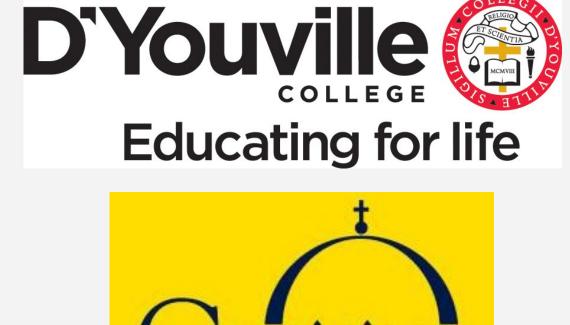


# Evaluation of the Impact of a CHW Training Program: A Qualitative Analysis of Participant Feedback

Renee Cadzow, PhD; Jessica Bauer Walker, BA, CHW

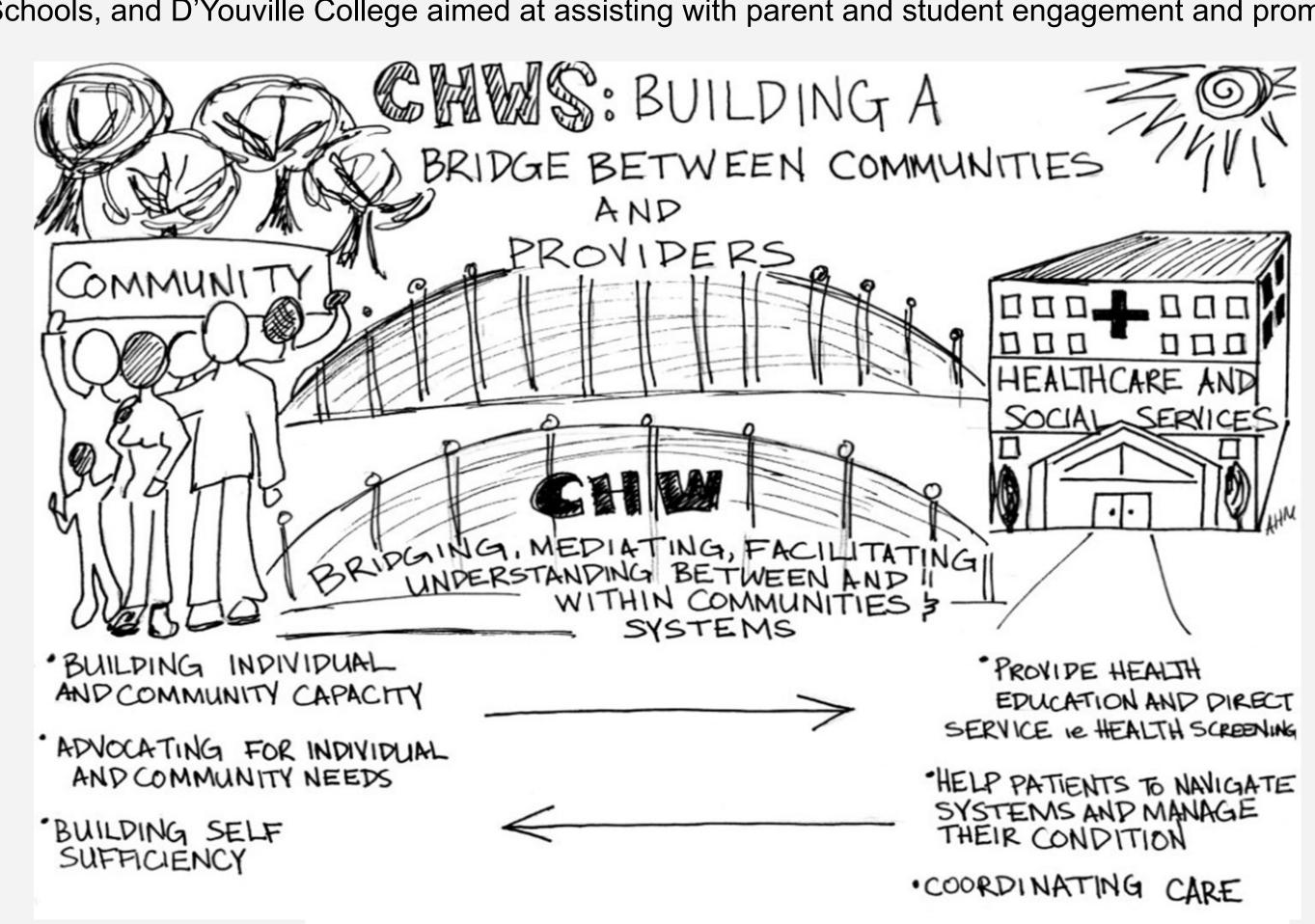


#### Introduction/Background

The Community Health Worker Network of Buffalo's (CHWNB's) has developed a training program focused on empowerment and asset-building strategies for individuals and communities, developed and delivered by a diverse collaboration of Community Health Workers, physicians, academics, advocates, and other community members. The organization provides training and education in a popular education format, a pedagogy that is highly participatory and where everyone teaches and everyone learns. The CHWNB also provides technical assistance, conducts research, policy, and advocacy work, and creates a network for people and organizations from all different sectors, professions, neighborhoods, races, and cultures to come together in an asset-based community development framework.

CHWNB has been conducting a 28 hour (4 day) "core competency for CHW's" training in the Buffalo, NY region since 2011. Over 500 CHWs (often identified as outreach workers, advocates, organizers, peer counselors, and many other titles) within many local organizations and institutions have participated in this training. CHW's in these organizations address health holistically through various "social determinants of health" such as education, housing and community development, jobs and employment, healthy food, public safety, health care and social services, and social and family networks. They see people as their primary asset, and have worked in collaboration with the communities they serve to define needs and to establish participatory, asset-based strategies to address those needs. Participants in this training receive a certificate of training completion from the professional studies program of a partnering college, Canisius College.

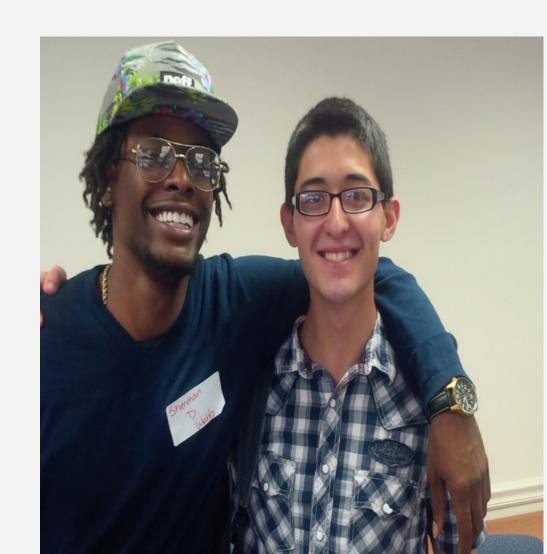
