzheimer's
- Foundational Resources for and about CHWs

## Who Is a Community Health Worker?

The American Public Health Association defines a community health worker as “a trusted member of and/or [someone who] has an unusually close understanding of the community served. This trusting relationship enables the worker 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.”<sup>2</sup>

- Sample Patient Navigation Pipeline that Can Integrate CHWs
- Sample CHW-Led Interventions with a Demonstrated Impact on Healthy Aging in Place

Case studies throughout the document feature ways that state health departments have engaged CHWs in promoting healthy aging and implementing the [Healthy Brain Initiative State and Local Public Health Partnerships to Address Dementia: The 2018-2023 Road Map](#).

## TRAINING AND CONTINUING EDUCATION ABOUT HEALTHY AGING FOR CHWs

The following resources include trainings to prepare CHWs to promote healthy aging overall and/or have specific strategies to reduce risk of injury, chronic disease, and social isolation among older adults.

Organization	Description	Healthy Aging	Content on Risk Reduction
<a href="#">National CHW Training Center</a>	<p>Offers continuing education units (CEUs) in English and Spanish through the Texas Department of State Health Services.</p> <p>Trainings related to possible dementia risk factors: tobacco cessation, healthy community food systems, and diabetes, obesity, and nutrition and exercise. Also offers support courses about fall prevention.</p> <p>The center is also <a href="#">piloting</a> a curriculum on fall prevention training for CHWs/promotores de salud (promotoras for short) in English and Spanish. The curriculum covers fall prevention plans, health behavior change strategies, and communication skills around fall prevention.</p>	Yes	Yes
<a href="#">Rural Health Information Hub</a>	<p>Topics covered: cultural competence, patient intake and assessment, protocol delivery, screening recommendations, risk factors, insurance eligibility and enrollment, communication skills, health promotion, disease prevention and management, and programmatic data collection and evaluation.</p>	Yes	Yes
<a href="#">CDC CHW Training Resources</a>	<p>Curriculum from the Centers for Disease Control and Prevention (CDC) Division for Heart Disease and Stroke Prevention to increase skills in preventing heart disease and stroke.</p>	No	Yes
<a href="#">MHP Salud</a>	<p>Organization-level training using the L.E.A.D. (Listen, Empower, Advance, Deliver) curriculum. Offered in English or Spanish and at three tiers of skill level.</p>	Yes	No

## TRAINING FOR CHWs REGARDING ALZHEIMER'S

A partnership between the Alzheimer's Association and National Hispanic Council on Aging provides another option to prepare CHWs for addressing Alzheimer's and dementia. In Hispanic and Latino communities, promotores are trusted peers who provide health education and outreach services. Alzheimer's Association chapters have used the outreach materials and training developed with the National Hispanic Council on Aging to partner with promotores. During the training, promotores learned about Alzheimer's and dementia, the impact of Alzheimer's disease in the U.S. and among Latino communities, and ways to assist someone living with Alzheimer's and their care partners. Participating promotores received a guide with a list of community services and educational resources that they can use as they work with individuals, caregivers and families. Some promotores opted to take additional steps to serve as an Alzheimer's Association volunteer who conducts formal community educational programs. To learn more about promotores engagement and explore partnerships, contact your [local Alzheimer's Association chapter](#).

## ENGAGING CHWs TO IMPLEMENT THE HBI STATE AND LOCAL PUBLIC HEALTH ROAD MAP

*The Healthy Brain Initiative State and Local Public Health Partnerships to Address Dementia: The 2018–2023 Road Map* provides expert-guided actions for public health leaders to promote cognitive health, better care for people living with dementia, and improve support for dementia caregiving. The case studies in this CHW resource guide offer overviews of how state health departments are developing the capacity of CHWs to respond to the growing challenges of dementia. To learn how to access training curricula, please contact [Molly French](#) at the Alzheimer's Association.



### EDUCATING SPANISH-SPEAKING POPULATIONS WITH A FOTONOVELA

*Oregon Department of Human Services & Alzheimer's Association Oregon Chapter*

The Oregon Department of Human Services and Alzheimer's Association Oregon Chapter worked together to increase early detection and diagnosis of Alzheimer's disease among Spanish-speaking populations, and connect people to resources available through the Alzheimer's Association and Oregon's Aging and Disability Resource Connection (ADRC). They received permission to reprint a fotonovela developed by Stanford University School of Medicine, [¡Unidos Podemos! Enfrentando la pérdida de memoria en familia](#), to function as a culturally appropriate outreach tool in a format that would appeal to Spanish-speaking cultures. The reprinted fotonovela also included contact information for the Alzheimer's Association and Oregon's ADRC, and printing was made possible with a Dementia Capable Systems grant from the Administration for Community Living.

