

Introduction to Community Health Workers in HIV Care



OBJECTIVES

At the end of this unit, participants will be able to:

- Describe how Community Health Workers (CHWs) can fit into the HIV care continuum, within the context of the national CHW movement
- Identify CHW roles



INSTRUCTIONS

- Before the session begins, print or draw a poster of the HIV care continuum and distribute post-it notes and markers. If you don't have access to Microsoft PowerPoint, write the components of the HIV care continuum on a flipchart.
- Welcome participants to the session. Have presenters and participants share their names, the organization they represent, their role, and one fun fact about themselves.
- Review the unit objectives.
- Review the components of the HIV care continuum slide (or flipchart).
- Facilitate a Think-Pair-Share activity (slide 4): Share the handouts on C3 roles. Ask participants to review the C3 roles that they might do as a CHW and a concrete activity they could do with a person living with HIV/AIDS or in the community to improve the outcomes at each stage. For example:
 - Ask, "What are things that you do that might help people learn their HIV status?"
 - Ask, "What are some tasks that you could work with a person living with HIV individually to achieve the goals of the care continuum?"
- Ask participants to write 3–5 tasks on sticky notes that CHWs could improve the HIV Care Continuum outcomes.
- Have volunteers place their sticky notes on the care continuum.
- Ask for volunteers to share their CHW role and tasks to achieve the outcomes.
 - Ask, "What are some roles that a CHW could do within the HIV care team and your staff in your agency to work on the care continuum?"
 - Ask, "What are key roles for you as a CHW on the community level to impact the HIV Care Continuum?"
- Write responses on a flipchart.
- Ask, "How do roles and skills relate to HIV care continuum in your region?" Did we miss any key tasks?
- Wrap up. Show final slide 6 with suggestions for how CHWs can learn about HIV services and activities in their region and state. Refer to C3 Roles handout, and close the session with any questions and thank everyone for their participation.



Related C3 Roles

Advocating for individuals and communities, conducting outreach

Related C3 Skills

Advocacy skills, outreach skills, professional skills and conduct



Method(s) of Instruction

Brief presentation, interactive activity and discussion



Estimated time

15 minutes



Key Concepts

HIV care continuum, C3 roles, C3 skills



Materials

- Identify CHW roles
- Computer with internet access and projector (optional)
- PowerPoint slides (optional)
- Flipchart with components of the HIV care continuum
- Markers
- Post-it notes
- Poster: HIV care continuum diagram

Handouts

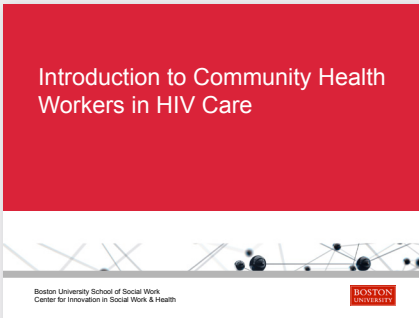
- C3 Project: CHW Roles and Sub-Roles
- C3 Project: Skills and Sub-Skills
- HIV Care Continuum



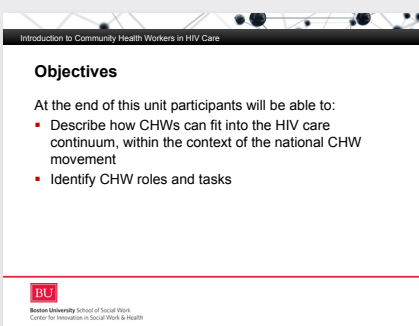
Resources

- Report: Understanding Scope and Competencies: A Contemporary Look at the United States Community Health Worker Field <https://sph.uth.edu/dotAsset/28044e61-fb10-41a2-bf3b-07efa4fe56ae.pdf>
- HIV care continuum: <https://www.hiv.gov/federal-response/policies-issues/hiv-aids-care-continuum>

Introduction to Community Health Workers in HIV Care



SLIDE 1



SLIDE 2

Review objectives.



SLIDE 3

Review the diagram. The HIV care continuum follows a person from the time they are first diagnosed to achieving viral suppression (a very low level of HIV in the body). However researchers observed that in order for people with HIV to benefit from the available treatment, a person must first know their diagnosis, engage in HIV medical care and see a prescribing health care provider regularly, and receive and adhere to antiretroviral therapy. Many people do not make it through all these stages due to several obstacles. Ask participants: “Why might people not complete the steps of the HIV Care Continuum?”

CHW can play a role in each step of the continuum and reduce the gaps in each stage of the continuum. For example, CHWs can provide health information, conduct testing, and refer clients to a health provider and other resources.

