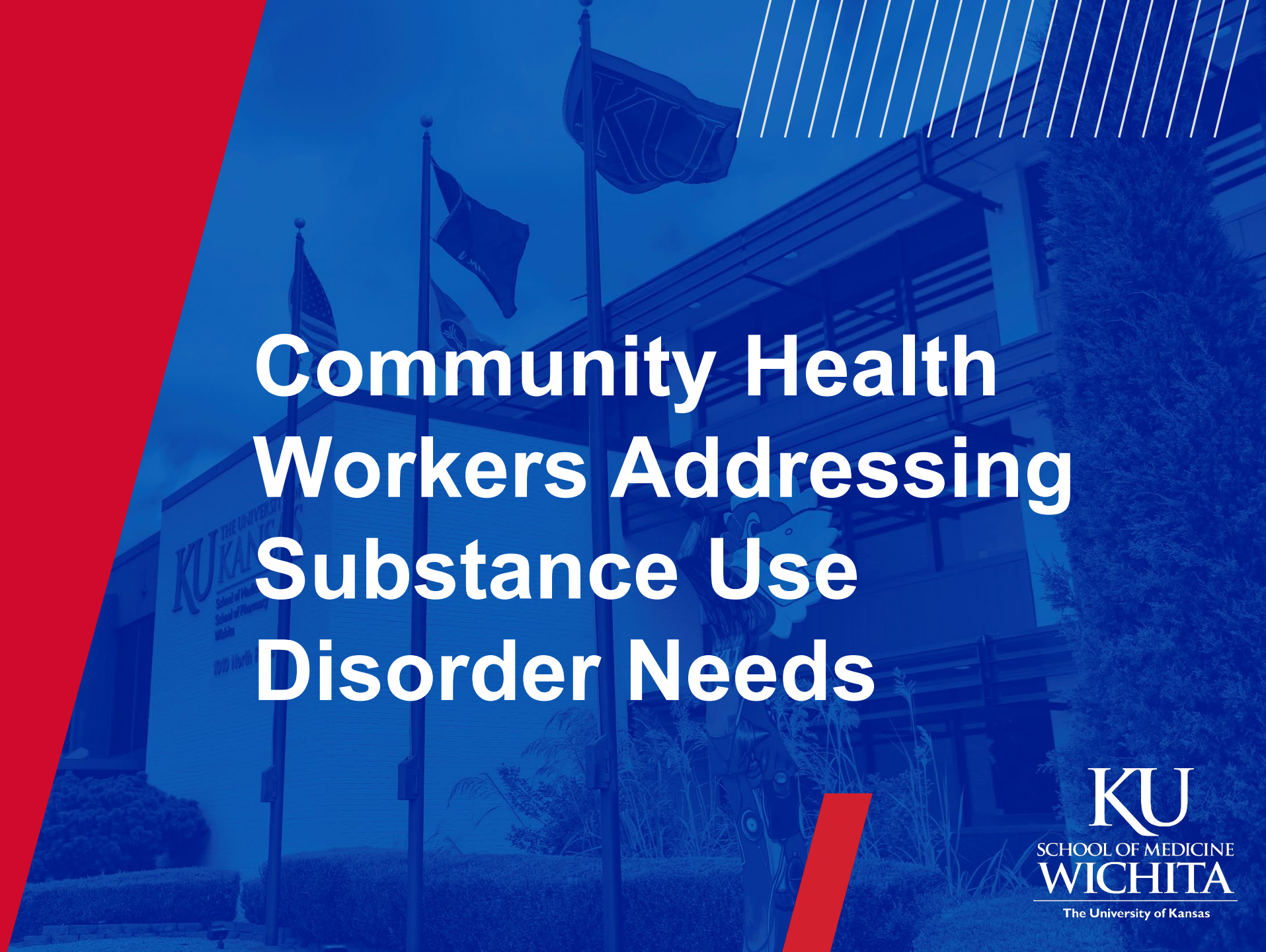
Community Health Workers Addressing Substance Use Disorder Needs



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Objectives

- Describe the objectives of the Community Behavioral Health Worker (CHBW) training.
- Explain the benefits of expansion of community health worker training to address substance use disorder needs in Kansas.
- Describe successes and challenges of CHWs engaging in SUD work.

OD2A: LOCAL in Sedgwick County

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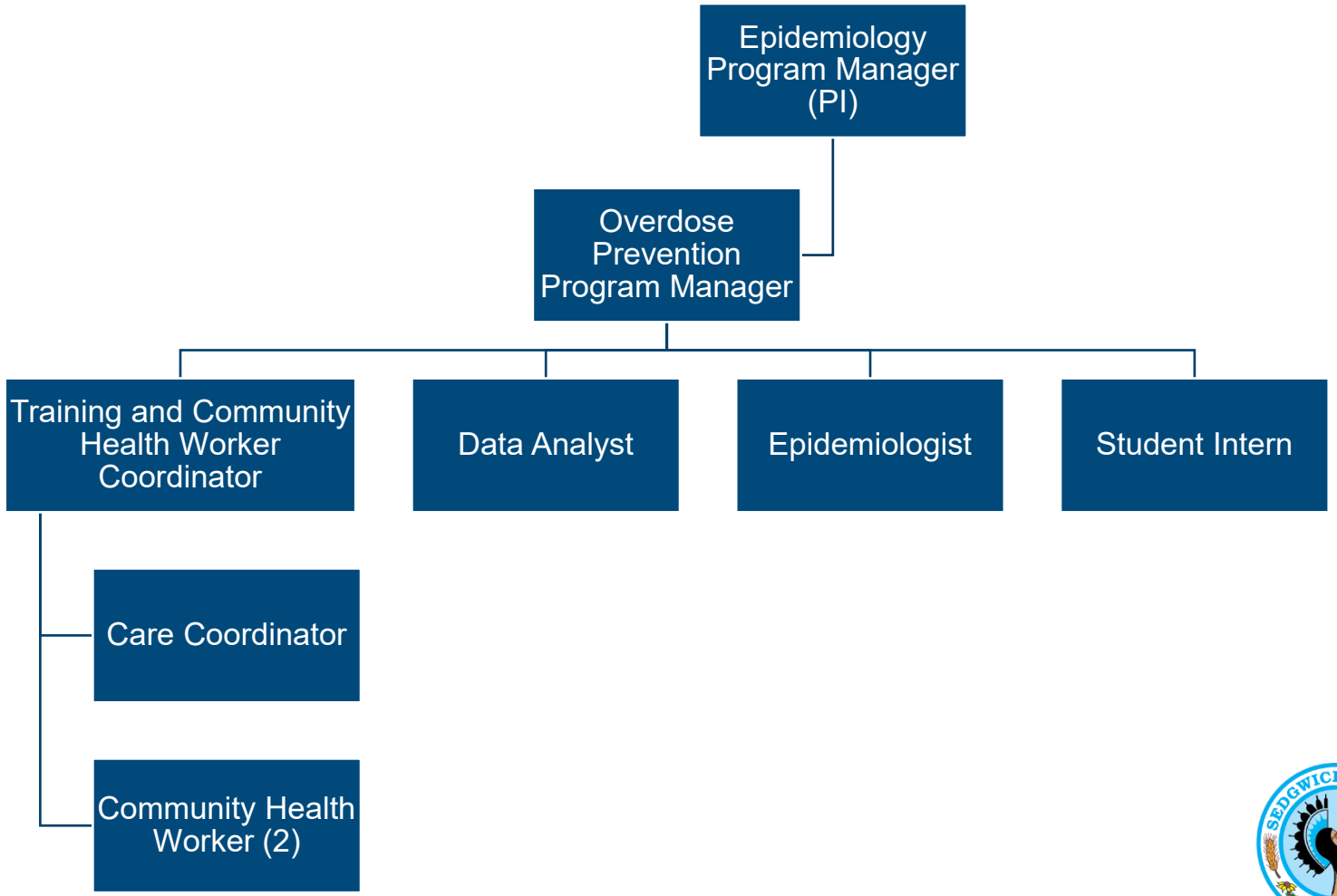
SCHD Overdose Prevention Program



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Strategies for Overdose Prevention

Drug Testing (Component B)

- Partner with Regional Forensic Science Center to test drugs and paraphernalia found at overdose death scenes

Linkage to and Retention in Care

- Connect to care through CHWs and Care Coordinator
- Implement trainings with public safety, healthcare, and community

Surveillance Infrastructure

- Establishing systems for data collection and analysis
- Data dashboard

Harm Reduction

- Support community partners with naloxone and FTS distribution
- Support and provide education

Clinician and Health Systems Best Practices

- Provide training on CDC prescribing guidelines, polysubstance use, and naloxone prescribing

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What are Community Health Workers?

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CHW Definition

- **What are Community Health Workers?**

Community Health Workers (CHW) are trusted members of the community and have a close understanding of the community they serve.

CHWs serve as a link between the patient and health or social service agencies, working to improve health outcomes by improving access to services and quality of care.

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Why is CHW-Led Innovation Important?

- Evidence demonstrates CHWs' effectiveness as frontline providers
- Address social determinants of health (SDoH) and health inequities
- CHWs provide
  - Improvements in mental health
  - Increased support for disease self-management
  - Lower hospitalization rates

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What We Know

CHWs have been actively developing new approaches to:

- Improve public health systems
- Build community health capacity
- Address barriers to health and social services
- Improve the health of all people in the communities they serve

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What is Unique about CHW Perspectives?

