Cancer Screening: Interventions Engaging Community Health Workers—Cervical Cancer Summary Evidence Table

Abbreviations Used in This Document:

- Intervention components:
 - o CI: client incentive
 - o CR: client reminder
 - o GE: group education
 - o MM: mass media
 - o OE: one-on-one education
 - o PAF: provider assessment and feedback
 - o PI: provider incentive
 - o PR: provider reminder
 - o ROPC: reducing out-of-pocket costs
 - o RSB: reducing structural barriers
 - o SM: small media

Cancer types

- o BC: breast cancer
- CC: cervical cancer
- CRC: colorectal cancer

Screening types

- \circ Flex sig: flexible sigmoidoscopy
- FOBT: fecal occult blood test
- o MAM: mammography
- o Pap: Papanicolaou test

Others

- o ED: emergency department
- o N/A: not applicable
- o NR: not reported
- o PN: patient navigator
- o RCT: randomized control trial

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Author,	Location: Boston,	Training: 2 days of	Eligibility Criteria:	Outcome Measure: adherence to
Year:	Massachusetts	training covering risk	female church members	screening guidelines (annual FOBT or
Allen et al;		factors, prevention, and	age 18 and older who	sigmoidoscopy within 5 years or
2014	Setting : urban community	screening guidelines	self-identified as	colonoscopy within 10 years; mammogram
			Hispanic or Latina and	within 2 years for women 40-49 or annual
Study	Intervention Duration: 6	Supervision: patient	spoke either English or	mammogram for ≥50; pap smear within 3
Design : Pre-post	months	navigator provided supervision	Spanish	years)
	Intervention Details:		Sample Size: 77	How Ascertained: self-reported
Suitability of	Type of cancer addressed:	Matching to Population:		
Design:	BC, CC, CRC	recruited from church	Attrition: 53%	Follow-up Time: NR
Least		community by pastor		
	Intervention arm: OE + GE	based on leadership,	Demographics:	Results:
Quality of	+ SM + RSB, alternate site,	communication, and	Mean age: 43.9	Absolute effectiveness, CHW in a team:
Execution:	reducing admin barriers	interpersonal skills	Gender: 100% female	High attrition; loss to follow-up not imputed
Fair	OE: peer health advisors conducted education via	Educational	Race/Ethnicity: 100%	Up-to-date with MAM: Pre 13/21=61.9%
	telephone and in-person	Background: NR	Hispanic Employment: 65%	Post 18/21=85.7%
	outreach	Background. NK	employed; 32%	Change +23.8pct pts
	GE: peer health advisors	Payment: received small	unemployed	Change +25.0pcc pts
	conducted group education	stipend	Mean annual household	Up-to-date with Pap test:
	during small group <i>charlas</i>	Jan Porta	income: 48% <\$30K;	Pre 24/27=88.9%
	and bingo nights	Roles Performed:	24% ≥\$30K <\$50K;	Post 20/26=76.9%
	SM: banners with scriptures	Cultural mediation among	5% ≤\$50K	Change -12.0pct pts
	and passages promoting	individuals, communities,	Education: 36% < HS;	
	health behaviors or self-	and health and social	35% HS or GED; 21%	Up-to-date with CRC Screening using any
	care; culturally appropriate	service systems; Providing	some college; 8%	test:
	educational materials	culturally appropriate	≥college	Pre 9/12=75.0%
	RSB, alternate sites:	health education and	Insurance: 64% insured	Post 9/12=75.0%
	mammography van day	information; Care	Established source of	Change 0.0pct pts
	with a mobile health van	coordination, case	care: NR	
	RSB, reducing admin barriers: assistance with	management, and system navigation; Providing	Baseline screening of	
	applications for state-based	coaching and social	intervention group: 62% MAM; 89% Pap	
	insurance	support; Building	test; 75% any CRC	
	insulance	individuals and	screening	
	Intervention Intensity:	communities	Jercennig	
	weekly exposure during			
	church	Extent of CHW		
		Involvement:		

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	Targeted or Tailored: tailored; targeted to Latinas and included religious	Implemented major part of intervention		
	themes	Specific Component Implemented by CHW: OE, GE		
		Methods for Interaction with Participates: both		
Author,	Location: San Francisco,	Training: outreach team	Eligibility Criteria:	Outcome Measure: receipt of
Year: Bird et al;	California & Sacramento, California	trained lay health workers	Vietnamese women age 18 and older living in	mammogram or pap smear
1998	Setting: urban community	Supervision: research staff provided supervision	targeted census tracts with the ability to	How Ascertained: self-reported
Study		·	understand Vietnamese	Follow-up Time: NR
Design:	Intervention Duration:	Matching to Population:		-
Pre-post with	30 months	recruited leaders and	Sample Size: 717	Results:
comparison		assistants from		Absolute effectiveness, CHW in a team:
	Intervention Details:	Vietnamese community	Attrition: N/A	Up-to-date with MAM:
Suitability of	Type of cancer addressed:	Educational	B	Intervention Control
Design : Greatest	BC, CC	Educational Background: NR	Demographics: Age: 46% 18-39 years;	Pre 54% 43% Post 69% 47%
Greatest	Intervention arm: GE + SM	Background: NK	26% 40-49 years; 29%	Change +15pct pts +4pct pts
Quality of	+ CI	Payment: leaders	≥50 years	Difference +11pct pts
Execution:	GE: small group prevention	received \$65 stipend for	Gender: 100% female	Difference Triper pes
Fair	education held at	each session; assistants	Race/Ethnicity: 100%	Maintained MAM (≥2 screening within
	participants' homes covered	received \$50 stipend per	Vietnamese	previous 5 years and MAM within 1.5
	risk factors, screening	session	Employment: 19%	years):
	recommendations and skill		employed	Intervention Control
	building	Roles Performed:	Poverty: 58% below	Pre 37% 32%
	SM: culturally appropriate	Cultural mediation among	poverty level	Post 55% 28%
	wall posters, brochures,	individuals, communities,	Education: 23% ≥HS	Change +18pct pts -4pct pts
	booklets, wall calendars,	and health and social	Insurance: 77% insured	Difference +22pct pts
	and promotional items	service systems; Providing	Established source of	He to date with Day took
	distributed at small group	culturally appropriate health education and	care: 79% had regular	Up-to-date with Pap test:
	sessions, health fairs, physician offices,	information; Providing	physician Baseline screening of	Intervention Control Pre 46% 40%
	neighborhood stores	coaching and social	intervention group: for	Post 66% 42%
	CI: women up-to-date were	support; Building	recent screening, 54%	Change +20pct pts +2pct pts
	eligible to participate in	individual and community	mammogram; 46% pap	Difference +18pct pts
	drawing for prizes	capacity	smear	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	Control arm: women in Sacramento, California served as controls; additional information not provided Intervention Intensity: NR	Extent of CHW Involvement: Implemented major part of intervention Specific Component Implemented by CHW: GE		Maintained Pap test (≥2 screening within previous 5 years and Pap within 2.5 years): Intervention Control Pre 26% 25% Post 45% 22% Change +19pct pts -3pct pts Difference +22pct pts
	Targeted or Tailored: targeted Vietnamese women	Methods for Interaction with Participates: face-to-face		
Author, Year: Braun et al;	Location: Moloka'i, Hawaii Setting: rural community	Training: completed 48-hour evidence-based navigator training program	Eligibility Criteria: Medicare beneficiaries residing on Moloka'i	Outcome Measure: compliance with cancer screening according to USPSTF guidelines
2015 Study	and clinic Intervention Duration:	and participated in quarterly continuing education sessions	Sample Size: 488	How Ascertained: self-reported
Design: RCT	NR	Supervision: nurse	Attrition: NR	Follow-up Time: NR
	Intervention Details:	supervision in first year,	Demographics:	Results:
Suitability of	Type of cancer addressed:	then physicians and young	Mean age: 67.5 years	Absolute effectiveness, CHW alone:
Design : Greatest	BC, CC, CRC	college-educated female provided supervision	Gender: 53.3% female Race/Ethnicity: 46.5%	Up-to-date with MAM:
Greatest	Intervention arm: OE + CR	provided supervision	Asian; 45.0% Native	Intervention Control Pre 38/128=29.7% 47/132=35.6%
Quality of	+ RSB, appointment	Matching to Population:	Hawaiian	Post 79/128=61.7% 56/132=42.4%
Execution:	scheduling, transportation,	recruited from community	Employment: NR	Change +32.0pct pts +6.8pct pts
Fair	reducing admin barriers,	and matched on ethnicity	Income: NR	Difference +25.2pct pts
	childcare	,	Education: 36.9% < HS;	· ·
	OE: navigators performed	Educational	62.3% ≥HS	Up-to-date with Pap test:
	outreach education	Background: NR	Insurance: 100%	Intervention Control
	CR: navigators sent		Established source of	Pre 48/128=37.5% 52/132=39.4%
	appointment reminders via	Payment: NR	care: NR	Post 73/128=57.0% 48/132=36.4%
	mail or telephoned reminders	Roles Performed:	Baseline screening of	Change +19.5pct pts -3.0pct pts
	RSB, appointment	Cultural mediation among	<pre>intervention group: 29.7% mammogram;</pre>	Difference +22.5pct pts
	scheduling: lay navigators	individuals, communities,	37.5% pap smear;	Up-to-date with FOBT:
	scheduled appointments	and health and social	12.8% FOBT; 24.8%	Intervention Control
	and made follow-up	service systems; Providing	endoscopy	Pre 31/242=12.8% 27/246=11.0%
	appointments	culturally appropriate		Post 50/242=20.7% 31/246=12.6%

