

Impact of Lifetime Trauma, Abuse and Violence on Women Living with HIV

Addressing the Intersection of Trauma, Violence & HIV

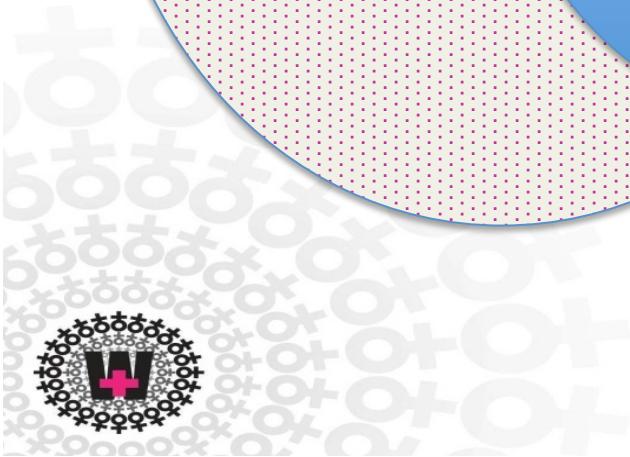
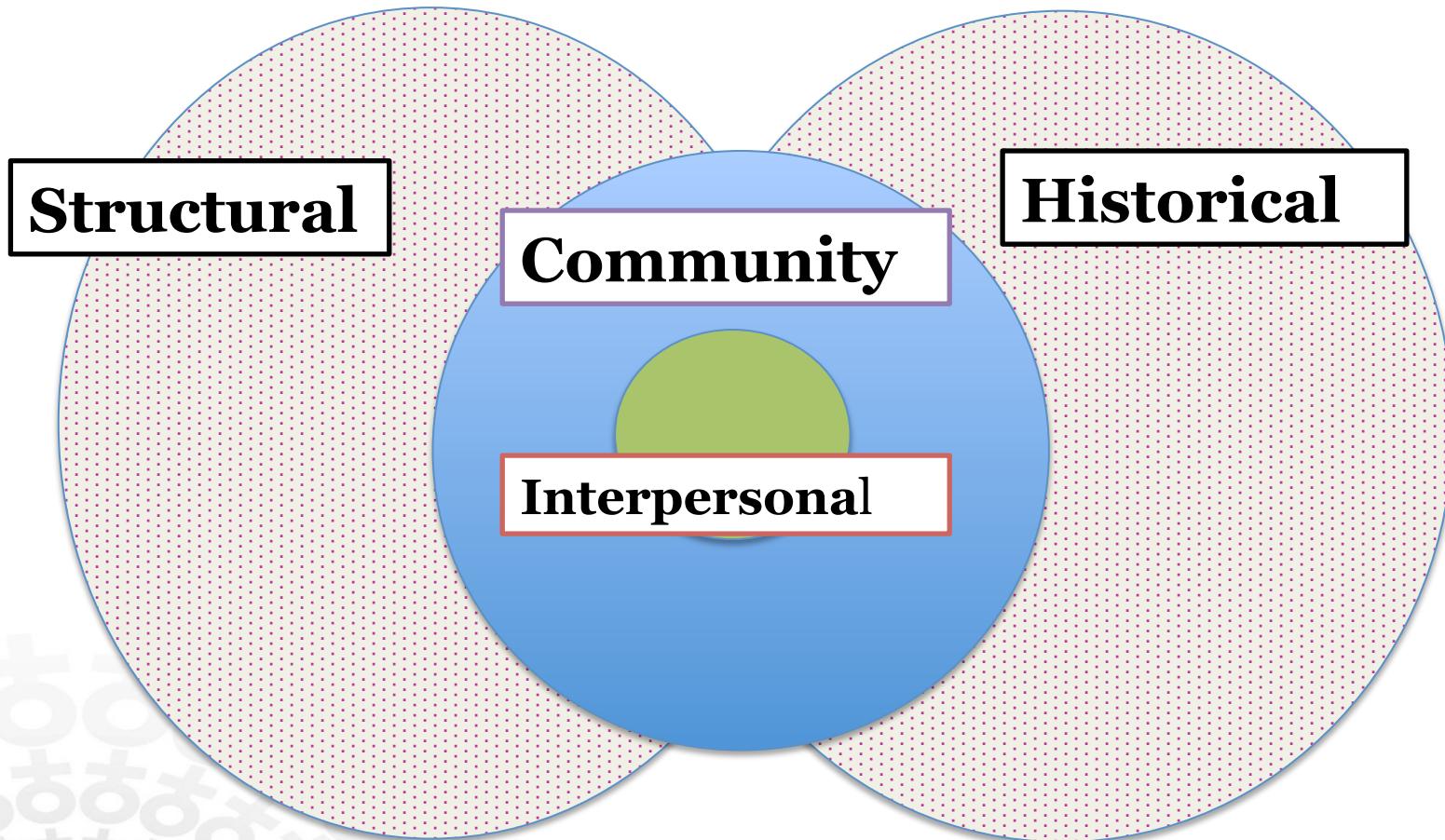
July 20, 2015