In addition to the core competency training, the CHWNB also provides training to community health stakeholders (physicians, academics, managers, community leaders) and organizational teams of diverse people and professions. This can be anywhere from 4-14 hours, depending on the interest of the organization or group. Also, the CHWNB has a parent and student CHW program with the Buffalo Public Schools, and D'Youville College aimed at assisting with parent and student engagement and promoting school wellness.







Tasha, who operates the Matt Urban Hope Center "Urban Diner" and does street outreach with women who are homeless and/or have substance abuse and mental health challenges.



Sherman and David, youth CHW's with Leaving our Legacy (LOL), who conduct peer education and outreach on sexual health and trauma-informed care

## Methods

Evaluation Approach: Common approaches to assessing CHW training programs have included daily quizzes or tests and pre-post training surveys or tests. 1-5 While the CHWNB recognizes the merit in evaluation approaches like these, the approach selected for the 4-day core competency training is consistent with an overall action learning or popular education approach. The pre-post test design can be advantageous in that it is able to capture the impact of the training on knowledge, attitude, behaviors, etc., however it may also introduce terms and concepts before participants are ready for them.<sup>8</sup> It may also not resonate well with participants who do not like being in a traditional student or research subject role. Just as trust is an important aspect of CHW work, so too is it important in the training process.

Implementation of Evaluation: Participants complete a post-training survey wherein they rate workshop activities, organized in modules, on a scale of 1-5 with 5 representing the highest score. Within each module, they are invited to write comments about it. At the end of the posttraining survey, they are asked whether the training impacted them, what they would take back and apply in daily work, whether or not they would recommend the training to others and why, whether they have specific feedback for the training team, what they really liked and what they would change about the training. The training is often split into two 2-day blocks of time to accommodate the busy schedules of our trainees, so the post-training survey is split into two surveys, administered at the end of days 2 and 4.