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	RSB, transportation: provided transportation to appointments RSB, reducing admin barriers: lay navigators communicated with providers and completed paperwork RSB, childcare: lay navigators made arrangements to take care of family while participant was at appointment Control arm: received nutrition education and relevant cancer education materials from another healthcare entity on island Intervention Intensity: NR Targeted or Tailored: tailored; targeted local Hawaiians	health education and information; Care coordination, care management, and system navigation; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components Methods for Interaction with Participates: both		Change +7.9pct pts Difference +6.3pct pts Up-to-date with endoscopy: Intervention
Author, Year: Byrd et al; 2013	Location: El Paso, Texas, Houston, Texas & Yakima Valley, Washington	Training: promotora instruction guide with detailed steps for promotoras on how to	Eligibility Criteria: women with Mexican origin age 21 or older with no previous history	Outcome Measure: pap smear screening at follow-up How Ascertained: self-reported with
Study Design:	Setting: urban and rural communities	deliver interventions Supervision: NR	of cancer or hysterectomy and no cervical cancer	some records reviewed through medical records
RCT	Intervention Duration: 1 session	Matching to Population:	screening in past 3 years	Follow-up Time: 6 months
Suitability of		promotoras were of	,	Results:
Design:	Intervention Details:	Hispanic origin and of	Sample Size: 304	Absolute effectiveness, CHW alone:
Greatest	Type of cancer addressed:	similar SES to women in	Attrition: 14%	Intervention Control
Quality of	CC	study population	AUTHOR: 14%	Overall Pre 0% 0%
Execution:	Intervention arm: OE		Demographics:	Post 17.9% 7.2%

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Fair	OE: promotoras deliver intervention in English or Spanish and use a video to	Educational Background: NR	Mean age: NR Gender: 100% female Race/Ethnicity: 100%	Change +17.9pct pts +7.2pct pts Difference +10.7pct pts
	discuss barriers to facilitators for cervical cancer screening and a flip chart, games, and handouts	Roles Performed: Cultural mediation among	Hispanic Employment: NR Income: NR Education: NR	Rural site Pre 0% 0% Post 30% 6.4% Change +30pct pts +6.4pct pts
	to reinforce the message Control arm: usual care	individuals, communities, and health and social service systems; Providing	Insurance: NR Established source of care: NR	Difference +23.6pct pts Urban site
	Intervention Intensity: 1 in-person session Targeted or Tailored: tailored; targeted to Hispanic population	culturally appropriate health education and information; Providing coaching and social support; Building individual and community capacity; Conducting outreach	Baseline screening of intervention group: 0%	Pre 0% 0% Post 23.5% 7.2% Change +23.5pct pts +7.2pct pts Difference +16.3pct pts
		Extent of CHW Involvement: Implemented everything		
		Specific Component Implemented by CHW: all components		
		Methods for Interaction with Participates: face-to-face		
Author, Year: Dignan et al;	Location : Robeson County, North Carolina	Training: investigators trained lay health educators	Eligibility Criteria: Lumbee tribe members residing in Robeson	Outcome Measure: Pap test in past year How Ascertained: self-reported
1998 Study	Setting: rural community Intervention Duration: 1	Supervision: investigators used	County who were age 18 years or older	Follow-up Time: 6 months
Design : RCT	month Intervention Details:	participant observation techniques	Sample Size: 424 Attrition: 12.7%	Results: Absolute effectiveness, CHW in a team: Odds of intervention group reporting Pap
Suitability of Design:	Type of cancer addressed: CC		Demographics:	test in past year compared to control group: OR 1.3 (95% CI: 0.83, 2.08)

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Greatest Quality of Execution: Fair	Intervention arm: OE + SM OE: lay health educators provided individualized and culturally sensitive information on cervical cancer, Pap smears, and importance of follow-up care during home visits SM: periodic mailings that reinforced information shared during home visits Control arm: usual care Intervention Intensity: 2 home visits Targeted or Tailored: tailored; targeted to Lumbee Native Americans	Matching to Population: lay health educators were Lumbee tribal members Educational Background: NR Payment: NR Roles Performed: Providing culturally appropriate health education and information; Conducting outreach Extent of CHW Involvement: Implemented major part of intervention Specific Component Implemented by CHW: OE Methods for Interaction with Participates: both	Mean age: 42.4 Gender: 100% female Race/Ethnicity: 100% Native American Employment: NR Mean annual household income: 9% <\$5,000; 18% \$5,000-10,999; 26% \$11,000-19,999; 28% \$20,000-39,999; 8% ≥40,000 Education: 16% ≤8th; 21% 8th-12th; 36% HS; 28% >HS Insurance: 42% insured Established source of care: 62.5% had annual physical exam Baseline screening of intervention group: NR	
Author, Year: Dunn et al; 2017 Study Design:	Setting: urban community Intervention Duration: 1 session	Training: 3-day training included communication and group facilitation skills and women centered decision making Supervision: staff	Eligibility Criteria: women aged 21 to 69 for Pap test or 50 to 74 for mammography who have not been screening within past 36 months	Outcome Measure: Pap test or mammogram after GE session How Ascertained: anonymized Pap and MAM data Follow-up Time: 8 months
Pre-post w/comparison Suitability of Design: Greatest	Intervention Details: Type of cancer addressed: BC, CC Intervention arm: GE + CR + RSB, reducing admin barriers, translation,	provided ongoing mentorship Matching to Population: matched on language Educational Background: NR	Sample Size: 327 Attrition: 0% Demographics:	Results: Absolute effectiveness, CHW alone: Up-to-date with MAM: Intervention Control Pre 0% 0% Post 67/183=36.6% 71/536=13.2% Change +36.6pct pts +13.2pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Quality of Execution: Good	appointment scheduling, transportation GE: peer leaders provided information about cervical and breast cancer screening using PowerPoint presentation CR: follow-up phone calls to reinforce screening messages RSB, reducing admin barriers: peer leader organized and accompanied group visits to screening sites RSB, translation: peer leaders provided language support during group visits RSB, appointment scheduling: appointment assistance RSB, transportation: transportation to screening appointments Control arm: usual care Intervention Intensity: 1 in-person session Targeted or Tailored: targeted to communities with new immigrants who live in lower-income areas	Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Care coordination, case management, and system navigation; Providing coaching and social support; Building individual and community capacity; Conducing outreach Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components Methods for Interaction with Participates: both	Mean age: 49.3 Pap eligible; 61.9 mammography eligible Gender: 100% female Race/Ethnicity: NR Employment: NR Income: NR Education: NR Insurance: NR Established source of care: NR Baseline screening of intervention group: 0%	Difference +23.4pct pts Up-to-date with Pap test: Intervention
Author, Year: Elder et al; 2017	Location: San Diego County, California Setting: urban community	Training: 24 hours of training delivered through biweekly meetings over 6 weeks conducted in Spanish	Eligibility Criteria: Hispanic women attending participating Catholic Churches	Outcome Measure: Pap test in last 3 years, MAM in last year, FOBT in last year, colonoscopy and sigmoidoscopy ever How Ascertained: self-reported
Study Design:	Intervention Duration: 12 months	Supervision: NR	Sample Size: 436	Follow-up Time: 12 months