The California Endowment

Los Angeles, CA

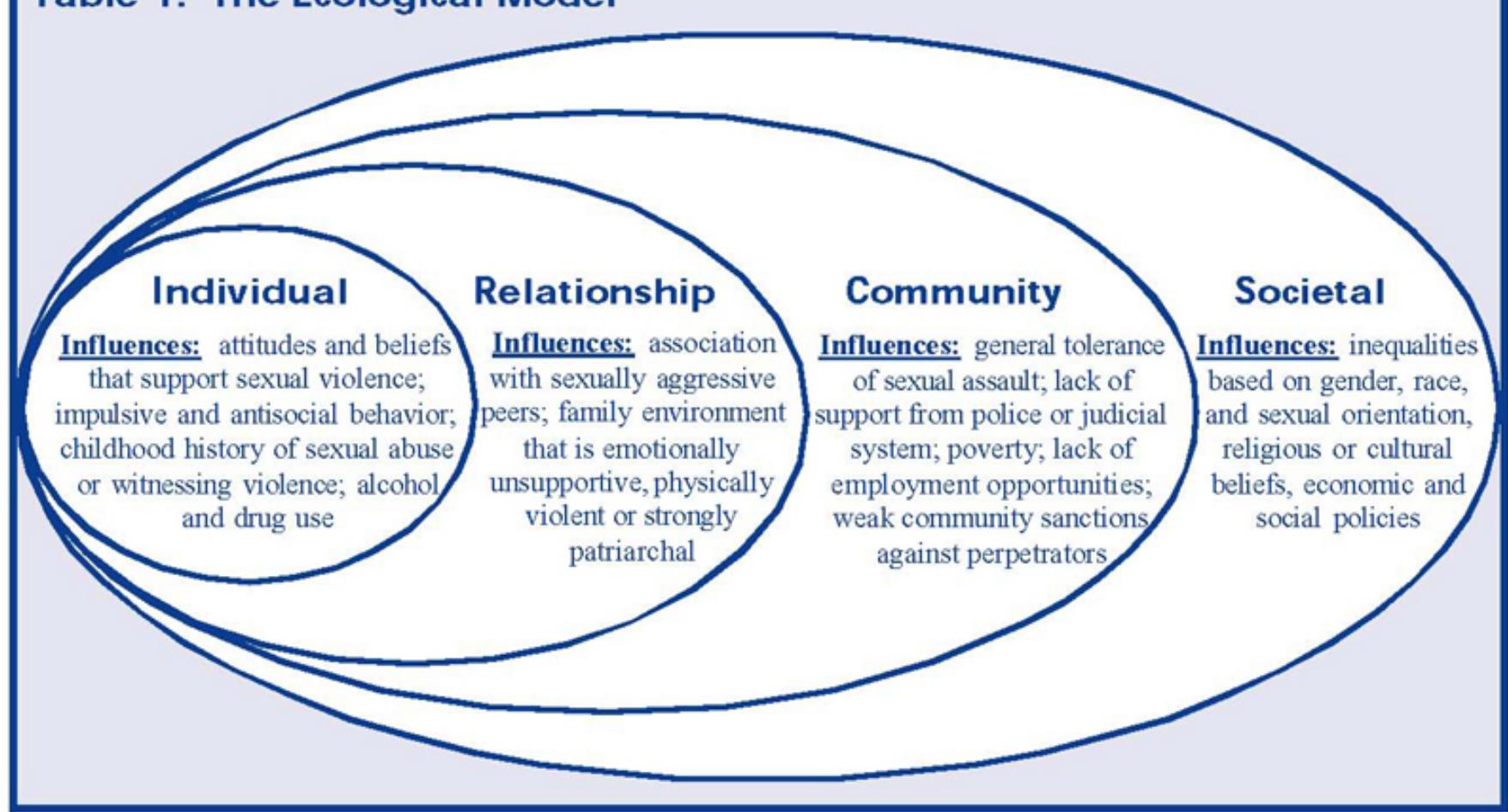


Trauma experiences



Social – Ecological Model for Understanding Sexual Violence

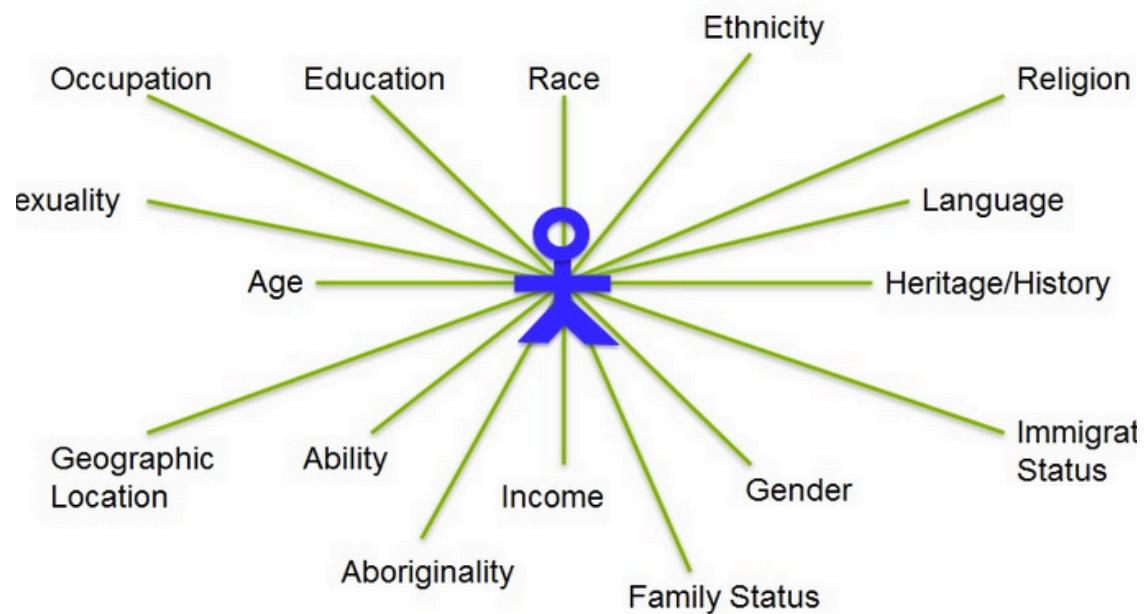
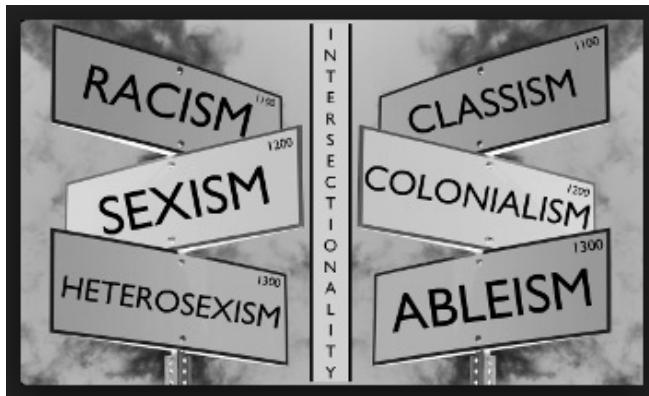
Table 1. The Ecological Model



Dahlberg LL, Krug EG. Violence-a global public health problem. In: Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, eds. World Report on Violence and Health. Geneva, Switzerland: World Health Organization; 2002:1–56.