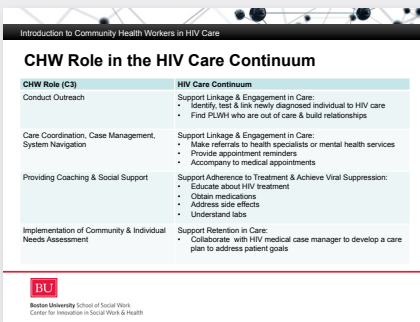
Introduction to Community Health Workers in HIV Care



SLIDE 4

Think-pair-share activity

- Ask participants to review the handouts, paying particular attention to the C3 roles they might do as a community health worker.
- Have participants pair up to discuss a concrete activity they could do with a person with HIV to improve outcomes at each stage. For example, what are things that you can do to help people learn their HIV status?
- Ask participants to write on post-it notes 3–5 tasks that could improve HIV care continuum outcomes.
- Ask volunteers to share their CHW roles and tasks to achieve the outcomes.
- Discuss: Did we miss any key tasks?
- Show the next slide and refer to C3 roles.



SLIDE 5

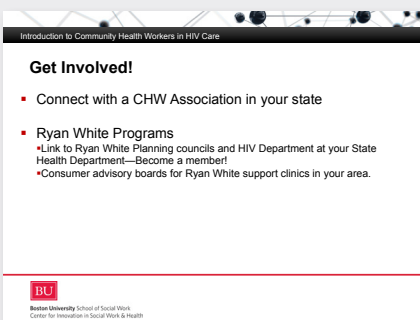
Review CHW roles in the HIV care continuum listed on the slide.

Resume activity:

- Have participants place their post-it notes on the appropriate stage on the care continuum poster.

Discussion:

- Ask, "What are some one-on-one tasks that you could do with a person with HIV to achieve the goals of the care continuum?"
- Ask, "What are some roles for you as CHW on the HIV care team in your agency, within the care continuum?"
- Ask, "What are key roles for you as a CHW at the community level to impact the HIV care continuum?"
- Ask, "How do roles and skills relate to the HIV care continuum in your region?"
- Open discussion for other questions and answers.



SLIDE 6

Share information about how CHWs can learn about HIV/AIDS services in their community by connecting to their State Health Department or local Ryan White Planning Council.

HIV Care Continuum

HIV CARE CONTINUUM:

THE SERIES OF
STEPS A PERSON
WITH HIV TAKES
FROM INITIAL
DIAGNOSIS
THROUGH THEIR
SUCCESSFUL
TREATMENT WITH
HIV MEDICATION



CHW Core Consensus (C3) Project: CHW Roles and Sub-Roles

	Role	Sub-Roles
1	Cultural Mediation among Individuals, Communities, and Health and Social Service Systems	<ul style="list-style-type: none"> a. Educating individuals and communities about how to use health and social service systems (including understanding how systems operate) b. Education systems about community perspectives and cultural norms (including supporting implementation of Culturally and Linguistically Appropriate Services [CLAS] standards) c. Building health literacy and cross-cultural communication
2	Providing Culturally Appropriate Health Education and Information	<ul style="list-style-type: none"> a. Conducting health promotion and disease prevention education in a manner that matched linguistic and cultural needs of participants or community b. Providing necessary information to understand and prevent diseases and to help people manage health conditions (including chronic disease)
3	Care Coordination, Case Management, and System Navigation	<ul style="list-style-type: none"> a. Participating in care coordination and/or case management b. Making referrals and providing follow-up c. Facilitating transportation to services and helping to address other barriers to services d. Documenting and tracking individual and population level data e. Informing people and systems about community assets and challenges
4	Providing Coaching and Social Support	<ul style="list-style-type: none"> a. Providing individual support and coaching b. Motivating and encouraging people to obtain care and other services c. Supporting self-management of disease prevention and management of health conditions (including chronic disease) d. Planning and/or leading support groups
5	Advocating for Individuals and Communities	<ul style="list-style-type: none"> a. Advocating for the needs and perspectives of communities b. Connecting to resources and advocating for basic needs (e.g. food and housing) c. Conducting policy advocacy
6	Building Individual and Community Capacity	<ul style="list-style-type: none"> a. Building individual capacity b. Building community capacity c. Training and building individual capacity with CHW peers and among groups of CHWs
7	Providing Direct Service	<ul style="list-style-type: none"> a. Providing basic screening tests (e.g. height and weight, blood pressure) b. Providing basic services (e.g. first aid, diabetic foot checks) c. Meeting basic needs (e.g. direct provision of food and other resources)
8	Implementing Individual and Community Assessments	<ul style="list-style-type: none"> a. Participating in design, implementation, and interpretation of individual-level assessments (e.g. home environment assessment) b. Participating in design, implementation, and interpretation of community-level assessments (e.g. windshield survey of community assets and challenges, community asset mapping)
9	Conducting Outreach	<ul style="list-style-type: none"> a. Case-finding/recruitment of individuals, families, and community groups to services and systems b. Follow-up on health and social service encounters with individuals, families, and community groups c. Home visiting to provide education, assessment, and social support d. Presenting at local agencies and community events
10	Participating in Evaluation and Research	<ul style="list-style-type: none"> a. Engaging in evaluating CHW services and programs b. Identifying and engaging community members as research partners, including community consent processes c. Participating in evaluation and research: <ul style="list-style-type: none"> a. Identification of priority issues and evaluation/research questions b. Development of evaluation/research design and methods c. Data collection and interpretation d. Sharing results and findings e. Engaging stakeholders to take action on findings

