

Using the Promotor/a Model to Address Behavioral Health Disparities in Rural Communities

Mental Health America Multi-State Initiative

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Overview

- Background
- Research
- Challenges
- Recommendations
- Available Training Materials
- Q & A



Background

- *Promotor/a* - Spanish term for female/male “promoter”.
 - community health workers (CHWs), lay health workers, health promoters, peer educators.
- Experts in community where they live and serve, not in formal education.¹
- Paulo Freire’s model of community mobilization-
 - “emphasizes consciousness by raising knowledge and empowerment by viewing individuals not as victims of their circumstances, but rather as agents of change who are capable of acting upon the inequalities they experience.”²
- US Surgeon General recognizes the use of *promotores* as a promising, if largely untested, strategy to reduce barriers to mental health services.⁷



Core Roles

- Rosenthal's⁵ national CHW survey identified seven core roles:
 1. cultural mediation,
 2. informal counseling and social support,
 3. providing culturally appropriate health education,
 4. advocating for individual and community needs,
 5. assuring that people get the services they need,
 6. building individual and community capacity, and
 7. providing direct services.
- Center for Public Awareness⁵ describes several global functions of CHWs including:
 - decreasing health care costs, increasing health care access, strengthening the local economy, and strengthening the family and community.



Research Says...

- Particularly critical in rural areas due to lack of culturally competent mental and physical health services.⁴⁻⁵
- Studies show *promotor/a* model to be most effective in educating clients in several health issues including:
 - cardiovascular disease, child abuse, nutrition and food safety, maternal and child health, HIV/AIDS and sexually-transmitted infections, mental health, and facilitating access to health care.⁵
- CHW use proven to be a cost-effective intervention strategy for expanding health access and health care services to underserved minority communities.^{1,4-5}



Research says...

- Community-based health interventions show positive effects on communities and on *promotores* themselves.⁴
- National Health Advisor Study (Arizona University) concluded CHW educational outreach results:
 - decreased ER visits, reduction of hospital LOS*, fewer medical complications among patients.
 - services provided in cost-effective, culturally sensitive approach eliminated barriers in obtaining medical care for participants.⁴
- UNM* *Promotor/a* MH* intervention focused on participants' contextual sources that contribute to depression (housing, food, employment, domestic violence shelters) and helped clients identify and access local resources, resulting in improved diabetes/depression management.³