Women's lives and experiences are intersectional



Historical Trauma

“Cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences”

- Brave Heart, 2011

Multigenerational trauma experienced by a specific cultural group

- Cumulative & collective

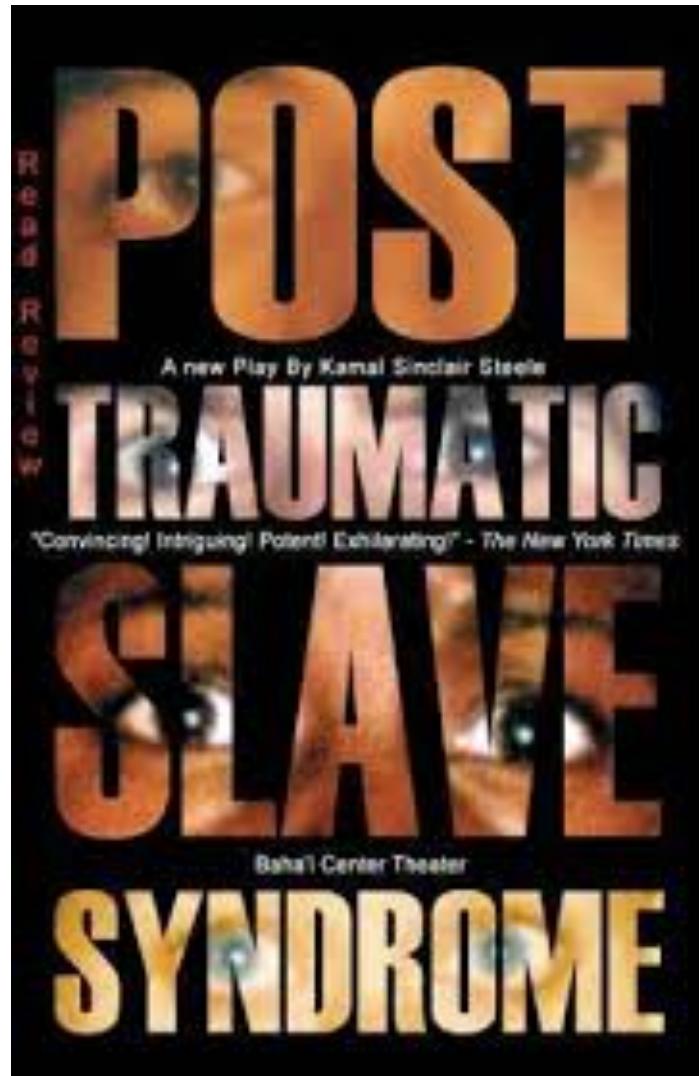


Manifestations of Historical Trauma

- **Historical Unresolved Grief**
 - Grief as the result of historical trauma that has not been adequately expressed, acknowledged, or otherwise resolved.
- **Disenfranchised Grief**
 - Loss cannot be voiced publicly or that loss is not openly acknowledged by the public.
- **Internalized Oppression**
 - As the result of historical trauma, traumatized people may begin to internalize the views of the oppressor



erasure conflict
history blighted renewal
uprooting sign-of-hope
decentering-neighborhoods remembrance
unhealthy-for-the-community exhumation
remnant recovery-of-memory
culture-of-respect resistance
memories bodies legacy
buried space demise



Joy DeGruy

Wealth Gap & Women of Color

- ✓ Single Black and Hispanic women have a median wealth of \$100 and \$120 respectively; median for a single white woman is \$41,500.
- ✓ Nearly HALF of all single Black and Hispanic women have **zero or negative wealth** (debts exceed assets)
- ✓ Social Security is the only source of retirement income for more than 25% of Black women



Structural violence against WLHIV Under Surveillance by Medicaid

by [ADMIN](#) on [APRIL 19, 2012](#) · [LEAVE A COMMENT](#)



“But I also know that this woman actually has control over what ultimately is a life or death decision with the stroke of her pen. And clearly she is in a bad mood... What I have is a very expensive medical condition and no way to pay for it... it is that simple. I need help. **We as women living with HIV are driven into poverty and held there, and we are drowning.**”



By [Kat Griffith](#) in Peoria, IL

Can I Reach for the American Dream?

Posted on April 20, 2012 by [pwnusa](#)

Can I Reach for the American Dream?

by Sonia Rastogi



April 17th, 2012 was Tax Day as well as Equal Pay Day (read Teresa Sullivan's Wage Gap blog), a day established to bring attention to the pay gap for women in the U.S. For many women living with HIV, Tax Day brings home the truth that regardless of a woman's financial status, an HIV diagnosis is frequently a sentence to a lifetime of poverty.