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Study RCT Suitability of Design: Greatest Quality of Execution: Fair	Intervention Details: Type of cancer addressed: BC, CC, CRC Intervention arm: GE + OE + RSB, reducing admin barriers, appointment scheduling GE: 6-week series of classes that cover information about cancer screening recommendations and risk factors OE: up to 2 motivational interviewing calls evaluating barriers to screening RSB, reducing admin barriers: promotoras accompanied participants to cancer screening	Matching to Population: promotoras chosen from community by church leaders Educational Background: NR Payment: \$10 per hour (5-10 hours per week) Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Care coordination, case	Attrition: NR Demographics: Age: 31.9% 18-39; 68.1% 40-65 Gender: 100% female Race/Ethnicity: 100% Hispanic Employment: 65.8% employed Monthly household income: 58.3% <\$2,000 Education: 54.8% <hs 44%="" 48.0%="" baseline="" care:="" established="" group:="" insurance:="" insured="" intervention="" mammography;<="" nr="" of="" screening="" source="" th=""><th>Results: Absolute effectiveness, CHW alone: Up-to-date with MAM:</th></hs>	Results: Absolute effectiveness, CHW alone: Up-to-date with MAM:
	appointments as needed RSB, appointment scheduling: promotoras helped participants schedule appointments Control arm: received physical activity education Intervention Intensity: four 90-120 minutes GE sessions and 2 OE phone calls Targeted or Tailored: tailored; targeted to Hispanic women	management, and system navigation; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components Methods for Interaction with Participates: both	90% Pap test; 15% FOBT; 37% colonoscopy	Change +10pct pts +7pct pts Difference +3pct pts Up-to-date with colonoscopy or sigmoidoscopy: Intervention Control Pre 37% 31% Post 53% 40% Change +16pct pts +9pct pts Difference +7pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Author, Year: Fang et al; 2017 Study Design: RCT Suitability of Design: Greatest Quality of Execution: Fair Signature of the state	Characteristics Location: southeastern Pennsylvania and New Persey Setting: community Intervention Duration: 6 months Intervention Details: Type of cancer addressed: CC Intervention arm: GE+ SM+ RSB, appointment scheduling, translation, child care, transportation GE: one 2hour education session held at church sites; focused on risk factors, screening guidelines and procedures, and possible barriers; information on available ow-cost or free screening sites SM: follow-up reminder etter for screening sent 6 months after GE session RSB, appointment scheduling: offered havigation assistance for screening; most commonly requested appointment scheduling assistance RSB, translation: cranslation services RSB, childcare: childcare arrangements RSB, transportation:	Training: NR Supervision: NR Matching to Population: NR Educational Background: NR Payment: NR Roles Performed: Providing culturally appropriate health education and information; Care coordination, case management, and system navigation; Building individual and community capacity Extent of CHW Involvement: Implemented minor part of intervention Specific Component Implemented by CHW: GE Methods for Interaction with Participates: face-to-face	Eligibility Criteria: Self-identified Korean women age 21 years or older who were not adherent to current Pap test guidelines and had no diagnosis of cervical cancer or other cancer abnormality Sample Size: 705 Attrition: 16.6% Demographics: Mean age: 52.9 Gender: 100% female Race/Ethnicity: 100% Korean Employment: 53.7% employed Income: NR Education: <hs 0.0%<="" 31,7%;="" 48.4%="" 50%="" 59%="" 61.5%="" 9.3%;="" a="" and="" baseline="" care:="" control="" established="" group="" group:="" having="" hs="" in="" insurance:="" insured="" intervention="" of="" physician="" report="" screening="" source="" td="" ≥college=""><td>Outcome Measure: receipt of PAP How Ascertained: self-Report Follow-up Time: 6 Months Results: Absolute effectiveness, CHW in a team</td></hs>	Outcome Measure: receipt of PAP How Ascertained: self-Report Follow-up Time: 6 Months Results: Absolute effectiveness, CHW in a team

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	Control arm: 2-hour education session on general health, cancer education, including tobacco, nutrition, benefits of routine medical checkups; recommended to seek regular preventive health care Intervention Intensity:			
	one 2hour educational session plus follow up letter			
	Targeted or Tailored: targeted to Korean women			
Author, Year: Fernandez et	Location : California, New Mexico, & Texas	Training: program materials consisted of program training	Eligibility Criteria: Hispanic female farmworkers aged 50	Outcome Measure: completed MAM or PAP test within 6 months
al; 2009	Setting: rural community	curriculum and set of teaching tools for LHWs	years and older with no cancer diagnosis, have	How Ascertained : self-reported with verified medical records
Study Design: RCT	Intervention Duration: 2 weeks	Supervision: used process evaluation	farmworker status, and were non-adherent to breast or cervical	Follow-up Time: 6 months
Suitability of Design:	Intervention Details: Type of cancer addressed: BC, CC	measures including LHW encounter forms and randomly selected	cancer screening recommendations	Results: Absolute effectiveness, CHW alone Up-to-date with MAM:
Greatest Quality of	Intervention arm: OE OE: LHWs contacted all	instances of direct observation by supervisor	Sample Size: 464 eligible for MAM; 243 eligible for Pap test	Intervention Control Pre 0% 0% Post 25.6% (53/207) 20.6% (53/257)
Execution: Fair	women to set up one-on- one session in women's homes within 2 months of	Matching to Population: matched on language	Attrition: 30%	Change $+25.6$ pct pts $+20.6$ pct pts Difference $+5$ pct pts $(p>0.05)$
	initial contact; sessions lasted 1-2 hours and consisted of a presentation	Educational Background: NR	Demographics : <i>Age:</i> 48.9% 50-59; 26.9% 60-69; 24.1%	Up-to-date with Pap test: Intervention Control Pre 0% 0%
	and discussion using the Cultivando la Salud materials; used a "tool box"	Payment: NR Roles Performed:	≥70 Gender: 100% female Race/Ethnicity: 100%	Post 24.2% (32/132) 18.9% (21/111) Change +24.2pct pts +18.9pct pts Difference +5.3pct pts (p >0.05)
	which contained bilingual breast and cervical cancer	Cultural mediation among individuals, communities,	Hispanic, primarily Mexican American	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	educational materials including a video, flipchart, breast models, pamphlets, and teaching guide; at the end of each session, LHWs would provide information about local providers of breast and cervical cancer screening; contacted women 2 weeks after session to provide any further assistance that might be needed Control arm: NR but assume usual care Targeted or Tailored: targeted to Hispanic female farmworkers with tailored information	and health and social service systems; Providing culturally appropriate health education and information; Care coordination, case management, and system navigation; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components Methods for Interaction with Participates: faceto-face, remote for follow-up	Employment: NR Income: 71.6% <\$20,000 Education: 92.6% 0- 11 years Insurance: 54.7% Insured Established source of care: NR Baseline screening of intervention group: 0%	
Author, Year: Han et al; 2017	Location: Baltimore, Maryland & Washington, D.C. Metropolitan Area	Training: CHW training differed by group assignment; CHWs in the intervention group	Eligibility Criteria: Korean American women aged 21 to 65, had not had	Outcome Measure: adherence to age- appropriate screening guidelines at 6- month follow-up; MAM or PAP
Study Design:	Setting: urban community Intervention Duration: 6	received 16 hours of training over 3 days, whereas CHWs in the	mammogram (for women 40 and over) or Pap test within past 24	How Ascertained : self-report at baseline and medical record review at follow-up
RCT	months	control group received 5 hours of training in 1 day	months, able to read and write in Korean or	Follow-up Time: 0 months
Suitability of Design:	Intervention Details: Type of cancer addressed:	Supervision: NR	English	Results: Absolute effectiveness, CHW in a team:
Greatest	BC, CC	Matching to Population:	Sample Size: 560	Up-to-date with MAM: Intervention Control
Quality of Execution:	Intervention arm: SM + GE + OE	recruited from 23 ethnic churches	Attrition: 0%	Pre 0% 0% 0% Post 111/198=56.1% 20/201=10.0%

