

Building capacity to address trauma among women living with HIV in Ryan White Part A mental health programs: The role of evidence-based interventions and clinical supervision

Guadalupe Dominguez Plummer, MPH, CASAC¹, Kristecia S. Estem, MPH¹, Jennifer Carmona, MPH¹, Khristopher Decker, MSW, LCSW-R, CASAC²

¹New York City Department of Health and Mental Hygiene (NYC DOHMH), ²University at Buffalo, State University of New York Graduate School of Social Work

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Contact: Guadalupe Dominguez Plummer

gdominguez@health.nyc.gov

Background

- People living with HIV (PLWH) are more likely to have experienced childhood sexual and physical abuse, other traumatic events, and post-traumatic stress disorder (PTSD).¹ Trauma has been linked to low antiretroviral adherence, increased viral load, virologic failure, and faster disease progression.²
- In a national sample of women, HIV+ women were over five times more likely to have PTSD.³ A NYC study found that 37% of HIV+ women reported childhood sexual or physical abuse; as adults, 30% reported sexual abuse and 48% reported physical abuse.⁴
- One study found that HIV+ black women who reported victimization were diagnosed with higher rates of AIDS-defining conditions than HIV+ black women who did not.⁵
- To address trauma among PLWH, the NYC Department of Health and Mental Hygiene (NYC DOHMH) drew from guidelines for trauma informed care (TIC) by the Substance Abuse and Mental Health Services Administration (SAMHSA)⁶ to build the capacity of services to PLWH through the implementation of Seeking Safety and clinical supervision.

Objectives

- Define trauma and understand the principles of Trauma Informed Care.
- Discuss the relationship between trauma and poor HIV-related health outcomes.
- Discuss strategies to provide trauma informed care (TIC) and services to Black women living with HIV.
- Review the framework employed by the NYC Department of Health and Mental Health (NYC DOHMH) to integrate trauma-informed approaches into Ryan White Part A (RWPA) mental health programs.
- Highlight the importance of providing clinical supervision to support staff at all levels, including peers.

Discussion

Definition of trauma

Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically and emotionally harmful or life threatening and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional, or spiritual well-being (SAMHSA, 2014).

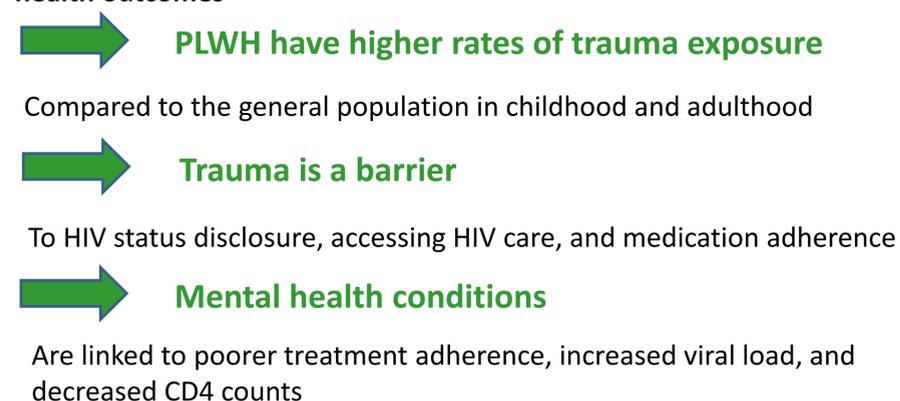
Principles of Trauma Informed Care

- Safety
- Trustworthiness
- Peer Support
- Collaboration
- Empowerment and Choice
- Cultural, Historical and Gender Issues (SAMHSA, 2014)

Examples of TIC Approaches

Asking permission from the individual
"Is it okay if I give you a hug?"
 Demonstrating empathy and compassion
"Would you like to share what happened?"
 Informing the individual what you are going to do
"In order to ensure confidentiality during our session, I will be closing the office door. Is this okay with you?"

Relationship between trauma and poor HIV-related health outcomes



NYC DOHMH framework to integrate trauma-informed approaches into RWPA mental health programs

- **Trauma Informed Care Training**
Overview of trauma, principles of TIC, best practices for providing trauma informed care services
- **2-day Seeking Safety Training**
Present-focused intervention to attain safety from post-traumatic stress, triggers, and substance use
- **Integration of Peers into Ryan White Part A Programs (RWPA)**
Shared lived experience, NYS DOH AIDS Institute Peer Certification, specialized training in TIC for peers
- **Providing Effective Trauma Supervision Training**
Overview of clinical supervision, trauma related transference and countertransference, clinician self-care, compassion fatigue, vicarious traumatization, collaborative supervision problem solving

Strategies to provide TIC and services to Black women

- Integrate principles of TIC as a universal approach
- Provide training to staff in trauma-specific approaches
- Change organizational practices to include TIC
- Create a safe environment (both physical and social-emotional)
- Hire peers to support clients in accessing care, social services, and health promotion

The importance of providing clinical supervision to support staff at all levels, including peers

- Provides a safe and confidential environment for staff to reflect on and discuss their work
- Focuses on supporting staff in their personal and professional development
- Creates an opportunity for the prevention of and/or proactive response to burnout, compassion fatigue, and vicarious trauma among staff
- Reduces likelihood of significant client re-traumatization
- Develops staff capacity to model the principles of TIC

Conclusion

- Adopting a TIC framework is essential to the delivery of mental health services for Black women living with HIV.
- A universal TIC approach ensures that staff at all levels have the capacity and support to effectively address trauma experiences among their clients.

References

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