# The Community Health Worker in HIV Care Curriculum

## PURPOSE OF THE CURRICULUM

The Community Health Worker in HIV Care curriculum is a free, accessible training resource to support the integration of the Community Health Worker (CHW) workforce into HIV and other primary care teams. The curriculum addresses topics related to core competencies of CHWs as well as topics about HIV.

Community Health Workers can play an important role in increasing access to healthcare and improving health outcomes, especially for racial and ethnic minority people with HIV. CHWs help increase the accessibility of healthcare for marginalized communities by targeting the social determinants of health that cause barriers to health, and they can improve retention in care and care outcomes by providing education, coaching, and support to individuals, as well as bringing important knowledge to other members of the care team. The curriculum provides training in a variety of topics related to the role and skills of CHWs as described by the CHW Core Competency (C3) Project.¹ The curriculum is focused on HIV care teams, however many of the modules can be applied to CHWs working in health care teams in general and in a variety of settings, including community health centers.

## HOW THE CURRICULUM WAS DEVELOPED

The curriculum was developed through a national needs assessment conducted across Ryan White funded participating sites, which helped inform the topics of the modules. It was developed by the Boston University School of Social Work's Center for Innovation in Social Work & Health, and a team of trainers including CHWs and CHW supervisors with expertise in HIV and CHW training. The modules cover HIV and core competencies in accordance with the CHW Core Consensus Project (C3) for CHW programs to be effective in working with people living with HIV engage in care and treatment.<sup>2</sup> The curriculum was developed as part of a three-year cooperative agreement: Improving Access to Care: Using Community Health Workers to Improve Linkage and Retention in HIV Care. The initiative was funded by the Minority HIV/AIDS Fund, and administered by the Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB), in the Division of Community HIV/AIDS Programs (DCHAP).

## WHERE THE CURRICULUM HAS BEEN USED

The curriculum was delivered to a cohort of CHWs participating in the initiative at ten Ryan White HIV/AIDS Program provider sites across the United States over a period of two years (2017-2019), with the purpose of integrating CHWs as part of the HIV care team to promote linkage and retention to HIV primary care. The ten sites were varied geographically and in terms of urbanicity. Seven out of ten were located in the Southeastern U.S. and three sites were in primarily rural areas. The multi-site project emphasized working with racial/ethnic minority communities where the HIV epidemic is most prevalent. The curriculum provides all of the needed materials, including lesson plans, handouts, and lecture slides used for trainings. More information about the CHW Project can be found at <a href="https://ciswh.org/project/chw">https://ciswh.org/project/chw</a>.

## WHO SHOULD USE THE CURRICULUM?

The curriculum is for any healthcare organization who has or is interested in having CHWs on their care teams. Nonprofit and other community based organizations, state and local health departments addressing chronic diseases, and any organization that would like to provide training in HIV for its CHWs may also find the content helpful.

- 1. See <a href="https://www.c3project.org/">https://www.c3project.org/</a>
- 2. Ibid.

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## WHO ARE COMMUNITY HEALTH WORKERS?

"A community health worker is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A community health worker also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy." 3

CHWs are health professionals who are able to link patients to healthcare systems, especially patients from marginalized communities. CHWs are often either members of the communities that they work with or have a close relationship with the people from these communities. CHWs work in multiple settings such as Ryan White HIV/AIDS program clinics, hospitals, substance use treatment centers, nonprofit organizations, and community health centers. They address a variety of health issues such as intimate partner violence and chronic disease. Due to their presence in diverse settings, CHWs are often known by job titles including peers, navigators, promotores, and linkage coordinators. Regardless of job title, CHWs are linked as a workforce by their ability to increase access to healthcare and address barriers that might otherwise interfere with access to care and services for people with HIV. Through their life experience, knowledge of the community, and understanding of healthcare systems, CHWs are able to break down barriers to ensure that healthcare is accessible to everyone.

## HOW THE CURRICULUM IS ORGANIZED

This is an 80-hour curriculum organized by the CHW Core Competencies:

- Communication Skills
- Interpersonal and Relationship Building Skills
- Service Coordination and Navigation Skills
- Capacity Building Skills
- Advocacy Skills
- Education and Facilitation Skills
- Individual and Community Assessment Skills
- Outreach Skills
- Professional Skills and Conduct
- Evaluation and Research Skills
- Knowledge Base

The HIV modules fall under the CHW Core Skill of Knowledge Base. The HIV modules provide 16 hours of training on topics including the HIV viral life cycle, how antiretroviral medications work, understand laboratory values, promoting and addressing treatment adherence, managing stigma and disclosure, U=U, treatment as prevention (TasP), pre-exposure (PreP), and post exposure prophylaxis (PeP). The remaining training consists of 64 hours of training modules on the other Core Competencies.

We recommend that the training be delivered by experienced trainers in the field of HIV or chronic disease, and that trainers have experience working with diverse socio-demographic communities. Lesson plans note where additional subject matter expertise is recommended for delivery of the training module.

3. https://www.apha.org/apha-communities/member-sections/community-health-workers

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## **ASPECTS OF THE CURRICULUM**

#### **Dinámicas**

Rooted in popular education methods, dinámicas are group activities that recognize the role of feelings and emotions in education. They can be a fun way for groups to meet and become more comfortable with each other, re-energize the group between training modules, and help build community amongst the participants. Training facilitators can utilize their own dinámicas, or find ones that are available via the internet. One potential resource is a <a href="Popular Education Manual">Popular Education Manual</a> published by the Community Capacitation Center.

### **In-Person Trainings**

During the initiative in which the curriculum was developed, in-person trainings ranged from 1 to 5 days. We strongly encourage that an initial training of 40 hours in HIV and CHW core competencies take place if your state does not have an existing CHW certification and training program for you to attend. We recommend alternating facilitators and incorporating dinámicas between modules to keep engagement of the group. If possible, participating CHWs can also help facilitate the dinámicas between these training modules.

### **Virtual Trainings**

Some of the training modules can be conducted virtually, and were during the initiative. Virtual trainings are flexible, less costly, and can make trainings more accessible for CHWs. The virtual trainings used in the curriculum range from 1-2 hours. Some of these trainings include pre-work in their lesson plans, which CHWs should complete before the date of the training.

#### **Tips for Virtual Trainings**

- Hold at least one practice run before the training to test sound, visuals, and connection.
- Encourage the use of participant's web cameras during virtual trainings to help increase engagement.
- Provide a brief training to participants on how to use the online platform features, such as chat box, screen share, and muting/unmuting.
- Include a slide/reminder at the beginning of the presentation for participants to mute themselves if they are not speaking to reduce background noise.

#### **Self-Paced Modules**

The curriculum includes three self-paced modules that CHWs can take at their own discretion. The self-paced modules can be accessed at the <a href="New England Public Health Training Center">New England Public Health Training Center</a>.

## CONTINUING EDUCATION

The curriculum covers 80 hours of training to meet the suggested necessary competencies for all CHWs, including training in a knowledge base about HIV. We recommend continued education for CHWs for their professional development, to ensure that they remain informed on changes in healthcare systems, to have up-to-date clinical information related to the health topics and populations with which they work, and to understand ongoing issues affecting their communities.