*LOS: length of stay, *UNM: University of New Mexico, *MH: Mental Health

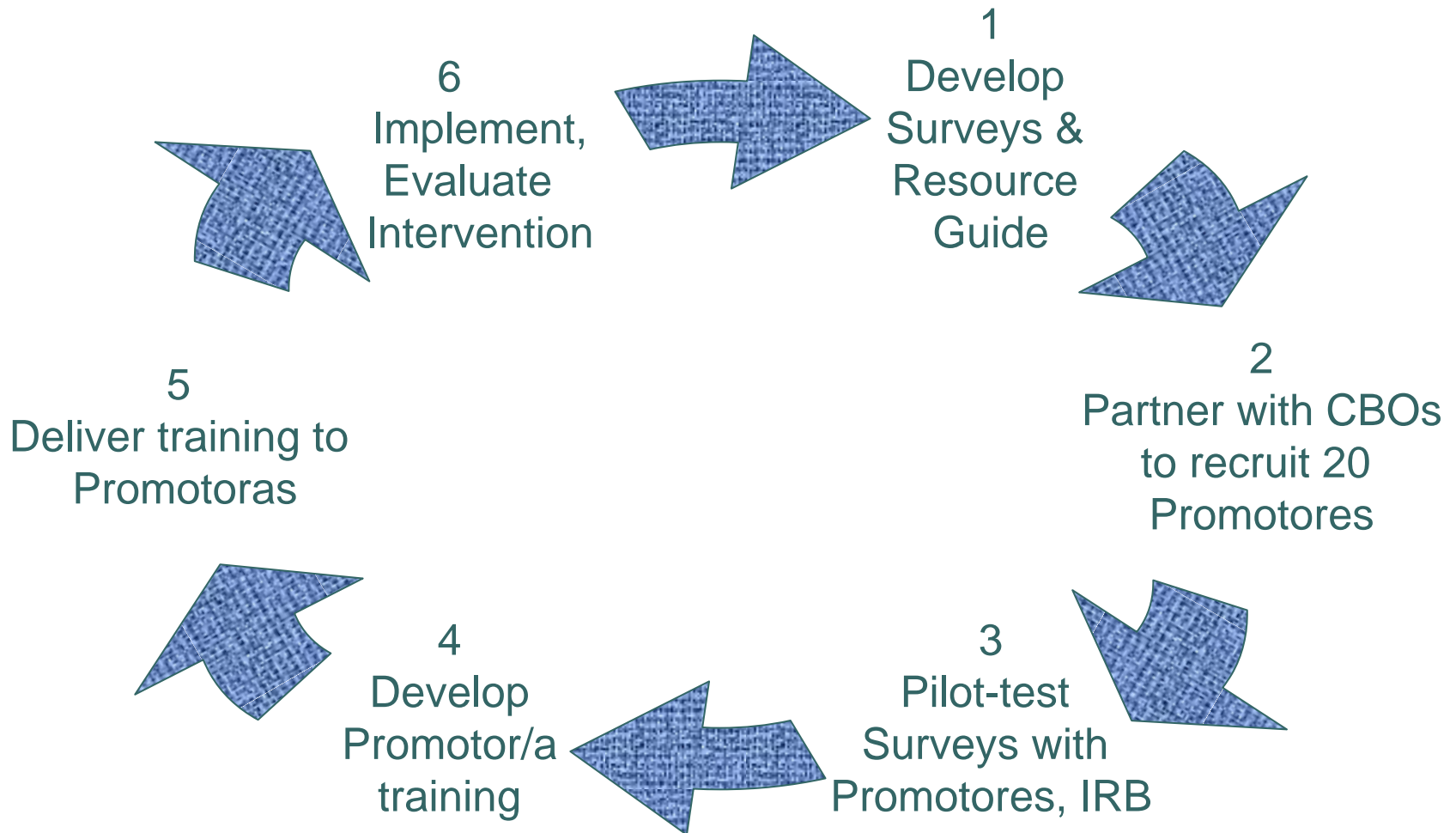


A *Promotor/a* Health Education Model for Improving Latino Health Care **Access** in California's Central Valley

- Exploratory pilot project with a non-randomized one-group study design.
- Goal: to explore whether the use of a culturally tailored educational intervention using *Promotores*:
 - a) increases public insurance enrollment (Medicare, Medicaid, and SCHIP),
 - b) improves access to primary care,
 - c) increases age-appropriate use of preventive services, and
 - d) increases self-efficacy around locating and accessing appropriate health services.



Planning Steps





Intervention

- 20 *Promotores* conduct pre/post assessments with 400 participants (adults/elders) to obtain quantitative/qualitative data of:
 - insurance status, primary care access, use of ER and preventive services, challenges to accessing health care services (stories), and self-efficacy.
- Success of intervention determined using 3-month post-assessment measurement of:
 - Quantitative: achievement of enrollment, improved healthcare use, reduced ER use, preventive care service goals identified at pre-assessment met, and improved self-efficacy.
 - Qualitative: participant's unique experiences and challenges in implementing individualized plan.



Training Curriculum

- Module 1: Promotor/a role, Recruitment.
- Module 2: Medicare, Medicaid (SCHIP), MISP, (county indigent program), appropriate ER use.
- Module 3: Importance of having health insurance and a medical home, use of age-appropriate preventive services.
- Module 4: Motivational interviewing, Data Collection Tools.

Available: www.cvhpi.org/publications



Training Day



Trainers

- Dr. Kotkin-Jaszi
- Alicia Gonzalez
- Dr. Pinzon-Perez



Challenges

- Funding \$\$\$
- Recruitment (experienced promotores may not participate due to immigrant status)
- Evaluation (documenting benefits/outcomes of project and impact on community's health)
- Sustainability



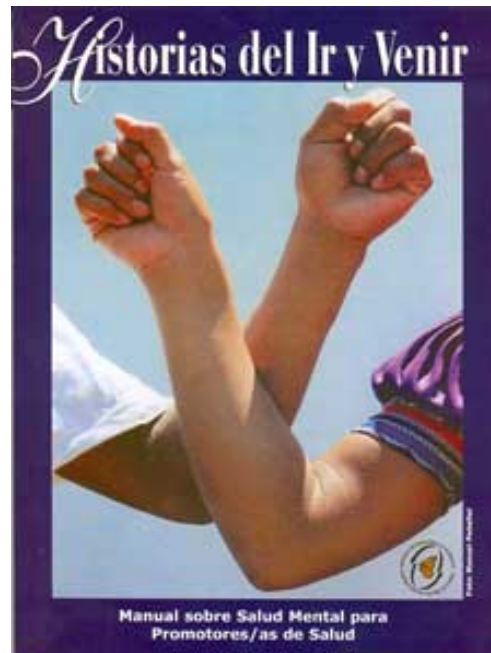
Recommendations

- *Promotor/a* recruitment from within community (builds trust).
- Incorporate *Promotor/a* anecdotal data (focus groups, pilot-testing, ensures culture/content/construct validity in methodology).
- Continuous training and support during project (discussion settings, meetings, potlucks, etc.).
- Full team member participation ensures project progress³ (Researchers, MDs, clinic/organization staff, *Promotores*).
- Recognizing team efforts improves staff member morale (certificates, acknowledgement in material).
- Clarify *Promotor/a* role to protect from extra demands. ³
- Pay *Promotores*!



Mental Health Training Manuals

- *“Tales of Coming and Going”* (English only)
- Targeted population: Latino immigrants



Available: http://www.ucop.edu/hia/promotoras_manuals.shtml



Mental Health Training Manuals

- *SONRISA*: A Curriculum Toolbox for Promotores/Community Health Workers to Address Mental/Emotional Health Associated with Diabetes. University of Arizona (English/Spanish).

Available: <http://swcchp.publichealth.arizona.edu/Resources/default.aspx>

- Mental Health, Depression and Stress. Our Bodies Ourselves. The Boston Women's Health Book Collective (Spanish only).

Available: <http://www.ourbodiesourselves.org/uploads/pdf/mental.pdf>



References

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Thank you for your time

Q & A

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