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Fair	SM: individually tailored cancer-screening brochure GE: CHWs delivered health literacy skills training in a 1.5 to 2hr long group meeting OE: CHWs made monthly phone calls to reinforce new skills and knowledge acquired from health literacy training and provide navigation assistance with individually specified barriers over 6-month period Control arm: wait list control group received publicly available educational brochures related to breast and cervical cancer. Intervention Intensity: mailing plus 1 in-person group meeting plus monthly remote individual phone calls Targeted or Tailored: targeted to Korean-American women Tailored: OE	Educational Background: at least High school education Payment: NR Roles Performed: Cultural Mediation among Individuals, Communities, and Health and Social Service Systems; Providing Culturally Appropriate Health Education and Information; Providing Coaching and Social Support; Building Individual and Community Capacity; Conducting Outreach Extent of CHW Involvement: Implemented major part of intervention Specific Component Implemented by CHW: GE, OE Methods for Interaction with Participates: both	Demographics: Mean age: 46.1 Gender: 100% female Race/Ethnicity: 100% Asian (Korean American) Employment: 57.9% employed Income: Reports "very comfortable or comfortable," "just ok," and "uncomfortable" Education: 64.8%>HS Insurance: 37.9% insured Established source of care: 34.5% with primary care provider Baseline screening of intervention group: 0%	Change +56.1pct pts Difference +46.1pct pts Up-to-date with Pap test: Intervention
Author, Year:	Location: San Jose, CA	Training: 2x3hr sessions; trainees learn about	Eligibility Criteria: Organization: 2 NGOs	Outcome Measure: ever had a Pap test at baseline and follow-up
Lam et al; 2003	Setting: urban community	female reproductive anatomy, cervical cancer	who are partners of the	How Accortained, salf report
2003	Intervention Duration: 2	and screening; learn about	program CHWs: each NGO	How Ascertained: self-report
Study Design:	months	evaluation process, recruitment of participants,	recruited 10 CHWs Participants: each CHW	Follow-up Time: 1-2 months
RCT	Intervention Details:	recruitment of participants,	recruited 20 women	Results:

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Suitability of Design: Greatest Quality of Execution: Fair	Type of cancer addressed: CC Intervention arm: GE + RSB, appointment scheduling + MM GE: conducted during MM campaign; groups organized with 3-4 women to participate in 2x90 minutes sessions, or groups of 5-10 women to participate in 2x120-minute sessions; discussing cervical cancer and benefit of Pap test RSB, appointment scheduling: helped some women to schedule Pap tests MM: TV, radio, and newspaper ads in Vietnamese language channels; posters and information booklet distributed in physicians' offices, community forums, CHW sessions, and culture events Control arm: exposed to MM; received delayed intervention Intervention Intensity: 2 sessions, either 90 minutes or 120 minutes per session Targeted or Tailored: targeted to Vietnamese females	giving oral presentations etc. Supervision: NR Matching to Population: yes, Vietnamese-American women, ages 18 or older, shared ethnic background and were from Santa Clara Vietnamese community Educational Background: NR Payment: each CHW paid a \$1,500 Roles Performed: 1, 2, 3, 4, 6, Extent of CHW Involvement: Implemented major part of intervention Specific Component Implemented by CHW: GE + RSB, appointment scheduling Methods for Interaction with Participates: faceto-face	from her social networks; these women randomized into intervention and control groups Sample Size: 400 Attrition: 0% Demographics: Mean age: 43 Gender: 100% female Race/Ethnicity: 100% Vietnamese American Employment: 29.3% employed; 21.5% unemployed; 33.3% homemaker; 12.5% students Income: NR Education: 52.3% with <12yrs Insurance: NR Established source of care: NR Baseline screening of intervention group: 56.5%	Incremental effectiveness, CHW added:

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Author, Year: Luque et al; 2016 Study Design: Pre-post w/ comparison Suitability of Design: Greatest Quality of Execution: Fair		Training: two 6-hour training sessions Supervision: NR Matching to Population: matched on language and recruited from existing outreach programs on diabetes education and domestic violence prevention Educational Background: NR Payment: NR Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented everything	Eligibility Criteria: female, Hispanic immigrants aged 21 to 65 years who had not received a Pap test in past 2 years Sample Size: 90 Attrition: 0% Demographics: Mean age: 39 years Gender: 100% female Race/Ethnicity: 100% Hispanic Employment: 66% employed Median weekly income: \$250-500 Education: mean 9 years of schooling Insurance: 2% insured Established source of care: 42% had regular health care provider Baseline screening of intervention group: 0%	Results Outcome Measure: completed Pap test How Ascertained: self-reported Follow-up Time: 3 months Results: Absolute effectiveness, CHW alone:
		Specific Component Implemented by CHW: all components		

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
		Methods for Interaction with Participates: face-to-face		
Author, Year: Ma et al; 2015 Study Design: RCT Suitability of Design: Greatest Quality of Execution: Fair	Location: US, no state specified Setting: community Intervention Duration: NR Intervention Details: Type of cancer addressed: CC Intervention arm: GE + SM + RSB, appointment scheduling + RSB, translation + RSB, transportation GE: community health educators led small groups and covered information about female body, cervical cancer, risks nationally and in Vietnamese population, and procedures for Pap testing; used visual aids SM: used supplemental visual aids and multimedia cervical cancer education materials in Vietnamese; client-physician communication via videotaping RSB, appointment scheduling: assistance with appointment RSB, translation: language assistance during patient navigation	Training: community health educators were trained but details were not provided Supervision: NR Matching to Population: matched on language Educational Background: NR Payment: NR Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Care coordination, case management, and system navigation, Building individual and community capacity Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components	Eligibility Criteria: self-identified Vietnamese women age 21 to 70 who were non- adherent to Pap test guidelines and had not been diagnosed with cervical cancer Sample Size: 1488 Attrition: 4.8% Demographics: Age: majority over 40 years Gender: 100% female Race/Ethnicity: 100% Vietnamese Employment: 61.7% employed Income: NR Education: 31.9% <hs, 6.7%="" 61.5%="" hs,="">HS Insurance: NR Established source of care: NR Baseline screening of intervention group: 0%</hs,>	How Ascertained: self-reported with medical records validation Follow-up Time: 12 months Results: Absolute effectiveness, CHW alone:

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	RSB, transportation: transportation assistance	Methods for Interaction with Participates: both		
	Control arm: received information for general health issues including mention of routine health exam			
	Intervention Intensity:			
	Targeted or Tailored: targeted to Vietnamese women			
Author, Year: Mock et al;	Location : Santa Clara County, CA	Training: two 3-hour sessions covering procedures and	Eligibility Criteria: Vietnamese-American women aged 18 or	Outcome Measure: up-to-date with Pap test
2007	Setting: urban community	approaches to outreach	older who lived in Santa Clara County	How Ascertained: self-reported
Study Design: RCT	Intervention Duration: 3 to 4 months	Supervision: NR Matching to Population:	Sample Size: 968	Follow-up Time : immediately following intervention
RCI	Intervention Details:	matched on ethnicity	Attrition: 3.7%	Results:
Suitability of	Type of cancer addressed:	materied on etimetey	711111111111111111111111111111111111111	Incremental effectiveness, CHW alone:
Design:	cc	Educational	Demographics:	Intervention Control
Greatest		Background: NR	Mean age: 45.9 years	Pre 45.7% 50.9%
Quality of	Intervention arm: GE + RSB, appointment	Payment: \$1,500 per	Gender: 100% female Race/Ethnicity: 100%	Post 67.3% 55.7% Change +21.6pct pts +4.8pct pts
Execution:	scheduling + MM + SM	CHW	Vietnamese	Difference +16.8pct pts
Fair	GE: two 90-minute sessions		Employment: 26.5%	
	for 3 to 5 women included	Roles Performed:	employed	
	15-20 minutes presentation	Cultural mediation among	Income: NR	
	about cervical cancer and Pap testing	individuals, communities, and health and social	Education: 56.1%<12 years	
	RSB, appointment	service systems; Providing	Insurance: NR	
	scheduling: lay health	culturally appropriate	Established source of	
	workers helped with	health education and	care: NR	
	scheduling appointments MM: 15 ads distributed	information; Care	Baseline screening of	
	through Vietnamese	coordination, case management, and system	intervention group: 45.7%	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	language TV, radio and newspapers SM: Vietnamese-language booklets, silk roses with reminder cards, posters, and reminder calendars were distributed by lay health workers during outreach Control arm: SM + MM (see above) Intervention Intensity: 2 sessions of 90 to 120 minutes plus calls to participants Targeted or Tailored: targeted to Vietnamese women	navigation; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented major part of intervention Specific Component Implemented by CHW: GE, RSB, appointment scheduling Methods for Interaction with Participates: both		
Author, Year:	Location : San Diego County, CA	Training: trained following the consejera manual	Eligibility Criteria: consejeras recruited	Outcome Measure: MAM within past year for women 40 and older; Pap test within
Navarro et al;	County, CA	specifically designed to	women from their social	past year for women 18 and older
1998	Setting: urban community	guide weekly educational sessions	networks	Have Assembliands solf reported
Study	Intervention Duration: 3	Sessions	Sample Size: 512	How Ascertained: self-reported
Design:	months	Supervision: monthly		Follow-up Time: 0 to 3 months
RCT	Total and the Batalla	meetings to identify	Attrition: 28.7%	Bassilia
Suitability of	Intervention Details: Type of cancer addressed:	potential problems, clarify questions, and allow	Demographics:	Results: Absolute effectiveness, CHW alone:
Design:	BC, CC	consejeras to learn from	Mean age: 34 years	Up-to-date with MAM:
Greatest		each other's experiences	Gender: 100% female	Intervention Control
	Intervention arm: GE		Race/Ethnicity: 100%	Pre 30.4% 24.6%
Quality of	GE: consejeras led small-	Matching to Population:	Hispanic	Post 56.4% 43.6%
Execution: Fair	group sessions using culturally appropriate	recruited from community in which they serve	Employment: 12.9% employed	Change +26.0pct pts +19.0pct pts Difference +7.0pct pts
I all	educational materials	in which they serve	Median income:	Difference +7.opec pts
	printed in English and	Educational	12.7%<\$5K, 57.6% \$5-	Up-to-date with Pap test:
	Spanish; sessions included	Background: NR	15K	Intervention Control
	empowerment strategies,			Pre 46.7% 51.6%