The fotonovela tells the story of the Jiménez family whose lives are affected by Alzheimer's disease when their matriarch is diagnosed. The graphic novel emphasized the importance of early detection and demonstrated how an extended family could help care for a loved one with Alzheimer's disease through the fotonovela's photos and dialogue.

The use of fotonovelas as educational tools is highly effective among Spanish-speaking communities. Older adults in Hispanic or Latinx communities are 1.5 times more likely to have Alzheimer's and other



dementias than older adults in white communities. The Oregon Department of Human Services consulted promotoras when developing the fotonovela to assure it was tailored in a culturally appropriate and accepted manner. Copies of the fotonovela were distributed through *El Centinela*, a Catholic Spanish-language newspaper in Oregon, as well as through the promotoras and CHWs, as part of their outreach and community presentations on Alzheimer's disease. The fotonovela is also [available on Oregon's ADRC website](#).

## FOUNDATIONAL RESOURCES FOR AND ABOUT CHWs

The following resources include foundational (i.e., not specific to aging) tools and networks for CHWs, as well as resources to support public health agencies in growing the CHW workforce.

Name/Organization	Description
<a href="#">National Association of CHWs (NACHW) Document Resource Center</a>	NACHW, with support from CDC, launched the nation's largest searchable database of documents relating to CHW policy, mainly focused at the state level. Documents include reports, policy studies, meeting minutes, state legislative bills, and other materials that show how state-level groups have created definitions, policies, and workforce development programs for CHWs.
<a href="#">CHW Core Consensus (C3) Project</a>	The CHW Core Consensus (C3) Project has set a foundational framework for CHW training and policies by building national consensus on 10 roles and 11 core skills vital to effective CHW training curriculums and relevant in a variety of settings (e.g., communications skills, service coordination and navigation, advocacy, capacity building skills) and not just the immediate demands of the job.
<a href="#">CHW Central</a>	Global resource for and about CHWs.
Textbook: <i>Foundations for Community Health Workers, 2nd ed.</i> (Jossey-Bass)	The textbook is available for purchase online, and City College of San Francisco offers a <a href="#">free online training guide</a> , including exercises and <a href="#">videos</a> for use.
<a href="#">CHW National Library</a>	Library for tools, guides, and trainings.
<a href="#">New England Public Health Training Center (NEPHTC)</a>	Webinars and self-paced online trainings for CHWs.
ASTHO <a href="#">Experts: A Patchwork Quilt of State Approaches to CHW Training</a>	This May 2019 blog post explains how states select and adopt CHW training models that best fit the unique needs of their population and workforce.
ASTHO <a href="#">CHW Certification and Financing Issue Brief</a>	ASTHO, with support from CDC, published an issue brief that provides an overview of the unique capabilities of CHWs and possibilities for CHW certification and financing.
ASTHO Presentation: <a href="#">Developing and Defining the CHW Workforce: Findings from a Multi-State Learning Community</a>	ASTHO's presentation from the 2019 American Public Health Association Annual Meeting highlights the array of financing mechanisms that can support the CHW workforce, along with a discussion on the pros and cons of each strategy (e.g., grant funding, community benefit, Medicaid managed care contracts, Medicaid waivers). The brief recommends that states pursue a range of strategies rather than a single mechanism.



## PROMOTING ORAL HEALTH FOR PEOPLE LIVING WITH ALZHEIMER'S AND DEMENTIA

*Minnesota Department of Health*

Tooth decay, gum disease, and tooth loss are serious problems for older Americans as Medicare lacks routine dental care, and transportation to the doctor may be limited or difficult. Poverty and low health literacy may be challenging factors as well.

Maintaining good oral health is even more difficult for people living with Alzheimer's and other dementias due to cognitive impairment or caregiving-related challenges. To address this issue, the Minnesota Department of Health (MDH), Oral Health Program developed a train-the-trainer curriculum and five-evidence based educational models to train non-dental care providers in basic oral health care for older adults with a special focus on adults with Alzheimer's or other dementias.