Data Analysis: De-identified survey data from 67 trainees were shared with Cadzow for the purposes of quantitative and qualitative analysis, program improvement and dissemination of findings. Comments from all modules were combined for qualitative analysis.

The authors used a general inductive approach wherein data from evaluation surveys conducted between 2011 and 2015 were entered into an Excel spreadsheet. The authors read the responses to become familiar with the content and begin to see categories or themes emerge. Comments were typed in one column in Excel and when categories were identified, they were labeled in the adjacent column in Excel. This allowed the authors to sort by category once all comments were coded. If comments fell into more than one category, the adjacent column (or up to three columns) were used to type the category and sort as needed. This process allowed the authors to identify similarities and differences in the text coded within one category and make changes as necessary. It also allowed for the collapsing of categories when it became apparent that they included similar text. Finally, appropriate quotations were selected that captured the essence of each category (shown to the right). Further analysis of these categories may result in further reorganization and simplification of categories/concepts.

Additional Evaluation and Initial Analysis Approach: Additionally, in response to the establishment of a certificate program for the CHW training at a local college (Canisius College), the CHWNB held two CHW certificate sessions where previously trained CHWs were invited to a 2-hour refresher session that also included reflection on the previous training and applicability in their work and/or life. These two sessions were audio-recorded for the purposes of program evaluation and improvement. Analysis is ongoing, however some key themes have emerged from each of those trainings. Examples of initial results are presented on the far right.

# Categories of Open-Ended Responses on Evaluation Forms Following 4-day CHWNB CHW Core Competency Training

#### Relationship building/ Connection with Others

"Expanding network of friends, colleagues, community." "I am amazed at how quickly the group came together."

#### Interactive

"Excellent in showing team work and how you feel when over whelmed." "Role play was helpful and different examples allowed seeing how it can pan out different ways."

"It was an emotional moment but all worth it to know how our client feel when we ask them personal questions."

# "Powerful in making the feeling of vulnerability real in an exercise."

"I found when you are on a path of touching peoples lives- you can't make a difference if you haven't examined your own

**Triggered Self-Reflection** 

"Wow. What prejudice I have. I was not born like this, but this is a learned behavior."

#### Generally Enjoyed

"Really enjoyed this. Different than most trainings." "Light hearted, easy going, fun, quick."

#### **Enlightening**

"The entire workshop speaks volumes to the fact that we can indeed do better together." "Good for what ails some of our invaded psyche, our society is so invaded with negativity. Positive reinforcement is

#### Plan to Apply

"Helped me to connect the dots of info I had in a comprehensive way." "Something I can actually take back to my organization."

#### Learned a lot/ Informative

"Fabulous information. I want all to know of the benevolent movement emerging in the community." "It was very informative.. motivated me to continue trying to make a difference."

# Important/Critical

"Incredible! Worthy of posting on bill boards the world over."

Want to Know More

"Critical, crucial and extremely necessary."

"I would like to spend more time on this. Really exploring what is health."

"Wanted more! (i.e. specific issues in zip codes)."