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	and social support; child care was provided during all sessions Control arm: participated in equally engaging program entitled "Community Living Skills" Intervention Intensity: 12 in-person 90-minute sessions Targeted or Tailored: targeted to Hispanic women	Payment: NR Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components Methods for Interaction with Participates: faceto-face	Education: 80.3%<12 years Insurance: 37.9% insured Established source of care: 57.6% have regular health care provider Baseline screening of intervention group: 30.4% mammogram; 46.7% Pap test	Post 65.3% 61.1% Change +18.6pct pts +6.5pct pts Difference +9.1pct pts
Author, Year: Nguyen et al; 2006	Location: Santa Clara, CA and Harris County, TX Setting: urban community and clinic	Training: NR Supervision: NR Matching to Population:	Eligibility Criteria: females ≥18 years, resident in either county, self-identified as Vietnamese	Outcome Measure: Pap screening at follow-up How Ascertained: self-report
Study Design: Pre-post w/	Intervention Duration:	recruited from local communities	Sample Size: 1566	Follow-up Time: 0 months Results:
comparison Suitability of	Intervention Details: Type of cancer addressed: CC	Educational Background: NR	Attrition: N/A Demographics:	Absolute effectiveness, CHW in a team: Up-to-date with Pap: Intervention Control
Design: Greatest		Payment: NR	Mean age: 45 Gender: 100% female	Pre 484/746=64.9% 425/718=59.2% Post 673/956=70.4% 496/935=53.1%
		Roles Performed:		Change +5.5pct pts -6.1pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Quality of Execution : Fair	Intervention arm: GE + CR + ROPC + RSB, alternate site + MM + SM GE: over 3 to 4 months, each LHW conducted 2 small group sessions to educate group about pap testing CR: cards on 1-year anniversary to remind women to obtain repeat pap testing ROPC: federal program providing free screening for low-income women RSB, alternate site: weekly clinic staffed by Vietnamese female physician to provide pap tests at discounted rates MM: media campaign ran for 27 months from 2002 to 2004 through Vietnamese-language television, radio, and print media SM: educational materials distributed Control arm: usual care Intervention Intensity: ongoing intervention with intense media campaign but limited in-person interaction with CHW Targeted or Tailored: targeted to Vietnamese American women	Providing culturally appropriate health education and information; Conducting outreach Extent of CHW Involvement: Implemented minor part of intervention Specific Component Implemented by CHW: GE Methods for Interaction with Participates: faceto-face	Race/Ethnicity: 100% Vietnamese American Employment: 58.5% employed Income: 24.5% below poverty level Education: 42.0% <high 64.1%="" 64.9%<="" 93%="" baseline="" care="" care:="" established="" group:="" insurance:="" insured="" intervention="" of="" regular="" school="" screening="" source="" td="" with=""><td>Difference +11.6pct pts</td></high>	Difference +11.6pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Author, Year: Nuno et al; 2011 Study Design: Pre- post only; RCT by design, but data could only be used as pre-post Suitability of Design: Least Quality of Execution: Fair	Location: Yuma County, AZ (US-Mexican border community) Setting: rural community Intervention Duration: 1 year Intervention Details: Type of cancer addressed: BC, CC	Training: 5 training modules were conducted in Spanish (per trainee preference) by study coordinator to train 4 promotoras; each training module was approximately 2 h in length Supervision: supervised by experience field staff to assure the fidelity and completeness of the structured scripted interviews and the intervention Matching to Population: lived in communities Educational Background: NR Payment: NR Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Providing coaching and social support; Building individual and community capacity Extent of CHW Involvement: Implemented everything	Eligibility Criteria: Hispanic women 50 years of age or older, residents in a rural county along the U.S Mexico border, selected from census tracts with majority Hispanic population Sample Size: 371 Attrition: 2.6% Demographics: Mean age: 60.3 Gender: 100% female Race/Ethnicity: 100% Hispanic Employment: 11% employed Income: \$914 monthly Education: 53% <elementary 48%<="" 82%="" 86%="" 92%="" baseline="" care="" care:="" care;="" established="" group:="" has="" health="" insurance:="" insured="" intervention="" medical="" of="" past="" professional="" regular="" screening="" source="" td="" visited="" within="" year=""><td>Outcome Measure: MAM screening within 1 year at follow-up Pap test within 2 years at follow-up How Ascertained: self-reported; confirmed by medical records for 65% and 46% of MAM and Pap smears Follow-up Time: all follow-up assessment was completed by Dec 2006; but unsure the duration from end of education to assessment Results: Absolute effectiveness, CHW alone Up-to-date with MAM: Pre: 48% Post: 73% Change: +25pct pts Up-to-date with Pap test: Pre: 52% Post: 67% Change: +15pct pts</td></elementary>	Outcome Measure: MAM screening within 1 year at follow-up Pap test within 2 years at follow-up How Ascertained: self-reported; confirmed by medical records for 65% and 46% of MAM and Pap smears Follow-up Time: all follow-up assessment was completed by Dec 2006; but unsure the duration from end of education to assessment Results: Absolute effectiveness, CHW alone Up-to-date with MAM: Pre: 48% Post: 73% Change: +25pct pts Up-to-date with Pap test: Pre: 52% Post: 67% Change: +15pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
		Specific Component Implemented by CHW: all components		
		Methods for Interaction with Participates: face-to-face		
Author, Year: O'Brien et al; 2010 Study Design: RCT Suitability of Design: Greatest Quality of Execution: Fair	Location: South Philadelphia, PA Setting: urban community Intervention Duration: several rounds of intervention delivered, 4 months in total; for each participant, 6 hours of materials Intervention Details: Type of cancer addressed: CC Intervention arm: GE GE: 2 3hr workshops with 4 to 10 women in each group, led by 2 promotoras; a copy of the curriculum, plus other program materials including pamphlets from the ACS and HHS Control arm: usual care; received intervention after completion of follow-up	Training: authors stated would try but no detail provided Supervision: principal investigator and study coordinator randomly observed 20% of the workshop sessions Matching to Population: yes Educational Background: NR Payment: NR Roles Performed: Providing culturally appropriate health education and information; Building individual and community capacity Extent of CHW Involvement: Implemented everything	Eligibility Criteria: Hispanic women aged 18 to 65; recruitment took place at local faith- based and community- based organizations, the Philadelphia Mexican Consulate, and the participants' homes Sample Size: 120 Attrition: 42% Demographics: Mean age: 32 Gender: 100% female Race/Ethnicity: 100% Hispanic Employment: 41% employed Income: NR Education: 43%<8 years of education, 43% with 8-12 years of education, 13%>12 years of education Insurance: 8% insured	Outcome Measure: Pap receipt within the follow-up period How Ascertained: self-report verified by chart review for 83% of the participants Follow-up Time: 6 months Results: Absolute effectiveness, CHW alone: Up-to-date with Pap test: Intervention, post: 36.7% Control, post: 21.7% Difference: +15.0pct pts
	evaluation Intervention Intensity: each session 3 hours long, 2 sessions, delivered in	Specific Component Implemented by CHW: all components	Established source of care: NR Baseline screening of intervention group: N/A	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	several rounds over a 4- month period	Methods for Interaction with Participates: face-to-face		
	Targeted or Tailored: targeted to Hispanic females	to race		
Author, Year:	Location: North Carolina	Training: NR	Eligibility Criteria: women age 40 and	Outcome Measure: compliance with MAM and Pap test
Paskett et al; 1999	Setting : urban community and clinic	Supervision: project manager monitored	older, residing in low- income housing	How Ascertained: self-report in in-person
Study	Intervention Duration:	delivery of intervention components through	communities	survey
Design : RCT	2.5 years	weekly reports, observations of classes,	Sample Size: 248	Follow-up Time: 0 month
Suitability of	Intervention Details: Type of cancer addressed:	and process evaluation measures	Attrition: N/A	Results: Absolute effectiveness, CHW in a team:
Design : Greatest	BC, CC	Matching to Population:	Demographics: Age: 43.5% 40-64, 56.5% 65+	Up-to-date with Pap test: Intervention Control
Quality of Execution:	Intervention arm: GE + SM + MM + OE + PR GE: "Women's Fest" was a	NR Educational	Gender: 100% female Race/Ethnicity: 100%	Pre 73% 67% Post 87% 60% Change +14pct pts -7pct pts
Fair	free party that included food, educational classes,	Background: NR	African American Employment: 25%	Difference +21pct pts (p=0.004)
	prizes, and information booths; monthly classes in	Payment: NR	employed Income: NR	Up-to-date with MAM Intervention Control
	each housing community conducted by a lay health educator	Roles Performed: Cultural mediation among individuals, communities,	Education: 39.9%≤ 8 TH grade Insurance: NR	Pre 31% 33% Post 56% 40% Change +25pct pts +7pct pts
	SM: educational brochures; targeted mailings and door knob hangers with	and health and social service systems; Providing culturally appropriate	Established source of care: 99% of intervention group	Difference +18pct pts (p=0.04)
	invitations to events; poster and literature distribution in	health education and information; Providing	reported regular examinations at	
	clinic waiting rooms. MM: public bus ads, newspaper and radio ads on	coaching and social support; Building individual and community	baseline compared to 90% of control group Baseline screening of	
	African-American media. OE: educational sessions in	capacity	intervention group: 31% MAM, 73% PAP	
	women's homes	Extent of CHW Involvement:		