This train-the-trainer curriculum is geared toward CHWs. It utilizes tools including low-literacy levels and hands-on activities to educate CHWs about common oral health conditions, oral hygiene skills, medical-dental care coordination, oral health literacy, cultural competency, aging, and other topics. The Oral Health

Program also developed a flip chart that CHWs can use to educate family caregivers about the oral health needs of people living with dementia.

MDH has educated dozens of health professionals and even more caregivers by delivering this initiative in a variety of ways. MDH trained 10 CHWs, and 25 CHW students enrolled in a vocational school.

The purpose of the training is to improve CHWs' knowledge, attitudes, and practices about cognitive health and dementia and to improve their skills in teaching caregivers about oral hygiene for people living with dementia. Students at the school took the information learned from the program and developed an educational poster on aging and oral health care to display at the school's health fair.

The CHWs recruited approximately 75 unpaid caregivers with Volunteers for America and trained them in oral health care for older adults, including adults with Alzheimer's or other dementias. Contact: Prasida Khanal, BDS, MPH, Minnesota Department of Health, [prasida.khanal@state.mn.us](mailto:prasida.khanal@state.mn.us).



## ENCOURAGING EARLY DETECTION OF COGNITIVE IMPAIRMENT AND DEMENTIA

*Missouri Department of Health and Senior Services*

The Missouri Department of Health and Senior Services' (MDHSS) Bureau of Cancer and Chronic Disease Control partnered with CHWs to raise awareness of the early signs of Alzheimer's disease. The CHWs used the AD-8 Alzheimer's assessment tool to identify clients with signs of dementia and refer them to physicians for formal screening and diagnosis. CHWs also educated their clients about how to preserve brain health through good nutrition and physical activity.

The AD-8 tool was chosen as it can be quickly administered in a client's home. CHWs were educated about the AD-8 tool during a meeting of Missouri's

Community Health Worker Advisory Board. A web-based training module for CHWs is also available online, through Washington University. Over 500 CHWs and other public health professionals have learned about using the AD-8 tool and its advantages in identifying people with signs of dementia.

In addition to the AD-8, MDHSS worked with CHWs to raise awareness by providing them with packets of information provided by the Alzheimer's Association. CHWs were also able to learn more by attending statewide meetings held by the Missouri Primary Care Association.

## SAMPLE CHW-LED INTERVENTIONS WITH A DEMONSTRATED IMPACT ON HEALTHY AGING IN PLACE

The following examples from the field highlight CHW programs and pilot projects that provided supportive services for older adults.

Resource	Description
<a href="#">Community health worker interventions to improve access to health care services for older adults from ethnic minorities: a systematic review (2014)</a>	<p>This systematic review identified seven studies that assess the effectiveness of CHW programs on improving health outcomes among older adults who identify as Hispanic/Latino, African American, or Korean. The study found that CHW-led interventions can improve health care use and healthy behaviors.</p>
<a href="#">Arkansas Tri-County Rural Health Network</a> (chronicled in <i>Health Affairs</i> )	<p>The network administered a Community Connectors program in which CHWs identify Medicaid-eligible seniors who are at risk of nursing home placement and connected them to home- and community-based care. The county-level pilot resulted in a 3:1 return on investment.</p>
<a href="#">Pilot program by the U.S. Department of Housing and Urban Development (HUD)</a>	<p>Four bilingual CHWs were placed in a public housing building and a Section 8 building. Over 15 months, the CHWs provided case management, motivational interviewing, and connections to medical and social services. Nearly all (96.6 percent) residents reported satisfaction with the program, and 78.6 percent reported improved overall well-being.</p>
<a href="#">Integrated Wellness in Supportive Housing Program (IWISH)</a>	<p>HUD is also funding a demonstration (IWISH) at 40 sites across California, Illinois, Maryland, Massachusetts, Michigan, New Jersey, and South Carolina. Each provides a full-time service coordinator and part-time nurse to housing developments for older adults. The demonstration program began in 2017.</p>
<a href="#">Seniors CONNECT Project in Detroit train elders as CHWs</a>	<p>The project recruited seven community-dwelling older adults from partnering senior centers to become CHWs (contract positions). They underwent approximately 126 hours of training covering social determinants of health and disparities; listening skills; engaging people in research; program planning; finding health information; outreach and advocacy; basic CPR skills; healthy aging; and motivational interviewing. The CHWs logged 288 patient encounter hours and made referrals for over 120 clients over three months.</p>



## IMPROVING CARE COORDINATION

*Idaho Department of Health and Welfare & Idaho State University*

In 2014, the Idaho Department of Health and Welfare (IDHW) received a state innovation model grant from the Centers for Medicare and Medicaid Innovation (CMMI), which funded a four-year model to implement the [Statewide Healthcare Innovation Plan](#) (SHIP). Idaho used this grant to show that the state's health care system could be enhanced by improving care coordination between primary care providers and the broader medical-health field.