- Deeply immersed in the communities they serve
- Build trusted relationships with clients and community partners
- Strengthen the health of communities
- Unique position provides CHWs with expertise and understanding

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Common Tasks CHWs Do with Patients

- **Link** patients to medical care
- **Attend** medical appointments with patients and educates them on navigating the system.
  - **Advocate** for them during appointments
- **Help** them apply for benefits
- **Connect** them to community resources
- **Teach** health literacy
- **Provide basic education** around their medical condition
- **Perform home visits**
- Moves patients towards **self-sufficiency**
- **Cultural mediator**

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Core Competencies

CHW Core Roles

- Cultural Mediation Among Individuals, Communities, and Health & Social Service Systems
- Care Coordination, Case Management, and System Navigation
- Advocating for Individuals and Communities
- Providing Direct Services
- Conducting Outreach
- Providing Culturally Appropriate Health Education and Information
- Providing Coaching and Social Support
- Building Individual and Community Capacity
- Implementing Individual and Community Assessments
- Participating in Evaluation and Research

CHW Core Skills

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

Source: C3 Council

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A Day In The Life of A CHW

https://vimeo.com/dontblinkmpls/review/222731842/420b91e274

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Value of CHWs

“ CHWs are versatile and natural leaders. They can effectively work across community and healthcare providers to accelerate community engagement among underserved populations and structural competency of healthcare providers and, ultimately, lead to patient-centered care and population health improvement for diverse communities.”

– Trinh-Shervin et al, 2019

How SCHD Utilizes Community Health Workers to Prevent Overdose

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Overview

- Hired 2 community health workers to address needs of at-risk populations
  - For OD2A: LOCAL, at-risk populations are people who use drugs, Black or African American, veterans, people who are unhoused, and youth ages 15-24

- Sedgwick County aims to improve resource accessibility and care coordination for those at-risk for overdose and their families
  - Focus on developing goals and providing connections
  - Support linkage to care and harm reduction

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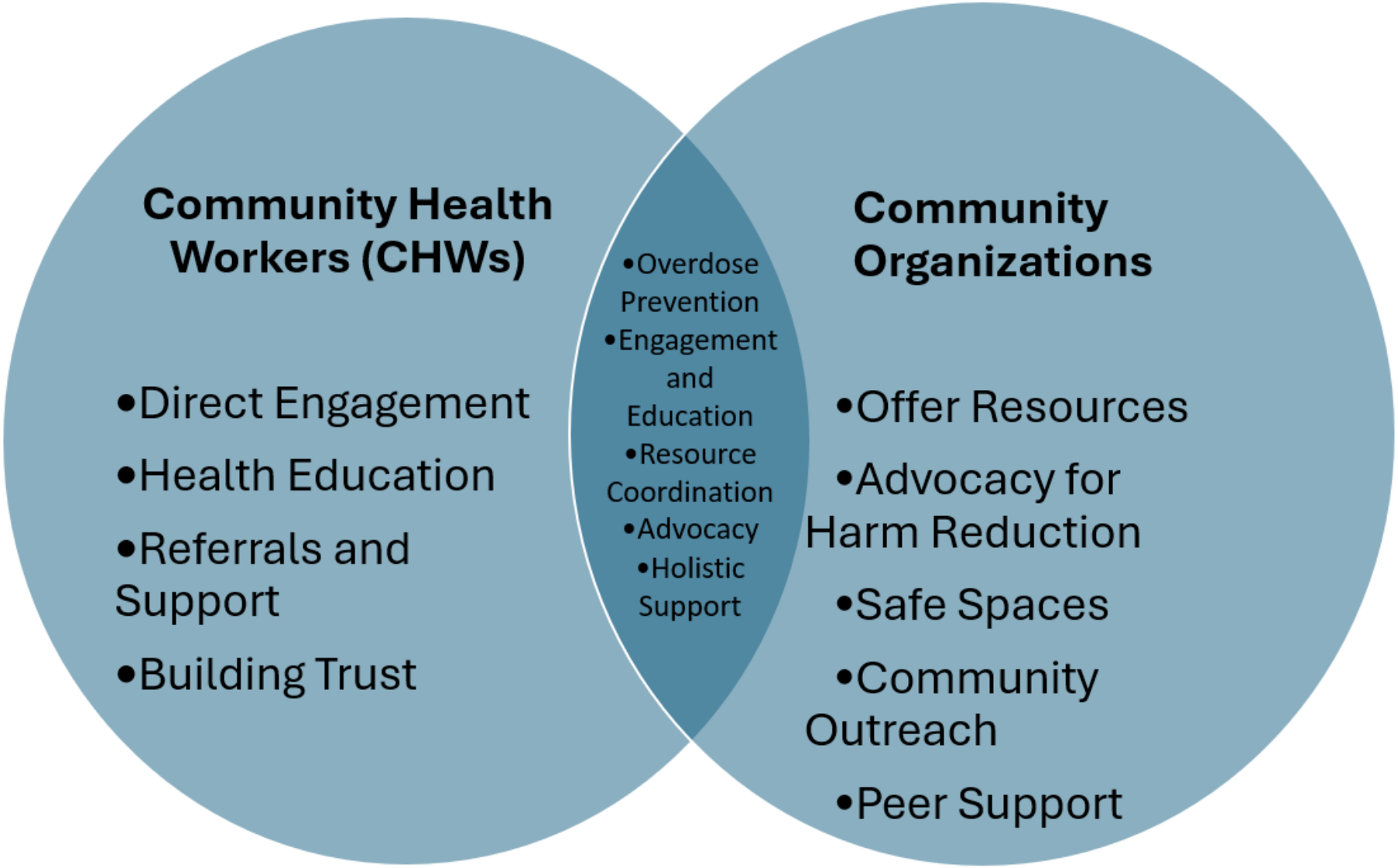

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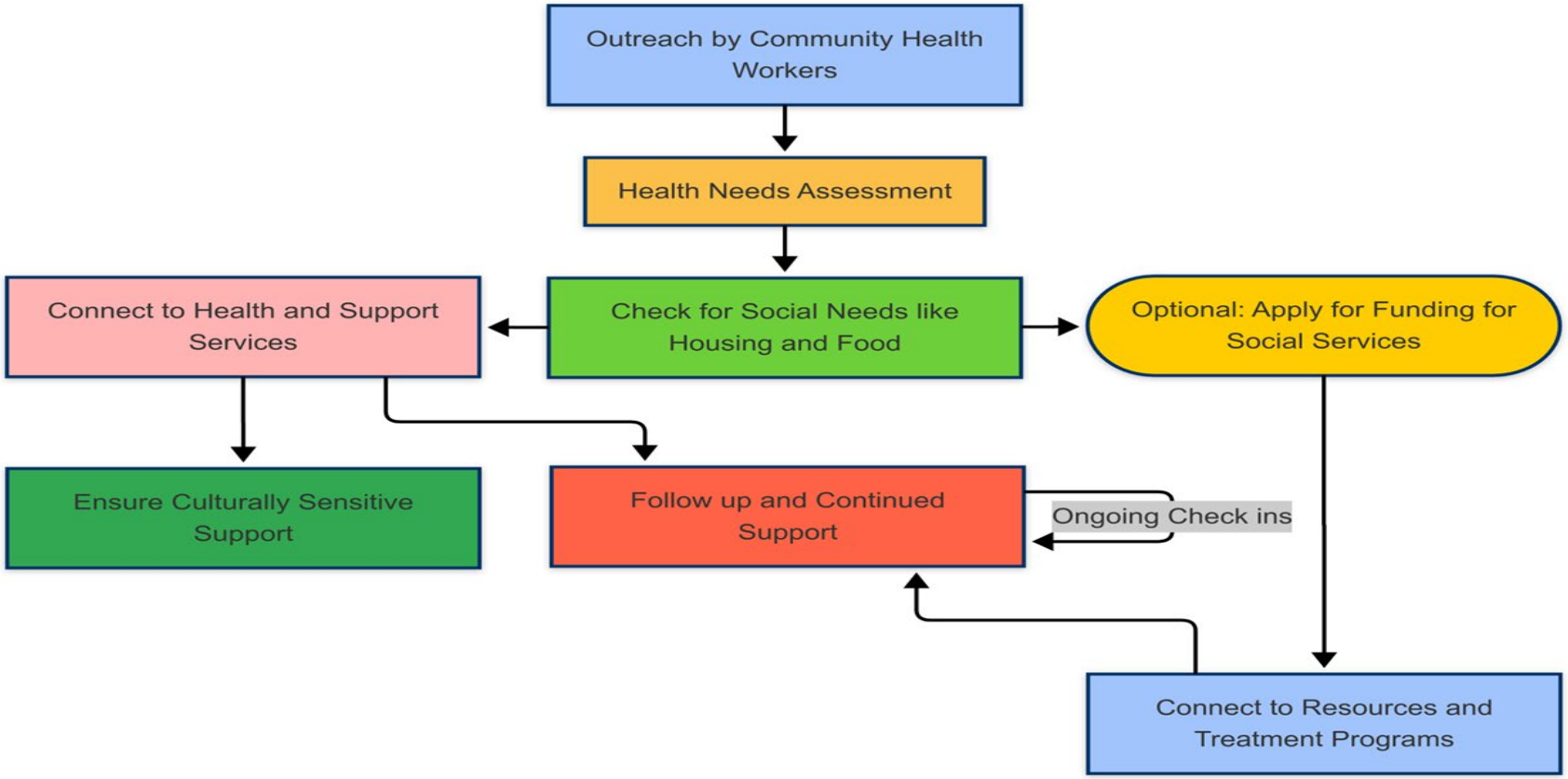
Community Health Worker Support Workflow at Sedgwick County Health Department



