

INTEGRATING COMMUNITY HEALTH WORKERS/PROMOTORES IN FRONTLINE MENTAL HEALTH CARE



The Reason:



- Engage a previously underserved Spanish speaking clientele in mental health services.
- Determine if CHWs/promotores within the mental health setting are effective for target population.

| Variables | Peer-to-Peer Counselors/Promotoras | Therapists |
|------------------|---|---|
| Education Level | Different Levels | Master degree attained in the United States |
| Time per session | No time limit | 45 minutes per session |
| Maximum sessions | No maximum | 8 sessions |
| Caseload | Caseload: 30-40 | Caseload: 10-15 |
| Tx plan | No formal plan | Therapeutic tx plan guides therapy |
| Type of services | Individual, couple, and family counseling | Individual, couple, and family therapy |
| Common goals | Strengthen communities by providing pschoeducational services to clients. Reduce stigma by increasing education and awareness of mental health. Offer support, direction, guidance, and referrals. Links clients to services and help them connect with resources in the community. | |

Table 1. Engagement strategies by CHWs/promotores vs. therapists.

The Solution:

- 100 closed cases, assigned to either CHWs/promotores or therapists during the period of project; all participants with levels of anxiety and depression.
- A number of 8 sessions with therapists.
- 2-hour focus group discussion with CHWs/promotores and therapists to obtain feedback on strategies used.
- 40-hr training under the CHWs/promotores El Sol Training Center covering basic mental health education and counseling techniques to CHWs/promotores.

The Impact:

- Significant changes in depression scores.
- Difference in scale scores for anxiety but no significant changes when means compared.

“The findings here suggest that while promotoras and therapist approach their work with different levels of preparation they both provide a level of intervention that improves the lives of these clients observed in this sample.”

Evaluation questions and results:



Was the use of CHWs/promotores within the mental health setting an effective intervention and engagement strategy for the target population?

The evaluation data indicated significant outcomes related to El Sol CHW/promotores provision of quality services resulting in positive outcomes in the lives of clients.



Are there unique characteristics of engagement in the work of CHWs/promotores that can benefit the services of the agency?

Qualitative data from the focus groups indicated the unique approaches of CHWs/promotores that taps into shared cultural heritage, interaction patterns, understanding the client’s plight and openness to learn from the client and simply accompany them on their journey.



How does the role of CHWs/promotores compare to traditional therapy in terms of reducing depressive and anxiety-related symptoms? As mental health service providers, did CHWs/promotores positively affect client outcomes? If so, how do results compare with traditional therapy?

Due to research limitations, direct causal linkages are undetermined, however the research uncovered several engagement strategies CHW/promotores employ that resonate with culturally and contextually appropriate services. Results indicated that CHW/promotores significantly impacted the lives of their clients as found in the decrease of depression and anxiety scores. Further, these strategies are not often found in Evidence Based Practice (EBP) models, and therefore, may explain why EBP models are limited in their outcomes with marginalized groups and people of color, similar to those served by El Sol.