Idaho added several initiatives to the SHIP that focused on expanding the reach of primary care and improving access to health care services in rural areas and communities that have been underserved due to historic injustices. These initiatives included training and supporting CHWs, as well as specially trained community health emergency medical services (CHEMS) staff, in underserved communities and rural areas. The CHW and CHEMS personnel provide follow-up in a person's home and coordinate with the primary care provider. As trusted community members, the CHW and CHEMS professionals are effective in providing assistance for chronic disease management or post-discharge follow-up in areas with limited health care services such as Idaho's rural and frontier counties.

Idaho currently has 16 EMS agencies that operate with specially trained CHEMS personnel in 14 different counties in the state. CHEMS personnel are specially trained EMS providers who work with medically fragile patients outside the hospital, with the ultimate goal of preventing hospital re-admissions by helping these patients properly manage their health at home. These include patients with mental health issues, diabetes, heart disease, and numerous other illnesses that require long-term recoveries or continued acute care. CHEMS providers receive their training by either completing



the Community Paramedicine program at Idaho State University (ISU), or by completing training at other state-recognized CHEMS educational programs, all of which have received funding and curriculum development assistance from IDHW.

ISU, with support from IDHW, has offered [CHW training](#) since 2016. By the end of the SHIP model test in 2018, ISU had delivered seven CHW courses and trained over 120 CHWs statewide. The investment in Idaho's CHW workforce has been sustained: ISU continues to train CHWs and the Idaho CHW Association (ICHWA) was established in 2020. ICHWA represents a significant milestone in the statewide infrastructure to support CHWs, with sustainable CHW reimbursement a priority for the ICHWA.

To help pay for the increased need for CHWs, state-initiated waivers, like the ones allowed under Section 1115 of the Social Security Act, allow for state Medicaid programs to pilot innovative projects that include CHWs and are not traditionally covered by the program.

## SAMPLE PATIENT NAVIGATION PIPELINE THAT CAN INTEGRATE CHWs

The following resources may help health departments determine how to utilize CHWs to promote cognitive health in chronic disease programming. For more hypertension-focused examples, visit the [ASTHO Tools for Change](#) resource library.

Resource	Description
<a href="#">University of Texas Health Northeast: Hypertension Process Flow Map and Project Protocol</a>	This resource, from University of Texas (UT) Health Northeast, lays out the protocol and flowchart for the health system's hypertension program. The program includes referral to services and options for both patients who do or do not commit to the hypertension program.
<a href="#">Hypertension Referral and Management Flow Chart (Virginia)</a>	This process document was developed by the Virginia Department of Health for federally qualified health center (FQHC) administrative staff, clinicians, and pharmacists. Its purpose is to provide an overview of the Virginia Million Hearts initiative and provide a visual of the referral process.
<a href="#">Reducing Care Fragmentation: A Toolkit for Coordinating Care</a>	Improving Chronic Illness Care has designed this resource for clinics, practices, and health systems focused on improving care coordination through patient referrals and transitions; it includes training presentations and other resources for providers and practices.
<a href="#">Alzheimer's Patient Navigation Model</a>	Global Council on Alzheimer's Disease provides an outline for developing a patient navigation model for Alzheimer's, which could help patients and their families better manage their medical and social services.

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### END NOTES

<sup>1</sup> National Prevention Council. Healthy Aging in Action. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2016. Accessed on 12/18/20 at <https://www.cdc.gov/aging/pdf/healthy-aging-in-action508.pdf>

<sup>2</sup> American Public Health Association. Community Health Workers. Accessed on 12/18/2020 at <https://www.apha.org/apha-communities/member-sections/community-health-workers#:~:text=The%20CHW%20Section%20has%20adopted.understanding%20of%20the%20community%20served>



For more information on the public health response to Alzheimer's, visit [alz.org/publichealth](http://alz.org/publichealth) and [astho.org/healthyaging](http://astho.org/healthyaging)