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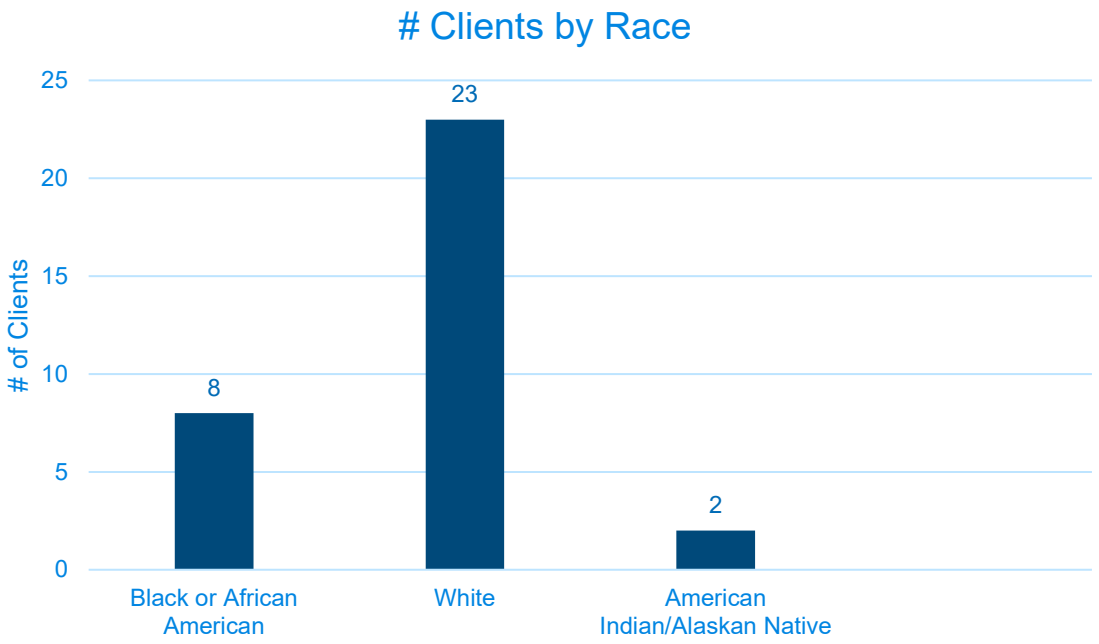
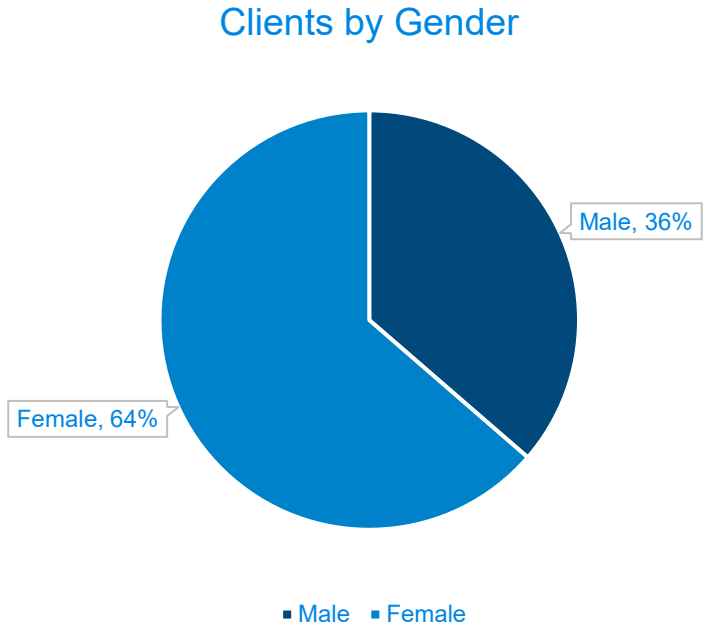
Active Clients by Race as of October 31, 2025



- 24% of Clients identify as Black or African American

Active Clients by Gender as of October 31, 2025



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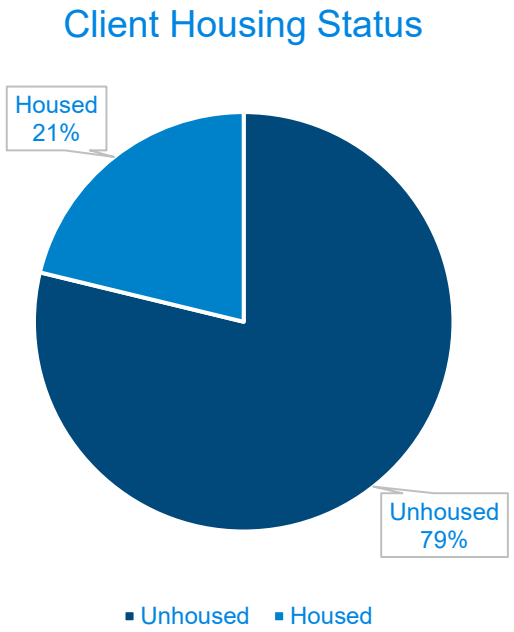
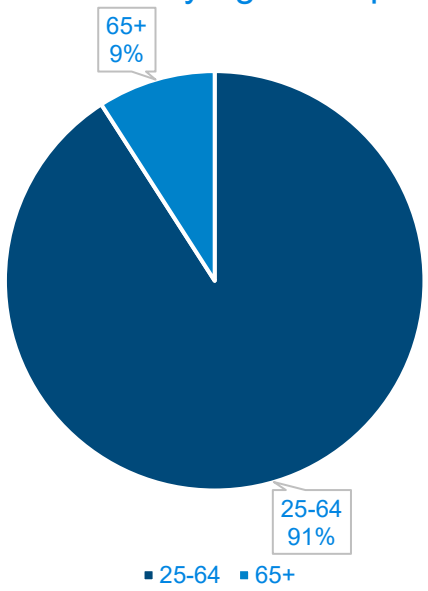
Active Clients by Housing Status as of October 31, 2025



Active Clients by Age Group as of October 31, 2025



- 79% of Clients stated they were unhoused individuals

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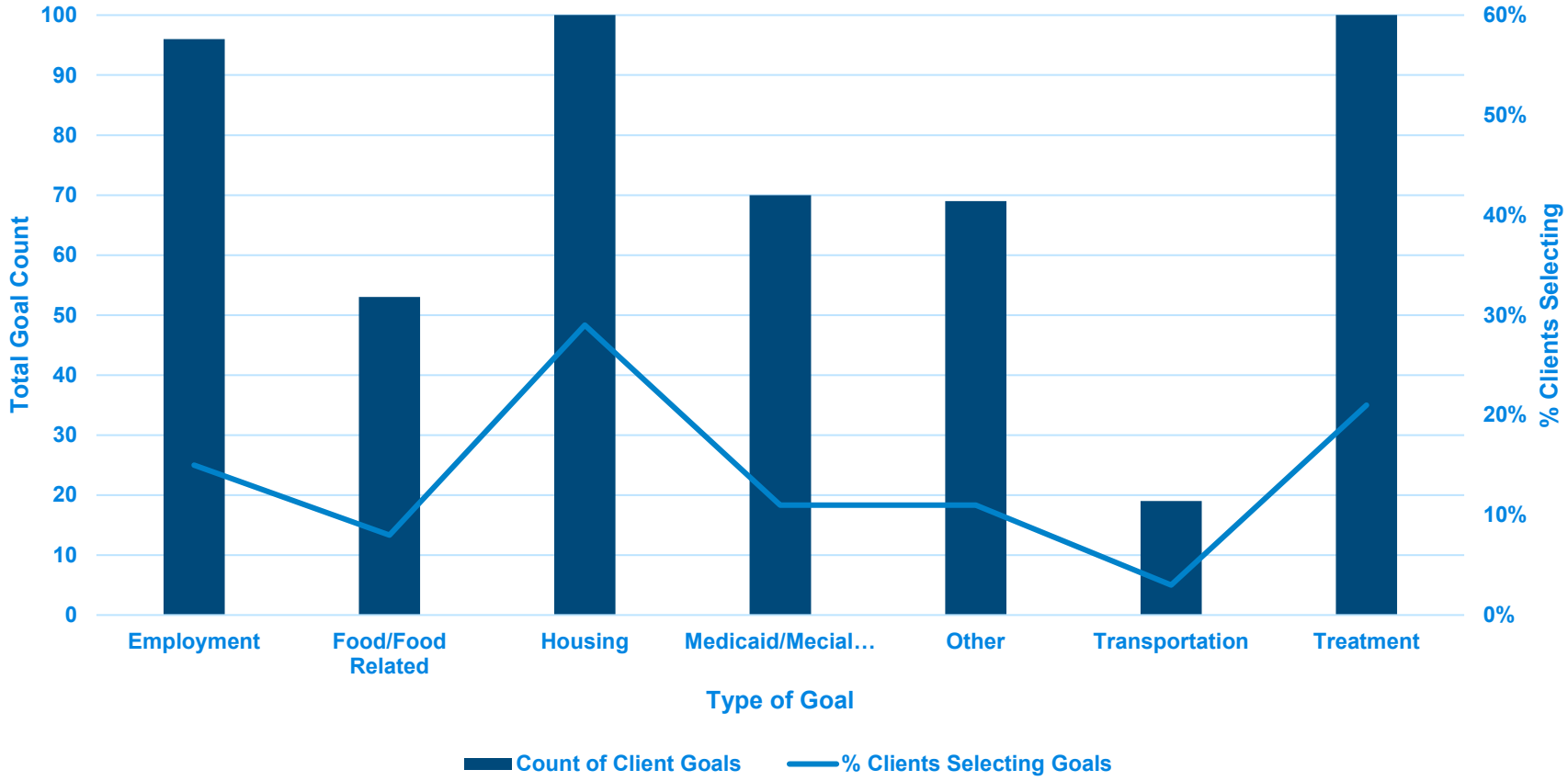
Total Client Goals & Percent of Clients Selecting Goals by Type as of October 31, 2025



- 358 total clients (636 total goals) between September 2024 and October 2025
- 29% of clients selected housing as a goal
- 21% of clients selected treatment as a goal

