



Summary of Community Preventive Services Task Force Recommendation

The Community Preventive Services Task Force (CPSTF) recommends interventions engaging community health workers for diabetes prevention. The finding is based on sufficient evidence of effectiveness in improving glycemic control and weight-related outcomes among people at increased risk for type 2 diabetes.

Major Findings

When targeted for populations at increased risk of type 2 diabetes, these programs achieve the following:

- Improved health outcomes including blood sugar control (HbA1C, fasting blood glucose) and weight reduction
- Reduced rates of new-onset diabetes

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

Economic evidence indicates that these interventions are cost-effective, with the cost per quality-adjusted life year (QALY) gained falling under a \$50,000 benchmark for cost effectiveness.

Interventions engaging community health workers for diabetes prevention, which are typically implemented in underserved communities, can improve health and enhance health equity.



What are Community Health Workers (CHWs)?

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

Community health workers deliver program content through one-on-one interactions or group sessions that take place in homes or community-based settings. Activities for people with an increased risk for type 2 diabetes include the following:

- Education about diabetes prevention and lifestyle modification
- Informal counseling or coaching
- Extended support for community members

Facts about Diabetes

People with diabetes may develop serious complications, such as heart disease, stroke, kidney failure, blindness, leg amputations, and premature death.¹ Individuals who have prediabetes have blood sugar (glucose) levels that are higher than normal, but not high enough to be classified as type 2 diabetes.¹

Learn More

Summary of Evidence and Task Force Finding and Full-text Publications

<https://www.thecommunityguide.org/findings/diabetes-interventions-engaging-community-health-workers>

National Diabetes Prevention Program: Prediabetes. Am I at risk?

<https://www.cdc.gov/diabetes/prevention/index.html>

Community Health Worker (CHW) Toolkit

<http://www.cdc.gov/dhdsp/pubs/chw-toolkit.htm>

CDC, Diabetes

<https://www.cdc.gov/diabetes/>

¹American Diabetes Association. Diagnosis and classification of diabetes mellitus. *Diabetes Care* 2010;33 (Suppl 1):S62-9.

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.