Rosenthal, EL, Rush, CH, Allen, C. (2016). Understanding Scope and Competencies: A contemporary look at the United States Community Health Worker Field. Available at: http://www.healthreform.ct.gov/ohri/lib/ohri/work_groups/chw/chw_c3_report.pdf

CHW Core Consensus (C3) Project: CHW Skills and Sub-Skills

	Skill	Sub-Skill
1	Communication Skills	<ul style="list-style-type: none"> a. Ability to use language confidently b. Ability to use language in ways that engage and motivate c. Ability to communicate using plain and clear language d. Ability to communicate with empathy e. Ability to listen actively f. Ability to prepare written communication, including electronic communication (e.g. email, telecommunication device for the deaf) g. Ability to document work h. Ability to communicate with the community served (may not be fluent in language of all communities served)
2	Interpersonal and Relationship-Building Skills	<ul style="list-style-type: none"> a. Ability to providing coaching and social support b. Ability to conduct self-management coaching c. Ability to use interviewing techniques (e.g. motivational interviewing) d. Ability to work as a team member e. Ability to manage conflict f. Ability to practice cultural humility
3	Service Coordination and Navigation Skills	<ul style="list-style-type: none"> a. Ability to coordinate care (including identifying and accessing resources and overcoming barriers) b. Ability to make appropriate referrals c. Ability to facilitate development of an individual and/or group action plan and goal attainment d. Ability to coordinate CHW activities with clinical and other community services e. Ability to follow-up and track care of referral outcomes
4	Capacity Building Skills	<ul style="list-style-type: none"> a. Ability to help others identify goals and develop to their fullest potential b. Ability to work in ways that increase individual and community empowerment c. Ability to network, build community connections, and build coalitions d. Ability to teach self-advocacy skills e. Ability to conduct community organizing
5	Advocacy Skills	<ul style="list-style-type: none"> a. Ability to contribute to policy development b. Ability to advocate for policy change c. Ability to speak up for individuals and communities
6	Education and Facilitation Skills	<ul style="list-style-type: none"> a. Ability to use empowering and learner-centered teaching strategies b. Ability to use a range of appropriate and effective educational techniques c. Ability to facilitate group discussions and decision-making d. Ability to plan and conduct classes and presentations for a variety of groups e. Ability to seek out appropriate information and respond to questions about pertinent topics f. Ability to find and share requested information g. Ability to collaborate with other educators h. Ability to collect and use information from and with community members
7	Individual and Community Assessment Skills	<ul style="list-style-type: none"> a. Ability to participate in individual assessment through observation and active inquiry b. Ability to participate in community assessment through observation and active inquiry
8	Outreach Skills	<ul style="list-style-type: none"> a. Ability to conduct case-finding, recruitment, and follow-up b. Ability to prepare and disseminate materials c. Ability to build and maintain a current resources inventory

CHW Core Consensus (C3) Project: CHW Skills and Sub-Skills (cont.)

9	Professional Skills and Conduct	<ul style="list-style-type: none"> a. Ability to set goals and to develop and follow a work plan b. Ability to balance priorities and to manage time c. Ability to apply critical thinking techniques and problem solving d. Ability to use pertinent technology e. Ability to pursue continuing education and life-long learning opportunities f. Ability to maximize personal safety while working in community and/or clinical settings g. Ability to observe ethical and legal standards (e.g. CHW Code of Ethics, Americans with Disabilities Act [ADA], Health Insurance Portability and Accountability Act [HIPAA]) h. Ability to identify situations calling for mandatory reporting and carry out mandatory reporting requirements i. Ability to participate in professional development of peer CHWs and in networking among CHW groups j. Ability to set boundaries and practice self-care
10	Evaluation and Research Skills	<ul style="list-style-type: none"> a. Ability to identify important concerns and conduct evaluation and research to better understand root causes b. Ability to apply the evidence-based practices of Community Based Participatory Research (CBPR) and Participatory Action Research (PAR) c. Ability to participate in evaluation and research processes, including: <ul style="list-style-type: none"> a. Identifying priority issues and evaluation/research questions b. Developing evaluation/research design and methods c. Data collection and interpretation d. Sharing results and findings e. Engaging stakeholders to take action on findings
11	Knowledge Base	<ul style="list-style-type: none"> a. Knowledge about social determinants of health and related disparities b. Knowledge about pertinent health issues c. Knowledge about healthy lifestyles and self-care d. Knowledge about mental/behavioral health issues and their connection to physical health e. Knowledge about health behavior theories f. Knowledge about public health principles g. Knowledge about the community served h. Knowledge about United State health and social service systems

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http://www.healthreform.ct.gov/ohri/lib/ohri/work_groups/chw/chw_c3_report.pdf

Acknowledgments

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