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Client Goal Status as of October 31, 2025

As of October 31, 2025			
Completed Client Goals	395	Housing = 29%	Treatment = 21%
Active Client Goals	58	Housing = 24%	Treatment = 14%
Incomplete Client Goal due to Attrition	207	Housing = 13%	Treatment = 10%

358 Total Clients (636 goals) between September 2024 and October 2025.

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Mental Illness

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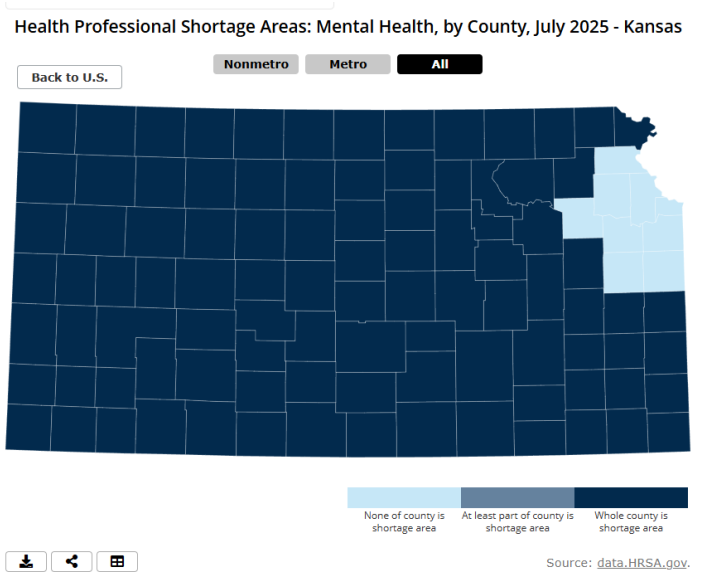
Problem

- 23% of adults (~60 million) in the US have a mental illness (NIMH, 2024)
- In the United States, 27% of residents have their mental health needs met
- In Kansas, 19% of residents have their mental health needs met



HRSA: data.HRSA.gov, accessed 10/30/25

Facts Not Fear ICT

- Administered through the U.S. Department of Health and Human Services' Office of Minority Health

- Designed to improve health literacy of four adult populations experiencing the greatest health disparities in Wichita, Kansas
  - American Indian, Alaska Native
  - Asian, Asian American
  - Black, African American
  - Hispanic, Latino

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Facts Not Fear ICT

- Conducted 80 key influencer interviews in 2024 regarding **mental health** needs of community members

- Participants indicated a strong need for mental health workers who look like them, speak their language, and can connect with them culturally

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Community Mental Health Worker (CMHW) Training

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Facts Not Fear ICT

- Developed a pilot Community Mental Health Worker (CMHW) training to address mental health needs
- Designed to increase capacity of trusted community members
- Develop a pipeline of mental health workers who could begin to address the needs expressed during interviews

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Community Mental Health Worker (CMHW) Training

- 40 interactive hours over four weeks
- Developed with two partner organizations
  - Communities Organizing to Promote Equity (COPE) - community health worker (CHW) aspects
  - Mental Health America of South Central Kansas (MHA) - mental health content

COMMUNITIES ORGANIZING TO PROMOTE EQUITY

MHA Mental Health America of South Central Kansas

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CMHW Training Objectives

Improve participants' knowledge about a community health worker's role
Prepare participants to identify and access resources in the community
Improve participants' abilities to introduce themselves as CHWs, assess clients' needs, and develop a care plan
Improve participants' understanding of the principles and importance of documentation while working as a CHW

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CMHW Training Objectives

Prepare participants for the workforce
Prepare participants to serve as mandated reporters
Improve participants' understanding of mental health and wellness
Increase participants' confidence in their ability to interact with individuals diagnosed with a mental illness

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CMHW Training Results

- 60 community members trained

Participant Demographics

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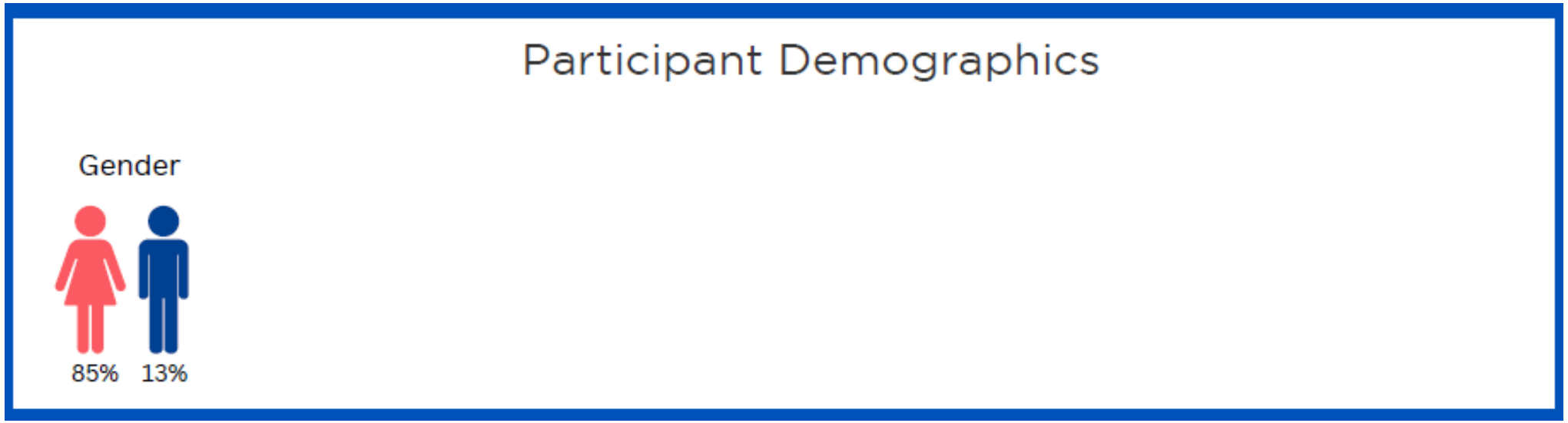
CMHW Training Results

- 60 community members trained



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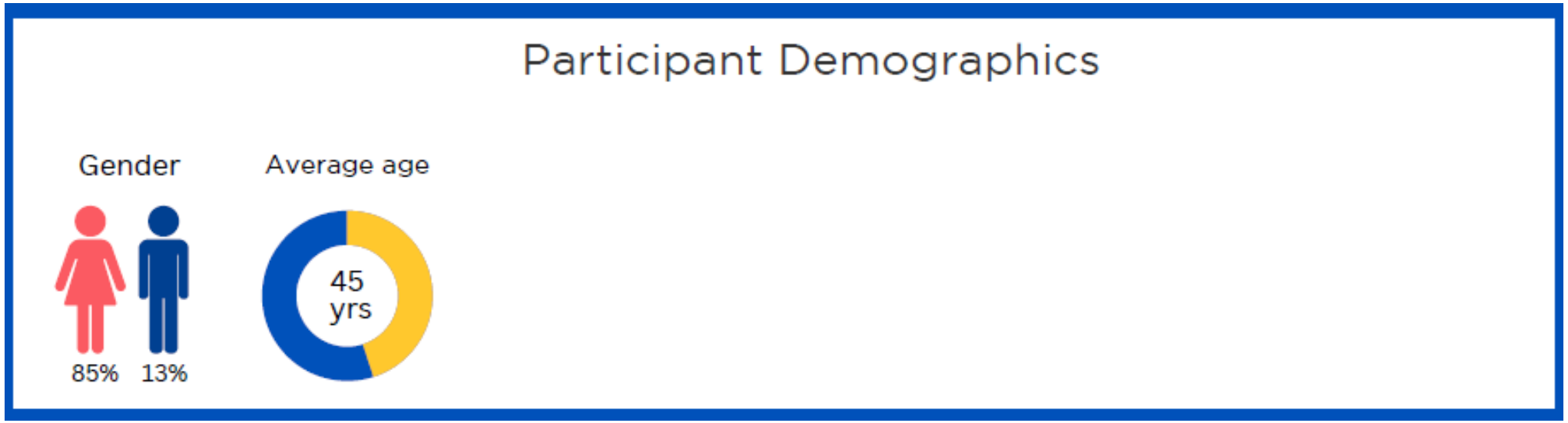

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CMHW Training Results

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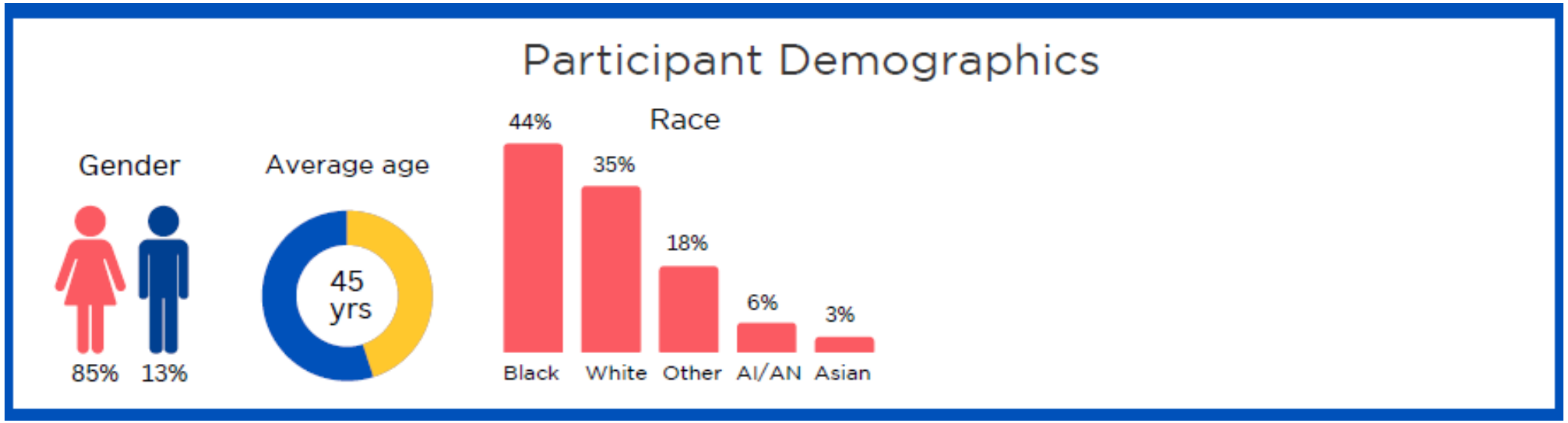