### Table 1: Community Health Worker Network of Buffalo Training Modules with Associated Mean Participant Rating

| CHW Training Module                     | Description of Module's Purpose   | Mean Rank<br>(Scale of 1-5; 5<br>is the highest) |
|---|---|--|
| Introductions and Setting Expectations  | "Establishing trust and empowering the group to learn and work together."   | 4.45 (n=67)                                      |
| Health, Public Health and Health Care   | "Understand the importance and impact of public health versus health care."   | 4.53 (n=67)                                      |
| Privilege and Power                     | "It is important for CHWs to explore earned and unearned privilege, and how the power attached to such constructs impacts themselves and the people they work with."  | 4.57 (n=63)                                      |
| Bias and Value for All People           | The presence of bias is based on our personal experience and values systems, and CHW's must work to be mindful of to see beyond labels and value the whole person."   | 4.35 (n=62)                                      |
| Strengths-Based Approach                | "Learn to stop focusing on what is wrong and identify what is strong in those CHW's serve through a strengths-based approach."  | 4.63 (n=63)                                      |
| History of CHWs                         | "Understand the diverse history of community health workers and the many names and titles for them throughout time and the world."  | 4.25 (n=67)                                      |
| Ethics of Care                          | "Understand the sensitive nature of what CHWs do through our work, be exposed to several ethical decision-making frameworks, and embrace an "ethic of care" that values the vulnerable and works toward interdependence | 4.41 (n=59)                                      |
| Popular Education/<br>Learning Theories | "Learn about the history of an education framework where everyone teaches and everyone learns; with the goal of a just, equal, and truly democratic society."   | 4.25 (n=60)                                      |
| Safety and Self-Care                    | "How to stay safe and practice self-care and to help reduce burnout in CHWs."   | 4.48 (n=33)                                      |
| Stages of Behavior Change               | "To learn the importance of being flexible to individual needs, and that change is a process."  | 4.28 (n=59)                                      |
| History of Buffalo                      | "To gain a better understanding of the dynamics of our own particular community that impact the individuals, families, and neighborhoods CHW's serve"   | 4.23 (n=48)                                      |
| Asset-Based Community Development       | "To give CHW's a framework for finding and mobilizing assets in their communities, and work toward community and system level change toward health equity."   | 4.48 (n=61)                                      |
| Closure and Lessons<br>Learned          | "To allow for CHW's to reflect on their own learning and experience, affirm the solidarity of the group, and plan for next steps."  | 4.63 (n=59)                                      |

Of and From the Community That We Serve: "And I always use myself as an example. You know, whether it's my story about being on drugs, whether it's my story of my mother being a critical parent, you know, I just give it to them. They be like, "You?" And I'm like, "Yeah, me." And then they see, okay, well, you're somebody I can work with. And just goes like that." (Tasha, Homeless and Mental Health Outreach CHW)



The Popular Education Approach: "The engagement level was higher at this than any other training or conference even that I've gone to... It wasn't drawn out... it engaged the crowd—it wasn't just talk to you, it wasn't just being basically put out there for you to just look at a book and read it. I don't do well with that type of training. . . So interacting with the group, doing group work, things like that's of interest. So I think that kinda draws their attention better than just sitting " (Kim, Special Education Parent Advisor CHW)

Maternal health CHW's in 2013, at a NYSDOH sponsored CHWNB training

#### Reflections from Follow-up Certificate Session

On the Importance of Local Training: "Just the culture and the diversity of our group was so awesome. It gave you the background from the different cultures. So it allowed me, because I work primarily on the west side and the east side, and it's a lot of the things that I didn't know about the different cultures that I was dealing with. So it gave me a better understanding of the people that I serve." (Gretta, Insurance Company/Disease Management CHW)

Connecting with the Trainers: "For me to see Sam as a—as a young black man—to see Sam up there doing this, too, that was really inspirational for me, too, to see, like, alright, this is a brother doing something for the community, in the community. He's strong with it. He owns it. He's excellent at what he does, too. So that kinda like was able—I was able to kinda see myself in Sam, too. (Sherman, Youth Sexual Health CHW)



Youth/Youth Advocate Core Competency Training for Community Health Workers, 2014

#### Conclusions

**PEOPLE**: Training participants emphasized how they connected to others in their field, how relationships were formed and how their networks expanded.

**PROCESS**: Participants remarked about the interactive, participatory nature of the training and how it was enlightening or eye-opening, that it challenged them to self-reflect, and that this was often an emotional process.

**EMPOWERMENT**: Participants reported that they learned a lot, found the information of critical importance, built on their current knowledge and want to know more. They see the relevance of the training to their work and life and planned to apply it within their organizations.

**MEMORABLE**: Participants remembered the experience and the content, up to a year or more after the training. They were able to reflect on its application to their work, how it has compared to other trainings, and in what topics they would like to have more training.

### Next Steps

Develop outreach and awareness tools from evaluation data to improve the public understanding of CHWs. Using the voices of CHWs we can expand the understanding locally and nationally about how CHWs address the social determinants of health and create and maintain a bridge between the community and health care and social service organizations.

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For more information about the Community Health Worker Network of Buffalo, please contact www.chwbuffalo.org or check us out on Facebook: www.facebook.com/chwbuffalo. For questions about this evaluation, please contact Renee Cadzow at cadzowr@dyc.edu.