



## Summary of Community Preventive Services Task Force Recommendation

The Community Preventive Services Task Force (CPSTF) recommends interventions that engage community health workers to prevent cardiovascular disease (CVD). There is strong evidence of effectiveness for interventions that engage community health workers in a team-based care model to improve blood pressure and cholesterol in patients at increased risk for CVD.

There is sufficient evidence of effectiveness for interventions that engage community health workers for health education, and as outreach, enrollment, and information agents, to increase self-reported health behaviors (physical activity, healthful eating habits, and smoking cessation) in patients at increased risk for CVD.

## Major Findings

Included studies engaged community health workers as health education providers, outreach, enrollment, and information agents, members of care delivery teams, patient navigators, or community organizers.

Among populations at increased risk for CVD, interventions that had a community health worker within a team-based care model led to large improvements in blood pressure and cholesterol outcomes.

Interventions that engage community health workers in CVD prevention are cost-effective. A review of economic evidence estimated the median cost per quality-adjusted life year (QALY) gained would be \$17,670 in 2015 U.S. dollars – a figure well below a \$50,000 benchmark for cost effectiveness.

When interventions engaging community health workers are carried out in minority or underserved communities, they can improve health and enhance health equity.



## Who are Community Health Workers?

Community health workers (including *promotores de salud*, community health representatives, community health advisors, and others) are frontline, culturally competent, public health workers who serve as a bridge between underserved communities and healthcare systems, working alone or as a part of an intervention team.

## Facts about Cardiovascular Disease

In the United States, approximately 610,000 adults die of heart disease and more than 130,000 adults die from stroke each year.<sup>1</sup> CVD and stroke accounted for 14 percent of total health expenditures in 2012 to 2013, with an estimated \$316 billion in direct and indirect costs.<sup>2</sup>

High blood pressure, high cholesterol, and smoking are major heart disease and stroke risk factors, and about half of U.S. adults (47%) have at least one of these three risk factors.<sup>3</sup>

## Learn More

**Summary of Evidence and Task Force Finding**  
<http://www.thecommunityguide.org/cvd/CHW.html>

**Million Hearts Fact Sheet on Community Health Workers**  
[http://www.cdc.gov/bloodpressure/docs/mh-commhealthworker\\_factsheet\\_english.pdf](http://www.cdc.gov/bloodpressure/docs/mh-commhealthworker_factsheet_english.pdf)

**Community Health Worker Toolkit**  
<http://www.cdc.gov/dhdsp/pubs/chw-toolkit.htm>

<sup>1</sup>CDC, NCHS. Underlying Cause of Death 1999-2013 on CDC WONDER Online Database, released 2015. Data are from the Multiple Causes of Death Files, 1999-2013, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program.

<sup>2</sup>Benjamin EJ, Blaha MJ, Chiuve SE, et al. Heart disease and stroke statistics—2017 update: a report from the American Heart Association. *Circulation* 2017;135(10):e146-603.

<sup>3</sup>Fryar CD, Chen T, Li X. [Prevalence of Uncontrolled Risk Factors for Cardiovascular Disease: United States, 1999–2010](#)[PDF-323K]. NCHS data brief, no 103. Hyattsville, MD: National Center for Health Statistics. 2012.

Established in 1996 by the U.S. Department of Health and Human Services, the Community Preventive Services Task Force (CPSTF) is an independent, nonfederal panel of public health and prevention experts whose members are appointed by the director of CDC. The CPSTF provides information for a wide range of decision makers on programs, services, and other interventions aimed at improving population health. Although CDC provides administrative, scientific, and technical support for the CPSTF, the recommendations developed are those of the CPSTF and do not undergo review or approval by CDC. Find more information at [www.thecommunityguide.org](http://www.thecommunityguide.org).