CMHW Training Results

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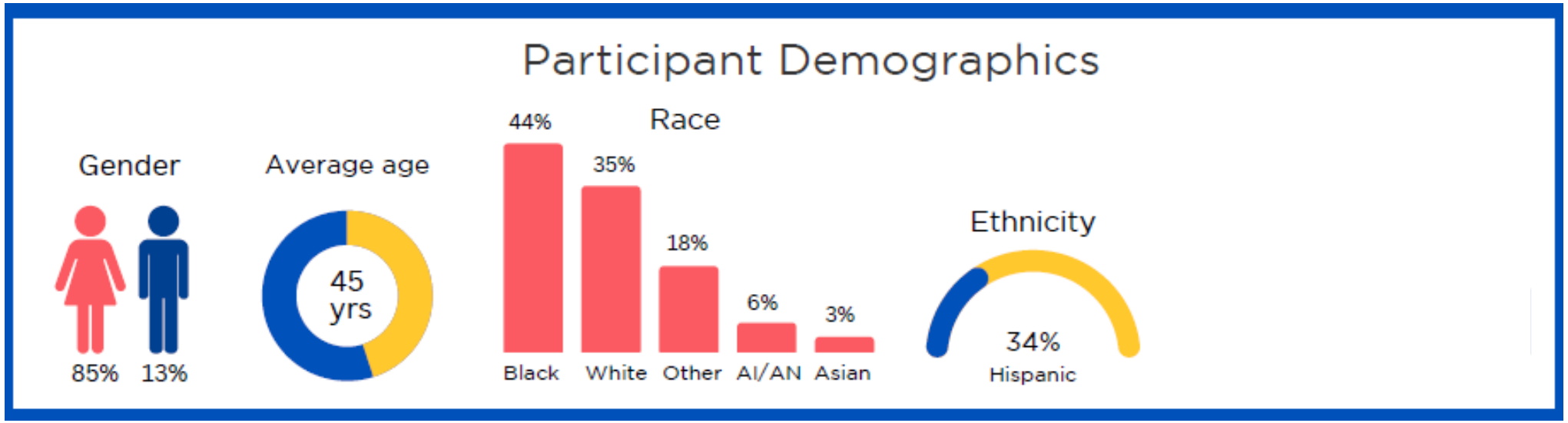

CMHW Training Results

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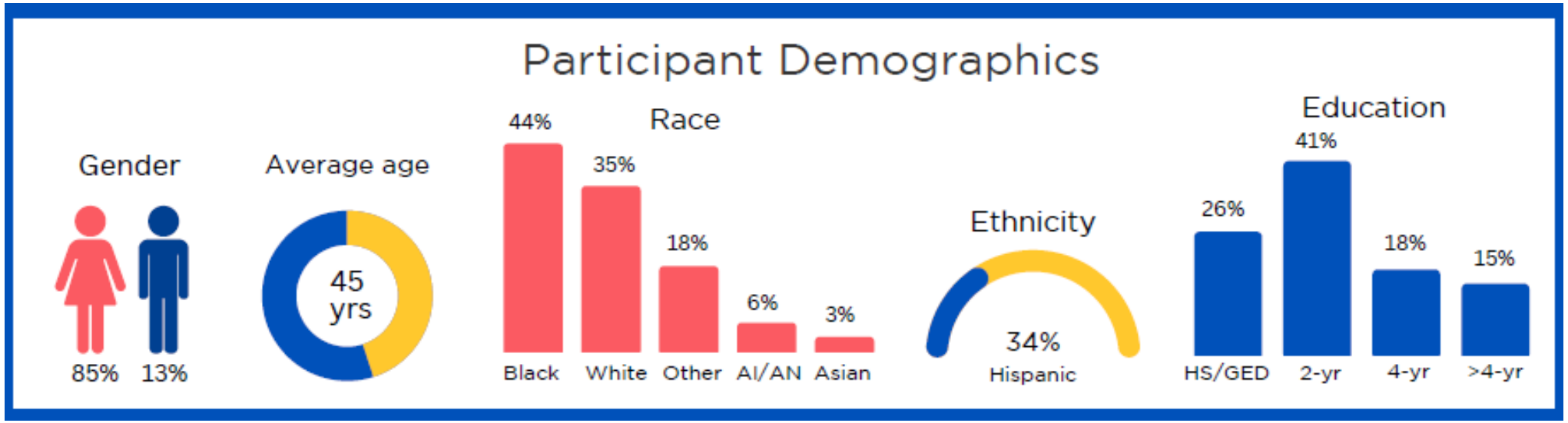

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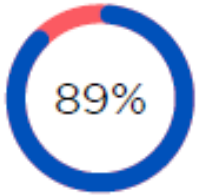
Results



reported being satisfied with the CMHW training

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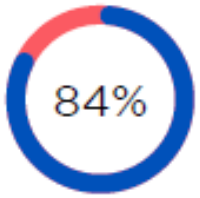
Results



reported the presenters made it easy to learn

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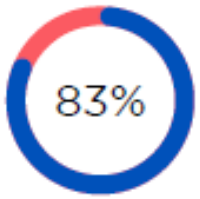
Results



reported the presenters were knowledgeable

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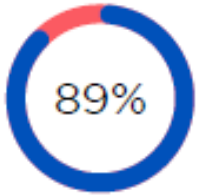
Results



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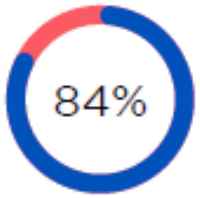
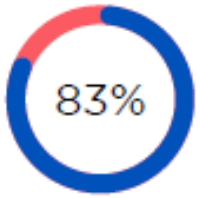


reported the presenters made it easy to learn



reported the presenters were knowledgeable

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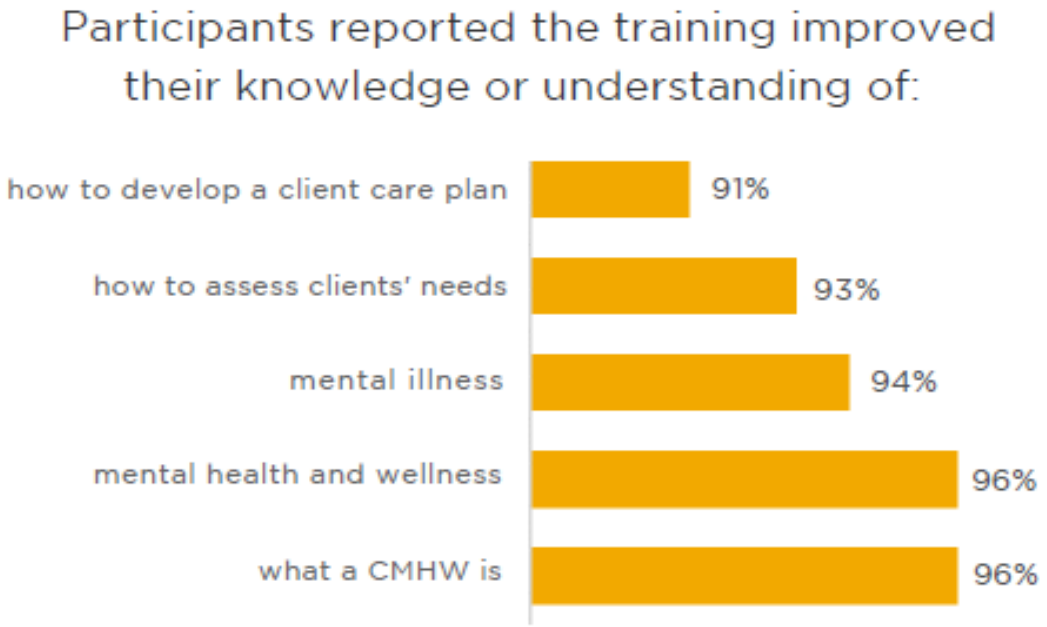
Results



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Results

96%

Reported that the training prepared them to become a CMHW

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Results

96%

Reported that the training prepared them to become a CMHW

94%

Reported that the training prepared them to find information on mental health

KU SCHOOL OF MEDICINE WICHITA
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Results

96%

Reported that the training prepared them to become a CMHW

94%

Reported that the training prepared them to find information on mental health

87%

Reported that the training prepared them to perform client documentation

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Results

96%

Reported that the training prepared them to become a CMHW

94%

Reported that the training prepared them to find information on mental health

87%

Reported that the training prepared them to perform client documentation

92%

Reported that the training improved their confidence to interact with individuals diagnosed with mental illness

