

Technical Brief Summary

Technical Brief No. 34, Impact of Community Health Worker Certification on Workforce and Service Delivery for Asthma and Other Selected Chronic Diseases

What is the purpose of this Technical Brief?

- To assess the current state of the evidence about the processes, risks, benefits, and implications of community health worker (CHW) certification
- To identify future research needs or evaluation needs

What is the rationale behind this Technical Brief?

There is strong evidence linking exposure to CHW-delivered interventions with reduced asthma-related outcomes, including asthma attacks, hospitalizations, and emergency department visits, as well as improved asthma management control.²⁻⁴ This applies for maternal-child health and chronic conditions such as cardiovascular disease and diabetes.⁵ Unfortunately, barriers to CHWs' integration in healthcare organizations may limit their optimal utilization.

CHW certification has gained attention as a strategy to increase the use of CHWs in healthcare systems. There is some debate about the merits of certification, based on the perceived potential benefits and drawbacks. CHW certification could legitimize the role of community health workers and ensure consistency in the quality of care provided, confer opportunities for educational and career advancement, improve employment stability, assure that community health workers have a standard skill set and knowledge base, and increase sustainable funding for services.⁶⁻¹¹ However, some important risks include the cost of certification, which may be prohibitive for existing and future CHWs, and the potential for certification to undermine the grassroots, community-based orientation that underpins the CHW model.⁶

What are the main results from this Technical Brief?

- We found limited inquiry into CHW certification, particularly in the published literature. Four articles found in the published literature evaluated an aspect of CHW certification and addressed outcomes related to type 2 diabetes and cardiovascular disease; no asthma outcomes were addressed.
- Results from the grey literature revealed 37 documents, indicating a growing interest in the topic among national organizations and foundations but not evaluation of its impact. These documents included reports, presentations, and websites of health departments that developed CHW certification programs.
- Interviews with 9 Key Informants (including CHWs, CHW trainers, CHW employers, patient advocates, researchers, policymakers, national thought leaders, and stakeholders from Federal agencies) clarified reasons for an increased focus on certification as a strategy to promote CHWs' integration into healthcare settings and provided context about certification processes, risks, benefits, and implications
- Opportunities for additional research include:
 - Conducting pragmatic randomized controlled trials to test the types and components of certification processes and the impact of CHW certification on CHWs' service delivery and patients' health outcomes.
 - Using case studies to examine the impact of certification on CHWs' recruitment, retention, workforce identity formation, and financial viability among States with certification programs.
 - Employing mixed methods (semi-structured interviews, focus groups, and surveys) to explore patients' and care team members' perceptions of CHW certification.

What is a Community Health Worker?

According to the American Public Health Association Community Health Worker Section, a community health worker is defined as “a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served... [enabling] them 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.”¹



Potential Benefits and Unintended Consequences of Requiring CHW Certification

	Potential Benefits	Potential Unintended Consequences
CHW Integration Into Care Teams and Patient Care	<p>Other health professionals may be less inclined to dismiss CHWs as less valuable members of the care team.</p> <p>Providers may have a better understanding of, and respect for, CHWs' contributions.</p> <p>CHWs may have "a louder voice in some rooms."</p>	<p>Could adversely affect the CHW-patient relationship by "putting [CHWs] above" the people they're serving, as opposed to being their peers, undermining a key ingredient that makes them efficacious.</p> <p>Could shift the CHW model to that of disease management rather than one of individual- and community-capacity building.</p>
CHW Recruitment and Retention	<p>Could help retain CHWs who want to advance in the field.</p> <p>May promote greater recognition among CHWs of the broad roles of CHWs in advancing individual and community health.</p> <p>Could help build group identity/pride.</p>	<p>May shift orientation of CHWs from being stewards of community health to being employees of health care payors.</p> <p>May keep out candidate CHWs with extensive experience in the community who are not good test-takers.</p> <p>May keep out candidate CHWs who cannot afford the certification process.</p>
Funding and Reimbursement	<p>May lead to sustainable funding, employment opportunities, and reimbursement streams to support CHWs.</p>	<p>May not lead to better pay or employment opportunities.</p> <p>Could lead to "de facto" mandatory certification, if certified CHWs are favored over those who have not been certified.</p>

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