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	PR: visual prompts in exam rooms ("Have you screened today?") Control arm: control community received successful interventions after follow-up surveys were completed Intervention Intensity: does not report on how many GE/OE sessions were provided but intervention was multi-component and included community-based and clinic-based components Targeted or Tailored: targeted to low-income, predominantly African American community	Implemented minor part of intervention Specific Component Implemented by CHW: GE, maybe OE Methods for Interaction with Participates: faceto-face		
Author, Year: Paskett et al; 2011 Study Design: RCT Suitability of Design: Greatest Quality of Execution: Fair	Location: Appalachian, Ohio Setting: rural community and clinic Intervention Duration: 10 months Intervention Details: Type of cancer addressed: CC Intervention arm: OE + SM OE: 2, 45-60 minutes inperson visits and 2 telephone calls; provided information to increase	Training: yes, details not provided Supervision: observed by study coordinators in the field Matching to Population: women were recruited from local communities between 40-50 years old Educational Background: no post-secondary education Payment: NR	Eligibility Criteria: females 18 years or older, not pregnant, resident of Ohio Appalachia; seen by a physician in clinic from which they were selected within previous 2 years, no history of invasive CC or hysterectomy; recruited from 14 separate health clinics in Ohio Appalachia Sample Size: 280 Attrition: 3.6%	Outcome Measure: pap test How Ascertained: medical records Follow-up Time: 2 months Results: Absolute effectiveness, CHW alone: Up-to-date with Pap test

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	knowledge about cervical cancer, pap test screening, and importance of follow-up after an abnormal test; individualized counseling for reported barriers; telephone calls occurred 1 and 5 months later; second inperson visit occurred 10 months after first and LHA provided additional barriers counseling and encouraged participant to continue to be proactive about health care SM: 4 postcards mailed 2, 3, 6, and 7 months after initial visit Control arm: usual care; received a letter from physician and NCI brochure encouraging them to have a pap test Intervention Intensity: 2 in-person visits + 2 phone calls + 4 postcards Targeted or Tailored: targeted to rural Appalachian population with tailored counseling	Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components Methods for Interaction with Participates: both	Demographics: Mean age: 43.7 Gender: 100% female Race/Ethnicity: 95.4% white Employment: 59.3% employed, 15.7% unemployed or disabled Income: 37.4%<\$20K, 37.4% \$20-50K, 25.2%≥\$50K Education: 7.1% <high 0%<="" 2="" 40.7%="" 82.1%="" all="" baseline="" by="" care:="" established="" group:="" high="" in="" insurance:="" insured="" intervention="" of="" physician="" previous="" school="" school,="" screening="" seen="" source="" td="" years="" yes,=""><td></td></high>	
Author, Year: Studts et al; 2012 Study	Location: Appalachia, Kentucky Setting: rural community (churches)	Training: trained by the study team about CC, Pap tests, local resources, and screening determinants; 3 training sessions on	Eligibility Criteria: 40–64 years old, speaking English, and being outside American Cancer Society	Outcome Measure: Pap test at follow-up How Ascertained: self-report Follow-up Time: 3 months
Design: RCT Suitability of Design: Greatest	Intervention Duration: NR Intervention Details:	human subject's protection, home visit procedures, and addressing participants' identified barriers	guidelines at time for CC screening Sample Size: 345	Results: Incremental effectiveness, CHW added: Up-to-date with Pap: Intervention Control