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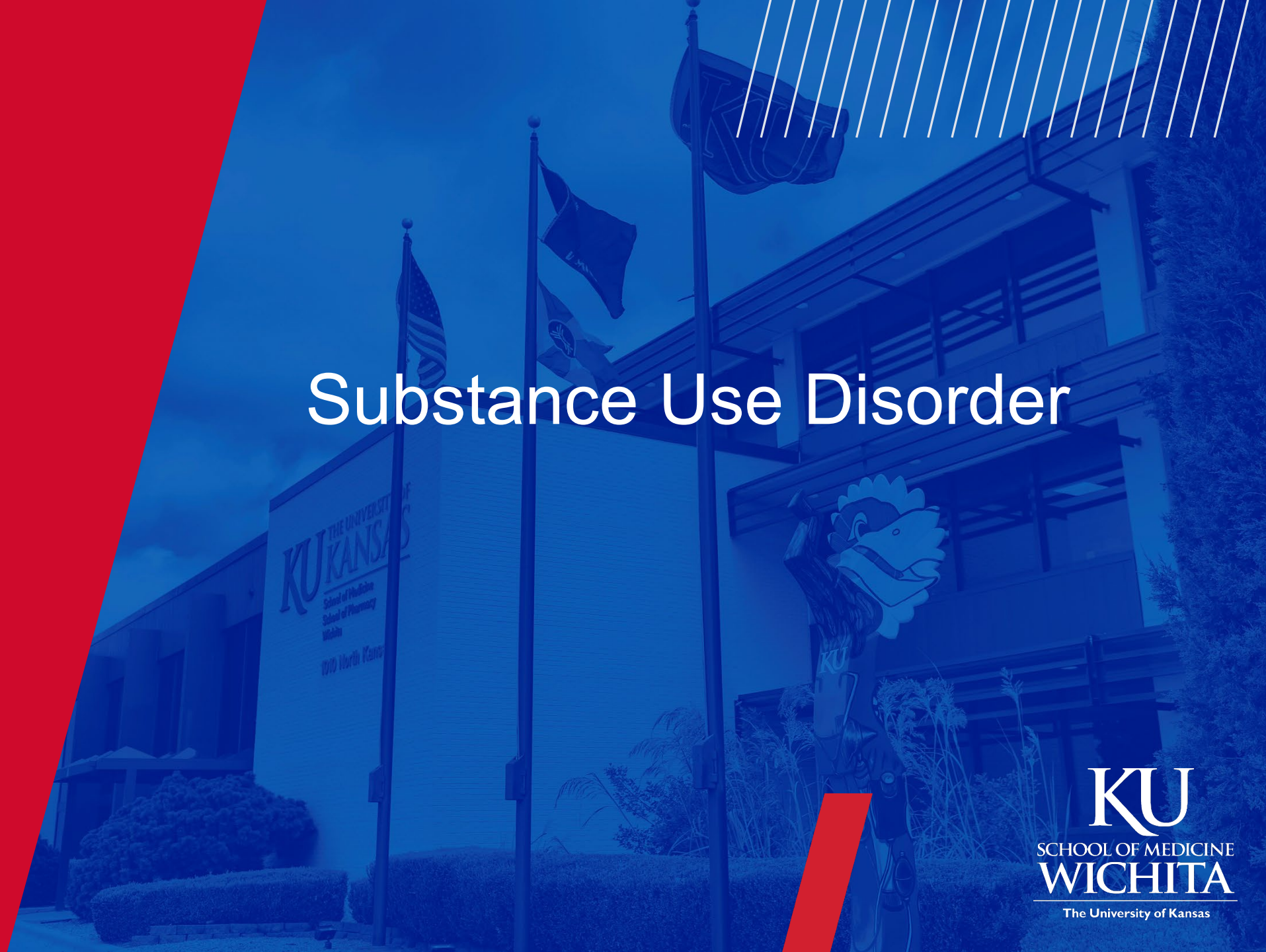
Substance Use Disorder



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Substance Use Disorder (SUD) Landscape

- 46.3 million (16.5%) Americans meet the criteria for having SUD
- 94% of them receive no treatment (Han et al., 2021)
- SUD and mental health conditions often co-occur

https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health/national-releases

Facts Not Fear ICT

- Conducted 81 key influencer interviews regarding **substance use disorder** needs of community members

- Participants reported:
  - substance use disorder deeply impacted their lives and their communities
  - barriers and facilitators to seeking treatment and resources for themselves and loved ones
  - having support from someone who has or had the same struggles was most helpful in helping them cope with substance use disorder

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Community Behavioral Health Worker (CBHW) Training

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CBHW Training

- Funded by Kansas Fights Addiction
- Developed a Community Behavioral Health Worker (CBHW) training to address mental and behavioral health needs
- Designed to increase capacity of trusted community members
- Develop a pipeline of mental and behavioral health workers who could begin to address the needs expressed during interviews

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Community Behavioral Health Worker (CBHW) Training

- 60 to 80 interactive hours over 4 to 12 weeks

- Four partner organizations
  1. Communities Organizing to Promote Equity (COPE) - CHW content
  2. Mental Health America of South Central Kansas (MHA) - mental illness
  3. Substance Abuse Center of Kansas (SACK) - substance use disorder
  4. The University of Kansas School of Medicine-Wichita - public health

COMMUNITIES ORGANIZING TO PROMOTE EQUITY

MHA Mental Health America of South Central Kansas

SACK

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CBHW Training Competencies

6 Domains, 27 Competencies

Domain	Competencies
Prevention and Public Health	Describe how social determinants of health are associated with health outcomes
	Describe the interrelated nature of mental and physical health
	Demonstrate cultural sensitivity
	Apply evidence-based strategies of health literacy to written communications

CBHW Training Competencies

Domain	Competencies
CHW Specific	Describe the roles and responsibilities of community health workers
	Navigate community-specific social and medical services
	Conduct documentation about clients
	Prepare for potential employment opportunities
	Adhere to a CHW's scope of practice

CBHW Training Competencies

Domain	Competencies
Disease, Medical Condition	Define substance use disorder and mental illness
	Identify risk factors associated with the development of a substance use disorder and mental illness

CBHW Training Competencies

Domain	Competencies
Assessment	Recognize implicit bias in self
	Serve clients who have mental illness and/or substance use disorder
	Recognize trauma and secondary trauma
	Describe strategies to protect safety of clients and self
	Recognize signs and symptoms of suicide

CBHW Training Competencies

Domain	Competencies
Stigma	Describe the impact of stigma on accessing care
	Use person-centered language

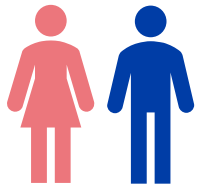
Domain	Competencies
Intervention	Develop a care plan based on a client assessment
	Implement trauma-informed care
	Apply personal strengths to improve client care
	Provide support through stages of change using motivational interviewing
	Identify prevention, treatment, and recovery resources
	Practice self-care
	Develop a crisis response plan
	Discuss potential coping strategies with clients
	Discuss strategies to manage conflict

CBHW Training Results-To Date

50 community members trained

Participant Demographics

Gender



90% 10%

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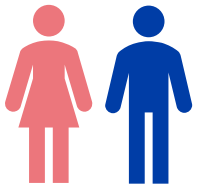
CBHW Training Results-To Date

50 community members trained

Participant Demographics

Gender



90% 10%

Average Age

42 Years

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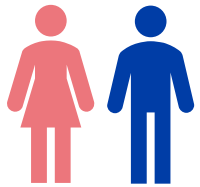
CBHW Training Results-To Date

50 community members trained

Participant Demographics

Gender

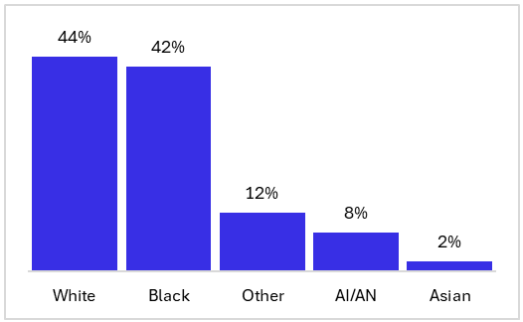


90% 10%

Average Age

42 Years

Race



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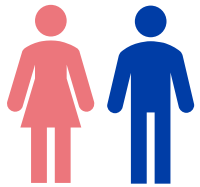
CBHW Training Results-To Date

50 community members trained

Participant Demographics

Gender

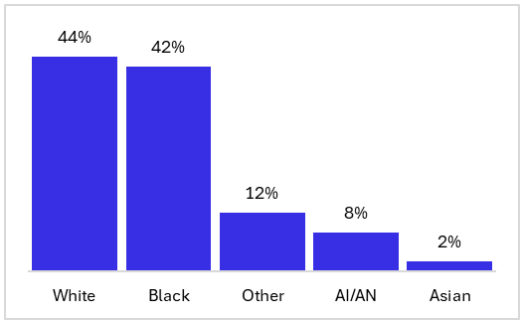


90% 10%

Average Age

42 Years

Race



Ethnicity

30% Hispanic

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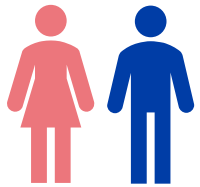
CBHW Training Results-To Date

50 community members trained

Participant Demographics

Gender



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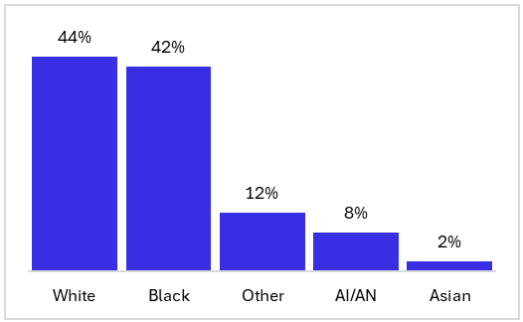
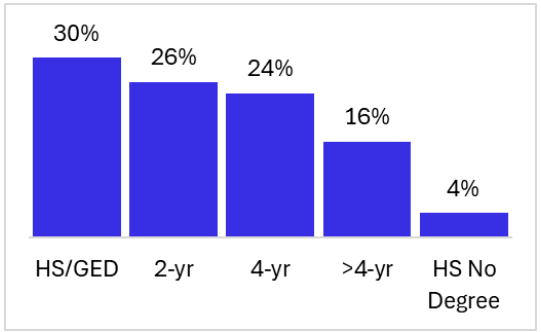


