



Unity 2009 Presentation Abstract Proposal
Community Health Workers Celebrating Our Past and Charting the Future

Contact Person
Name:
Title:
Organization:
Address:
Phone:
Fax:
Email:

Co-Presenters (please list names, if applicable)

1. _____
2. _____

Please select 1 desired presentation format:
 Workshop Poster Roundtable

Time Needed for Presentation: _____

Presentation Title: _____

(Please select 1 category for presentation abstract consideration)

- Issues related to certification, education and/or training CHWs
- New and emerging roles for CHWs
- Shaping policy and practice of CHWs (including advocacy and sustainability efforts)
- Innovative methods in reaching vulnerable populations
- CHW impacting chronic diseases and conditions
- Professional Development Skills for CHWs
- Other (please explain) _____

Learning Objectives:

1. _____
2. _____

Is the presentation proposed dependant upon CHW travel assistance? Yes No

Please provide a description of presentation content in the box provided. **(Maximum 350 words)**