Study	Intervention Characteristics	Intervention Deliverer	Population	Results	
Quality of Execution: Fair	Type of cancer addressed: CC Intervention arm: GE + OE GE: all participants received an educational lunch program at the church, at which local project staff delivered information on cervical cancer screening and prevention OE: home visits were designed to last approximately 2 hours. The LHA provided information about cervical cancer and Pap tests, then addressed each of the participant's identified barriers to screening Control arm: GE (same as above) Intervention Intensity: 1 group session + 1 home visit Targeted or Tailored: tailored content	Supervision: CHWs received feedback from the project team throughout the study and were retrained as necessary Matching to Population: recruited from local communities Educational Background: NR Payment: NR Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented major part of intervention Specific Component Implemented by CHW: OE Methods for Interaction with Participates: face- to-face	Attrition : 2.9% Demographics : <i>Age</i> : 20.0% 40-44, 20.0% 45-49, 23.8% 50-54, 22.9% 55-59, 13.3% 60-69 <i>Gender</i> : 100% female <i>Race/Ethnicity</i> : 95.1% white; 4.6% African American <i>Employment</i> : 49.9% employed <i>Income</i> : 24.6%<\$10K, 30.7% \$10-30K, 19.1%>\$30K, 25.5% NR <i>Education</i> : 25.7% <high 11.7%≥college="" 23.1%="" <i="" college,="" ged,="" grad="" school="" some="">Insurance: 40.3% private, 27.5% public, 32.2% none <i>Established source of care</i>: NR <i>Baseline screening of intervention group</i>: 0%</high>	Pre 0% Post 31/176=17.6% Change +17.6pct pts Difference +6.4pct pts	0% 19/169=11.2% +11.2pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Author,	Location : Atlanta, GA	Training: CHWs were	Eligibility Criteria:	Outcome Measure: MAM and Pap at
Year : Sung		provided with 10 weeks of	black women≥18, no	follow-up
et al; 1997	Setting : urban community	training in interviewing	history of cancer,	
		and health education	hysterectomy, or breast	How Ascertained : self-report follow-up up
Study	Intervention Duration:	topics at the Morehouse	surgery; recruitment	by medical records
Design: RCT	11 months	School of Medicine	efforts focused on	
			women≥35 who are	Follow-up Time: 6 months
Suitability of	Intervention Details:	Supervision: biweekly	less likely to have been	B lt
Design:	Type of cancer addressed:	meetings were held to	screened and more	Results:
Greatest	BC, CC	ensure that CHWs were conducting their tasks in a	likely to develop cancer	Absolute effectiveness, CHW alone: Up-to-date with MAM
Quality of	Intervention arm: OE	similar manner and to	Sample Size: 321	Intervention Control
Execution:	OE: two 90 min educational	address new training	Sample Size. 321	Pre 35.5% 34.3%
Fair	sessions held 1 month apart	issues and topics	Attrition: 39.3%	Post 50.4% 39.4%
ı an	at the home of subject;	issues and topics	Accircion: 33.370	Change +14.9pct pts +5.1pct pts
	booster session was	Matching to Population:	Demographics:	Difference +9.8pct pts
	scheduled about 2 months	recruited from local	Age: 13.4% 18-34,	Sincrence 1 stopes pts
	after 2 nd session for	communities	45.2% 35-44, 23.4%	Up-to-date with Pap test:
	purpose of review and		45-59, 18.1% 60-97	Intervention Control
	reinforcement; included the	Educational	Gender: 100% female	Pre 50.3% 51.9%
	interpretation, referral, and	Background: NR	Race/Ethnicity: 100%	Post 58.7% 62.1%
	follow-up concerning any		African American	Change +8.4pct pts +10.2pct pts
	abnormal Pap smear or	Payment: NR	Employment: 51.1%	Difference -1.8pct pts
	mammogram results		employed	
		Roles Performed:	Income:	
	Control arm: members of	Cultural mediation among	46.7% <u><</u> \$15,000,	
	control group received	individuals, communities,	31.8%>\$15,000,	
	educational materials on	and health and social	21.5% NR	
	cancer screening after the	service systems; Providing	Education: 32.4%<11	
	completion of the follow-up	culturally appropriate	years of education,	
	interview	health education and	28.0% 12 years of education, 39.6%>12	
	Intervention Intensity: 2	information; Care coordination, case	years of education	
	sessions	management, and system	Insurance: NR	
	303310113	navigation; Providing	Established source of	
	Targeted or Tailored:	coaching and social	care: 17.1% recruited	
	targeted to African	support; Building	from West End Medical	
	American females with	individual and community	Center	
	tailored information	capacity; Conducting	Baseline screening of	
		outreach	intervention group:	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
		Extent of CHW Involvement: Implemented everything	35.5% MAM, 50.3% Pap	
		Specific Component Implemented by CHW: all components		
		Methods for Interaction with Participates: face-to-face		
	Location: Seattle,	Training: NR	Eligibility Criteria:	Outcome Measure: Pap at follow-up
et al; 2002a	Washington, US and Vancouver, British Columbia, Canada.	Supervision: NR	women who completed the baseline survey, 20–69 years of age,	How Ascertained: self-report attempted to verify with medical records
Study Design: RCT	Setting: urban community	Matching to Population: matched on race and language	spoke Cantonese, Mandarin, or English; had no history of	Follow-up Time: 6 months
	Intervention Duration: 1		invasive cervical cancer,	Results:
Greatest	month	Educational background: NR	had not received a hysterectomy, and were	Absolute effectiveness, CHW in a team: Up-to-date with Pap test:
	Intervention Details: Type of cancer addressed:	Payment: NR	under utilizers of cervical cancer	Intervention Control Pre 21/161=13.0% 17/160=10.6%
Execution:	CC	rayment. WK	screening	Post 123/161=76.4% 70/160=43.8%
Fair	Intervention arm: CR + OE	Roles Performed: Cultural mediation among	Sample Size: 321	Change +63.4pct pts +33.1pct pts Difference +30.2pct pts
	+ RSB, appointment scheduling, transportation,	individuals, communities, and health and social	Attrition: 18.1%	
	translation	service systems; Providing	_	
	CR: received Chinese and English versions of an	culturally appropriate health education and	Demographics : Age: majority 45 or	
	introductory letter	information: Care	older	
	OE: within 3 weeks, visited	coordination, case	Gender: 100% female	
	at home by Chinese female	management, and system	Race/Ethnicity: 100%	
	outreach worker; women who refused home visit	navigation; Building individual and community	Chinese Employment: NR	
	were offered educational	capacity; Conducting	Income: NR	
	materials; 10 attempts	outreach	Education: 44% high	
	made to contact each	Fortage of CUPA	school graduates	
	woman; culturally and linguistically appropriate	Extent of CHW Involvement:	Insurance: universal coverage	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	video, motivational pamphlet and fact sheets RSB, appointment scheduling: assistance provided RSB, translation: medical interpreter services during clinic visits RSB, transportation: assistance provided (i.e., taxicab transportation to and from clinic appointments or 2 bus passes) Control arm: usual care Intervention Intensity: 1 session Targeted or Tailored: targeted to Chinese American women with tailored content	Implemented major part of intervention Specific Component Implemented by CHW: OE, RSB, appointment scheduling, transportation, translation Methods for Interaction with Participates: faceto-face and remote	Established source of care: NR Baseline screening of intervention group: 13.0%	
Author, Year: Taylor	Location: Seattle, WA	Training: yes, but no details provided	Eligibility Criteria: women participated in	Outcome Measure: Pap test at follow-up
et al; 2002b	Setting: urban community Intervention Duration:	Supervision: NR	survey of Cambodian American women aged 18 and older that was	How Ascertained: self-reported with medical record verification
Study Design: RCT	NR	Matching to Population: bicultural and bilingual	conducted in the Seattle areas with high	Follow-up Time: 12 months
Suitability of Design: Greatest	Intervention Details: Type of cancer addressed: CC	females Educational Background: NR	concentrations of Cambodian Americans; no history of invasive cervical cancer and/or	Results: Absolute effectiveness, CHW in a team: Up-to-date with Pap test: Intervention Control
Quality of Execution: Fair	Intervention arm: SM + OE(SM) + GE(SM) + RSB, appointment scheduling, reducing admin barriers, transportation SM: introductory mailing	Payment: NR Roles Performed: Cultural mediation among individuals, communities,	previous hysterectomy; no previous participation in an early qualitative study about cervical cancer; must live in close proximity	Pre 64/144=44.4% 74/145=51.0% Post 87/144=60.4% 90/145=62.1% Change +16.0pct pts +11.1pct pts Difference +4.9pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	OE: home visits between 1 and 4 weeks after introductory mailing; bicultural, bilingual female outreach worker visited women at home and conducted educational visit using visual aids and provided tailored responses to each woman's individual barriers GE: meetings at local community centers; outreach workers made short presentations about cervical cancer and Pap testing using visual aids RSB, appointment scheduling: provided clinic referral and assistance with appointment scheduling RSB, reducing admin barriers: medical interpretation during clinic visits RSB, transportation: assistance such as taxicab transportation to and from clinic appointments or 2 bus passes Control arm: usual care Intervention Intensity: 1 home visit + 1 group session Targeted or Tailored: targeted to Cambodian American women with tailored content	and health and social service systems; Providing culturally appropriate health education and information; Care coordination, case management, and system navigation; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented major part of intervention Specific Component Implemented by CHW: OE, GE, RSB appointment scheduling, reducing admin barriers, transportation Methods for Interaction with Participates: faceto-face	to other respondents in order to be assigned to a neighborhood group Sample Size: 289 Attrition: 22% Demographics: Age: 33% 18-39, 47% 40-59, 19% 60+ Gender: 100% female Race/Ethnicity: 100% Cambodian American Employment: NR Income: 61% public housing Education: 54% had any formal education Insurance: NR Established source of care: NR, but majority in area received health care at county hospital or community clinic Baseline screening of intervention group: 44.4%	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Author, Year: Taylor et al; 2010 Study Design: RCT Suitability of Design: Greatest Quality of Execution: Fair	Location: Seattle, WA Setting: urban community Intervention Duration: 1 month Intervention Details: Type of cancer addressed: CC Intervention arm: OE OE: CHW made up to 11 attempts to complete a home visit; women refused a home visit were offered educational materials; if CHW was unable to contact a participant, educational materials mailed to home During home visit, CHW watched Vietnamese- language DVD with participant; follow-up calls with participants 1 month after home visit completion All study materials translated into Vietnamese by standard methods; culturally and linguistically appropriate materials developed for intervention Control arm: a mailing of physical activity print materials, pedometer with instructions for use Intervention Intensity: 1 home visit	Training: trained to act as role models, given social support, and provide tailored responses to each woman's individual barriers to Pap testing Supervision: NR Matching to Population: fluently bilingual ethnic Vietnamese women who had grown up in Vietnam and were conversant with Vietnamese culture, married with children to ease the discussion of reproductive concerns Educational Background: NR Payment: NR Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Care coordination, case management, and system navigation; Building individual and community capacity Extent of CHW Involvement: Implemented everything	Eligibility Criteria: women participated in a community-based survey, of Vietnamese descent, aged 20 to 79 years, able to speak Vietnamese or English, not up-to-date on cervical cancer screening Sample Size: 234 Attrition: 26% Demographics: Age: 44.9%<50, 54.3%≥50 Gender: 100% female Race/Ethnicity: 100% Asian Employment: NR Income: NR Education: 52.6%<12 years of education, 47.4%≥12 years of education Insurance: NR Established source of care: NR Baseline screening of intervention group: 0%	Outcome Measure: Pap test at follow-up How Ascertained: self-report and verified Follow-up Time: NR but within 6 months of randomization Results: Absolute effectiveness, CHW alone: Up-to-date with Pap test:

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	Targeted or Tailored: targeted to Vietnamese American women with tailored content	Specific Component Implemented by CHW: all components Methods for Interaction with Participates: face- to-face and remote		
Author, Year: Thompson et al; 2017	Location: Lower Yakima Valley, WA Setting: rural community	Training: initial training of 3 days; no other details Supervision: NR	Eligibility Criteria: Latinas aged 21 to 64 who were non-adherent to Pap test screening	Outcome Measure: Pap test at follow-up How Ascertained: medical records
Study Design: RCT	Intervention Duration: 1 home visit and follow-up call 2 weeks	Matching to Population: recruited from community	guidelines, being seen by one of the federally qualified health center clinics in the past 5	Results: Absolute effectiveness, CHW alone:
Suitability of Design: Greatest	Intervention Details: Type of cancer addressed: CC	Educational Background: NR Payment: NR	years, not up-to-date, not having a prior hysterectomy	Up-to-date with Pap test: Control Intervention 0% Pre 0% 0% Post 78/146=53.4% 50/147=34.0%
Quality of Execution: Good	Intervention arm: OE + RSB, appointment scheduling + CR OE: promotora-led educational session in participant's home; watching video together, making a commitment to have a Pap test, and/or make an appointment for a Pap test; address relevant issues; provided a sheet of local resource RSB, appointment scheduling: during the OE session, promotora make an appointment for a Pap test if needed CR: women who were not ready to schedule a Pap test, promotora will call in 2	Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing culturally appropriate health education and information; Care coordination, case management, and system navigation; Providing coaching and social support; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented everything	Attrition: 10.2% Demographics: Mean age: 43.9 Gender: 100% female Race/Ethnicity: 100% Hispanic Employment: NR Income: NR Education: 66.6% <high 26.6%="" 6.5%="" grad,="" high="" school="" school,="">high school Insurance: 24.9% currently insured, 55.6% previously insured, 17.4% never insured Established source of care: 100%, all seen by</high>	Change +54.3pct pts +34.0pct pts Difference +19.4pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	weeks to review action steps, and assess readiness to schedule a test Control arm: usual care Intervention Intensity: 1 home visit with follow-up call Targeted or Tailored: targeted to Latinas with	Specific Component Implemented by CHW: all components Methods for Interaction with Participates: face- to-face and remote	one of the FQHC within past 5 years Baseline screening of intervention group: 0%	
	tailor materials			
Author, Year: Wang	Location: New York City, NY	Training: yes, but no detail provided	Eligibility Criteria: Chinese women	Outcome Measure: PAP test at follow-up
et al; 2010	Setting: urban community	Supervision: NR	recruited from 4 Asian community-based	How Ascertained : self-report and verified by records
Study Design:	Intervention Duration: 2	Matching to Population:	organizations; each located in a Chinese	Follow-up Time: 12 months
Pre-post w/ comparison	sessions	matched on race	community and serves predominantly low-	Results:
	Intervention Details:	Educational	income, uninsured, and	Absolute effectiveness, CHW alone:
Suitability of	Type of cancer addressed:	Background: NR	recent immigrant	Up-to-date for Pap test:
Design : Greatest	CC	Payment: NR	population Exclusion criteria	Intervention Control Pre 0% 0%
Greatest	Intervention arm: GE + SM	Payment. NK	included <18 years of	Post 56/80=70.0% 6/54=11.1%
Quality of Execution: Fair	+ RSB, appointment scheduling, translation, transportation GE: 2 small group education sessions	Roles Performed: Cultural mediation among individuals, communities, and health and social service systems; Providing	age, a current diagnosis of cervical cancer, and a Pap test within the past 12 months	Change +70.0pct pts +11.1pct pts Difference +58.9pct pts
	conducted by trained	culturally appropriate	Sample Size: 134	
	Chinese CHWs to increase knowledge and enhance attitudes towards CC	health education and information; Care coordination, case	Attrition: 6.7%	
	screening	management, and system	Demographics:	
	SM: handouts on CC and the Pap test and a Chinese- language video	navigation; Providing coaching and social support; Building	Mean age: 54.6 Gender: 100% female Race/Ethnicity: 100%	
	RSB, appointment scheduling: patient	individual and community capacity	Chinese American Employment: NR	

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
	navigation assistance in arranging Pap test appointments RSB, translation: language translation services available upon request RSB, transportation: transportation assistance provided upon request Control arm: health education sessions on general health and cancer education, including tobacco, nutrition, regular medical checkups, and cancer screening (e.g., cervical, breast, and coloncancer screening); also written materials on general health and cancer screening Intervention Intensity: 2 sessions Targeted or Tailored: targeted Chinese Americans with tailored content	Extent of CHW Involvement: Implemented everything Specific Component Implemented by CHW: all components Methods for Interaction with Participates: face- to-face	Income: NR Education: 40.0%<11 years of education, 34.5% with 12 years of education, 25.6% 12+ years of education Insurance: 61.8% insured Established source of care: 55.1% had a regular doctor Baseline screening of intervention group: 0%	
Author, Year: White et al; 2012	Location: Birmingham, AL Setting: urban community	Training: NR Supervision: NR	Eligibility Criteria: Latina in community recruited by CHWs from	Outcome Measure: PAP and MAM at follow-up
Study	Intervention Duration: 1	Matching to Population:	local churches and flyers in the	How Ascertained: clinical records
Design : Pre-post only	session	recruited from local communities	community; local Spanish newspapers	Follow-up Time: NR
	Intervention Details:		and a local Spanish	Results:
Suitability of Design: Least	Type of cancer addressed: BC, CC	Educational Background: NR	radio station advertised events	Absolute effectiveness, CHW in a team: Up-to-date with Pap test: Pre: 39.6%
		Payment: NR	Sample Size: 782	Post: 52.4% Change: +12.9pct pts

Study	Intervention Characteristics	Intervention Deliverer	Population	Results
Quality of Execution: Fair	Intervention arm: GE + ROPC + RSB, appointment scheduling GE: educational lunches in churches conducted on Saturdays; Spanish- speaking Latino physician was invited to give an educational talk, and a Latina breast cancer survivor provided her testimonial regarding the importance of cancer screening ROPC: Pap smears offered at low cost (\$25.00), and MAM provided at no cost to participants age 40 years or over RSB, appointment scheduling: women had opportunity to schedule pap or mam appointment during GE events Control arm: baseline Intervention Intensity: 1 session Targeted or Tailored: targeted to Latinas	Roles Performed: Care coordination, case management, and system navigation; Building individual and community capacity; Conducting outreach Extent of CHW Involvement: Implemented minor part of intervention Specific Component Implemented by CHW: RSB, appointment scheduling Methods for Interaction with Participates: face- to-face	Attrition: N/A Demographics: Age: 70.7% 19-39, 19.4% 40-49, 9.9% 50-88 Gender: 100% female Race/Ethnicity: 100% Hispanic Employment: NR Income: NR, but low income Education: 60.5% <high 17.0%="" 35.7%≥high="" 39.6%="" 53.3%="" 6.8%="" baseline="" care="" care:="" established="" group:="" insurance:="" insured="" intervention="" mam<="" of="" pap="" regular="" school="" school;="" screening="" source="" td="" with=""><td>Up-to-date with MAM: Pre: 17.0% Post: 61.5% Change: +44.6pct pts</td></high>	Up-to-date with MAM: Pre: 17.0% Post: 61.5% Change: +44.6pct pts