Ethnicity

30% Hispanic

Education



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CBHW Training Results-To Date

- 54% work in Sedgwick County
- 52% currently certified or becoming certified as a CHW
- 91% reported being satisfied with the training
- All competencies showed increased confidence

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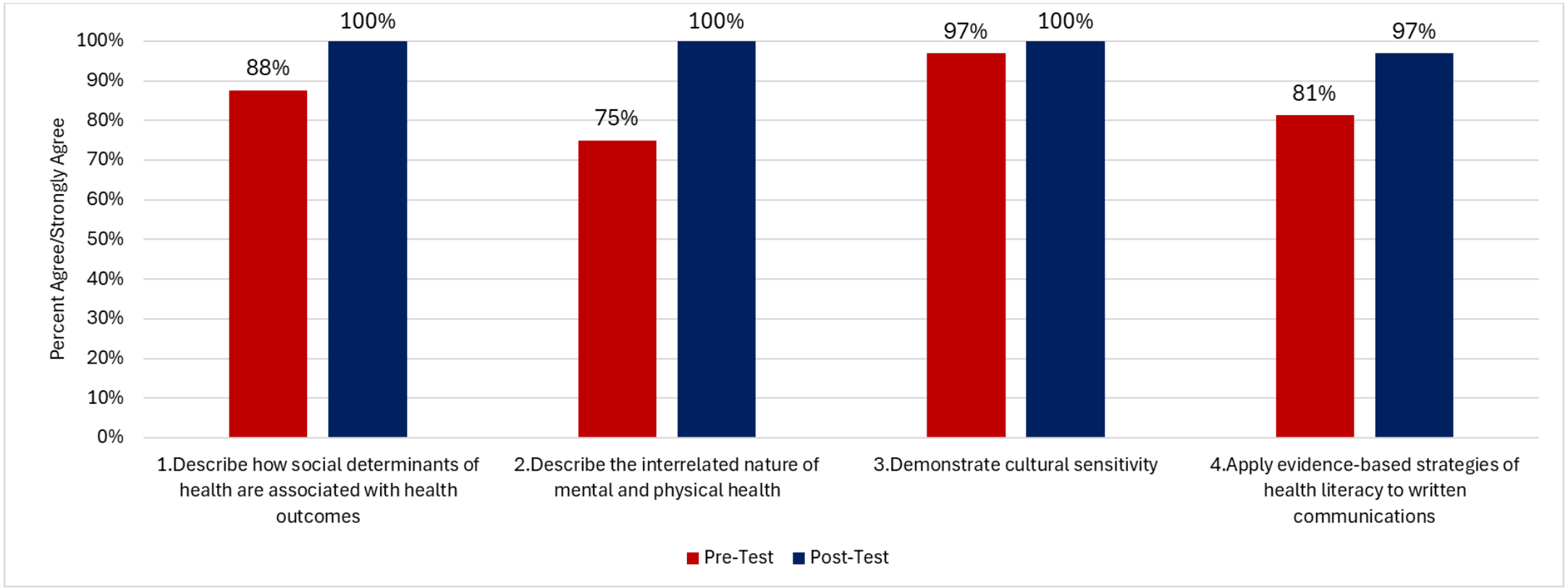
CBHW Training Results-To Date

Prevention and Public Health



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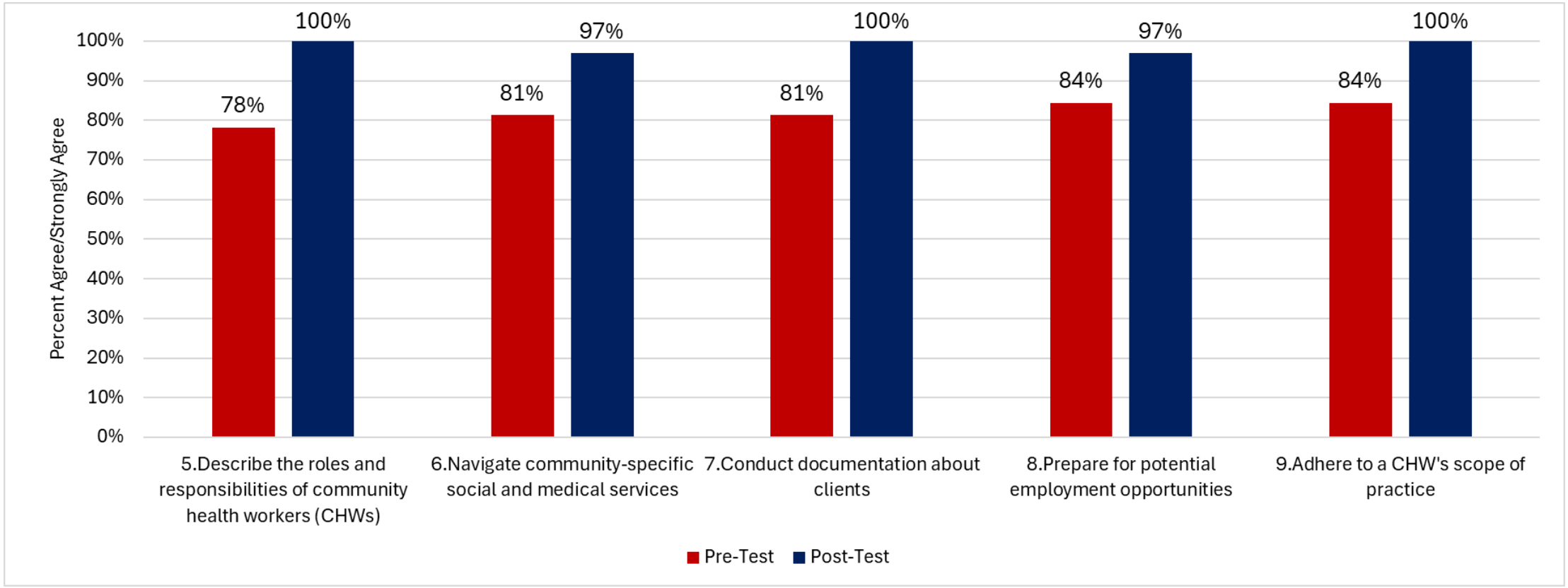
CBHW Training Results-To Date

CHW Specifics



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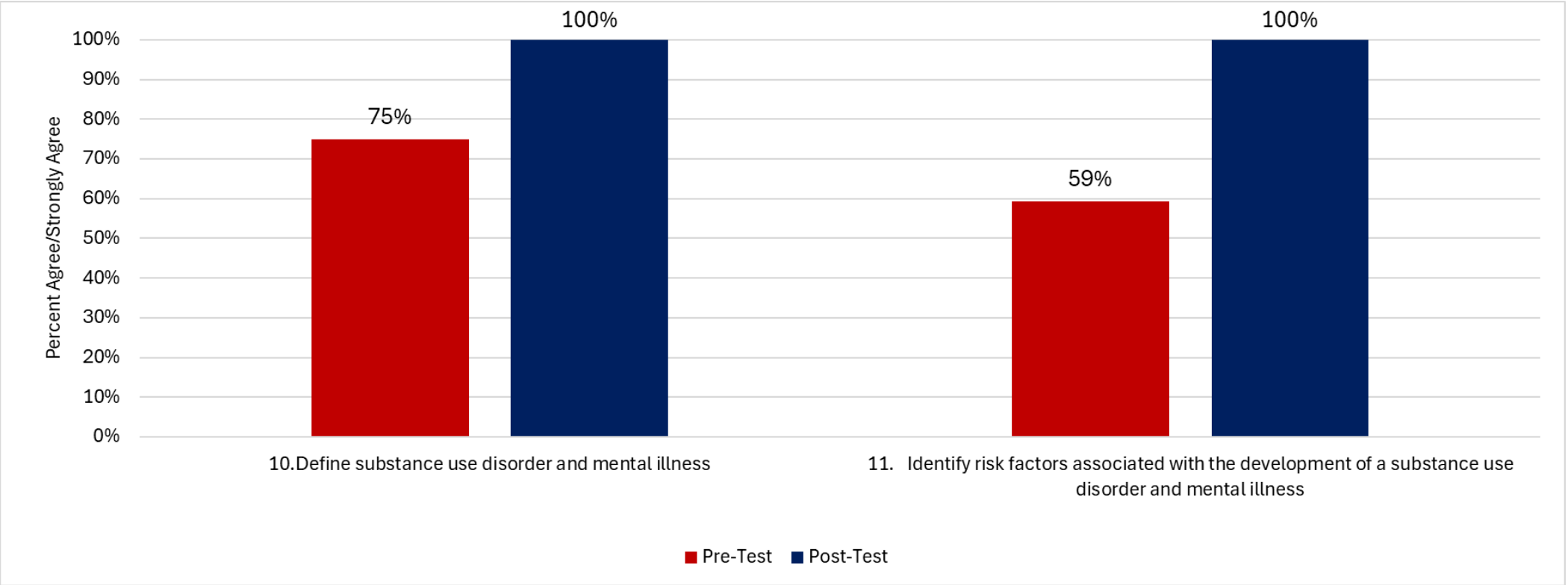
CBHW Training Results-To Date