HIV CRIMINALIZATION

Are You At Risk?

when
~~sex~~ is a
crime
& spit a
dangerous
weapon:



Laws and policies criminalizing HIV exposure and mandating disclosure may increase potential for coercion and abuse, and can make it harder for WLHIV to leave violent, unhealthy or abusive relationships

"I dated a guy who knew my HIV status, but when his family found out, he acted like he didn't know and pressed charges [on] me. I almost lost everything . It has taken me a long time to disclose to



"I have felt ashamed of my body and worthless. My ex would tell me that nobody else would ever want me, because of my HIV"

"My partner didn't want anyone else to know about my HIV status. He didn't even allow me to see my HIV doctor, because he was afraid of people finding out. So I basically had no support and was not getting care."

I was in an abusive relationship for 4 years. When I attempted to leave, he threatened to come after me under HIV criminalization laws because I didn't disclose to him when we first got involved. He also threatened to have my kids

WLHIV are uniquely vulnerable to violence, coercion, and abuse

“There is a big black X from head to toe. I am diseased and unworthy of feeling good about my body again.”

“I feel dirty and ashamed.”

“It caused me to loose [sic] all hope as a woman where I felt ugly and that I had to settle for whatever man wanted to date me.”

“I have had a guy tell me that I should have told him before kissing him that I was positive. He was convinced HIV is transmitted through saliva. **He even threw in that he could prosecute me for murder.** Apparently there is grave misunderstanding about disclosure laws amongst the general public.”

... these and other factors (*housing instability, economic insecurity*) may complicate leaving an abusive relationship



Violence disproportionately impacts transgender women of color

- Almost three-quarters of LGBTQ homicide victims in 2013 were transgender women. 67% were transgender women of color
- Transgender women were 6 times more likely to experience physical violence when interacting with the police than other LGBTQ survivors of violence
- Transgender people of color were 1.8 times more likely to experience violence in shelters than other LGBTQ survivors of violence
 - *National Coalition of Anti-Violence Programs (NCAVP) Annual Report, 2014*





Motherhood is a socially valued identity

- Increasingly “parenthood”
- For many WLHIV, motherhood may be the only socially valued identity available to them (Barnes, et al 2009)
- Critical for providers to understand motivation, including cultural factors related to conception, sexuality, and relationships for PLHIV



Trauma-Informed Care from a Social Justice Perspective

"Social ideals of equality cannot be pursued in relations that promote inequality. The way we do things is not just a means to an end, but an end in itself."

Prilleltensky, I., & Nelson, G. (2002). *Doing psychology critically: Making a difference in diverse settings*. New York: Palgrave Macmillan. (p. 29).



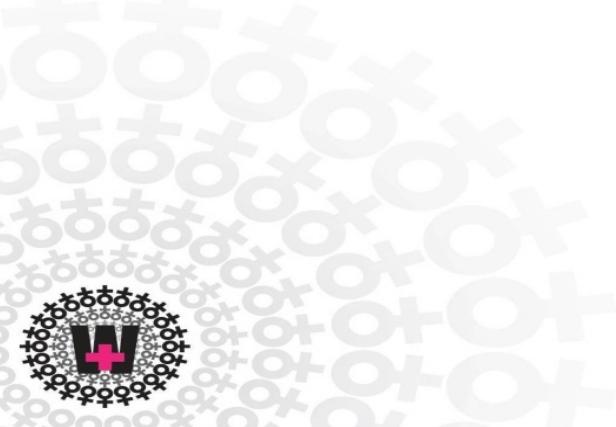
The effects of trauma/violence do not end with HIV diagnosis and the relationship between them is complex.

This is not an old problem that's been solved.

PWN-USA conducted a survey of 179 women in 2013: 69% of respondents had been sexually assaulted, 34% had been sexually assaulted for the first time before the age of 13, and 72% identified as survivors of IPV/DV.

HIV diagnosis may trigger or augment physical violence

One large study reported that over 1 in 5 WLHIV reported physical harm since HIV diagnosis; with over half these events attributed to being HIV-positive.



Working Definition of Trauma

Individual trauma results from:

- An event, series of events, or a set of circumstances
- That are **experienced** by an individual as physically and/or emotionally harmful or threatening and
- Has lasting **adverse effects** on the individual's functioning and mental, physical, social, emotional and/or spiritual wellbeing.