Disease, Medical Condition



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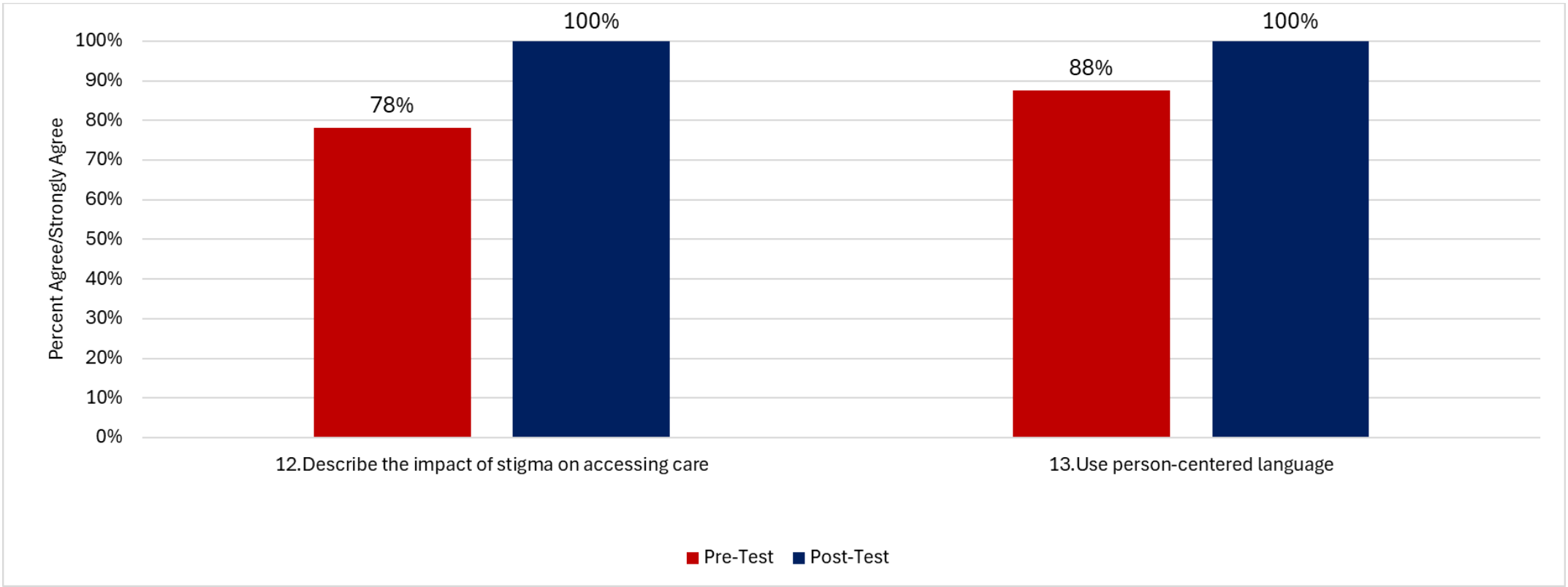
CBHW Training Results-To Date

Stigma



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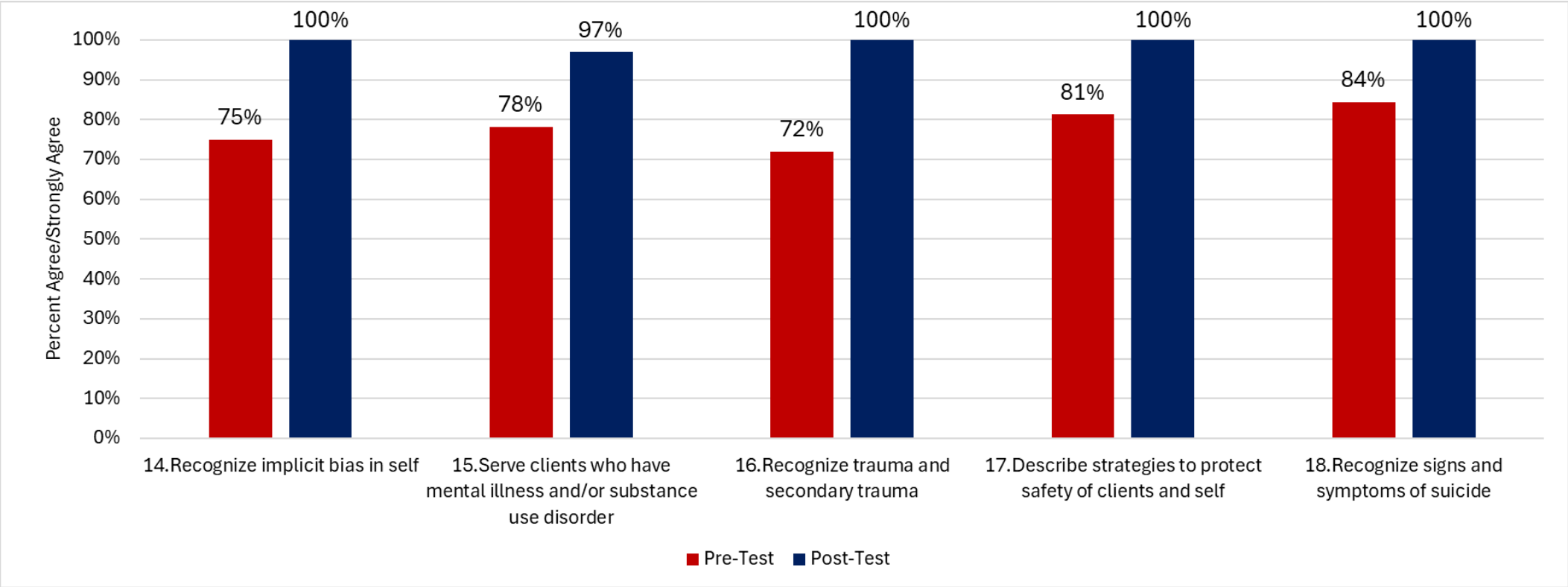
CBHW Training Results-To Date

Assessment



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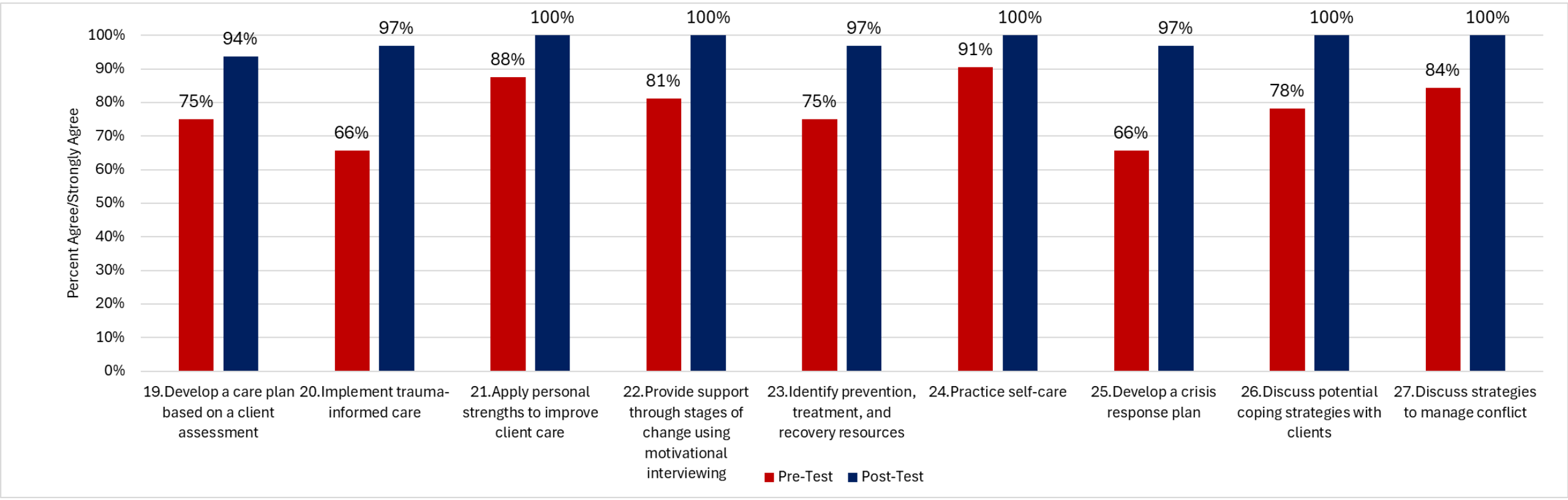
CBHW Training Results-To Date

Intervention



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CBHW Training Interviews-To Date

Knowledge or Skills Learned

"…just understanding their immediate need at the moment. Sometimes we...like I'm the type of person that if someone has an issue, has problems, I would wanna take them home, and that's not really how it works. As a community health worker, we need to get them that help that they need, that they want too, because we need to get them to the point where they decide it's their decision, it's not ours."

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CBHW Training Interviews-To Date

Knowledge or Skills Learned

"…if I'm meeting a client at their home, how to approach them. Even if they meet me in the office, also how to receive them in the office. And a lot of ways like not to...when I'm asking how to talk to them, not to blame them, but be there for them and listen to them."

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CBHW Training Interviews-To Date

Stigma

“…I’ve heard a lot of people say when it comes to a positive or a negative urinalysis for drugs, a lot of people say "piss dirty." And that just...ugh, I don't like that. But that was one thing we talked about too, was a lot of people use that. And I hear a lot of people use that. So, just kind of informing people, hey, let's not use that. There's better verbiage, you know, they had a positive UA, they had a negative UA, kind of stuff like that.”

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CBHW Training Interviews-To Date

Overall Thoughts

"…I loved it and I'm so glad it was offered. I am strongly considering going back into the field because of the training. I had gotten out of it and I kind of missed helping people, and this has kind of sparked a little fire in me to strongly consider going back…"

KU SCHOOL OF MEDICINE WICHITA
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CBHW Training Interviews-To Date

Overall Thoughts

"…It's just that I really enjoyed it. That really gave me knowledge. And knowledge is power to be able to help people."

Questions

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