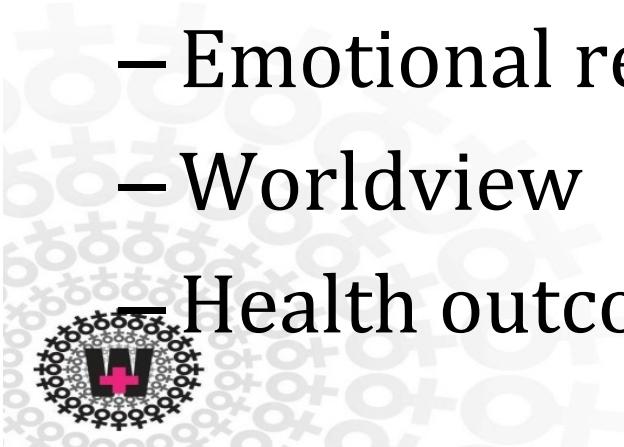
SAMHSA, 2013



Effects of Trauma

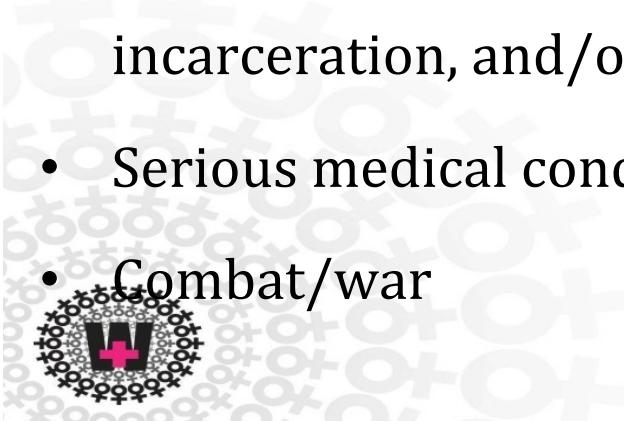
Trauma can impact a woman's:

- Identity
- Sense of purpose
- Relationships
- Expectations of self and others
- Emotional regulation
- Worldview
- Health outcomes



Examples of Potentially Traumatic Life Experiences

- Physical, sexual, or emotional abuse
- Childhood neglect (basic needs are not met for food or shelter)
- Death of a parent
- Violent loss of a loved one (suicide/homicide)
- Rape
- Children living in homes with drug addiction, alcoholism, incarceration, and/or violence
- Serious medical conditions
- Combat/war



What is PTSD?

- Post Traumatic Stress Disorder (PTSD) is a mental health diagnosis in which people experience:
 - **Re-experiencing** of traumatic event(s) through intrusive memories, nightmares, flashbacks, and reactivity to trauma-related cues
 - **Avoidance**
 - Persistent avoidance of reminders of the trauma
 - Avoiding people, places, activities associated with the trauma
 - **Negative changes in mood or cognition**
 - Difficulty experiencing full range of emotions, persistent negative feelings such as fear, horror, guilt or shame, loss of interest in activities, detached from others, sense of foreshortened future
 - **Negative changes in arousal**
 - sleep trouble, increased irritability and anger, difficulty concentrating, hypervigilance, exaggerated startle response, self-destructive or reckless behavior



Complex PTSD

Complex Trauma: serial trauma, physically or emotionally (e.g., repeated childhood physical and/or sexual abuse, witnessing ongoing IPV, experiencing long-term IPV, organized child prostitution..)

CPTSD: includes “the core symptoms of PTSD (re-experiencing of the traumatic event(s), avoidance/numbing, negative changes in mood or cognition and hyper-arousal) in conjunction with disturbances in a range of self regulatory capacities”

Symptoms include: trouble regulating and handling emotions and relationships, and feelings low self-worth and low self-efficacy.

Cloitre, M., et al., *The ISTSS Expert Consensus Treatment Guidelines for Complex PTSD in Adults*. 2012.



Rates of trauma and PTSD in WLHIV are much higher

Meta-analysis of all studies among US WLHIV

Categories	Number of Studies	Pooled n	Prevalence (%)	95% Confidence Interval	Reference Prevalence
Intimate Partner Violence	8	2285	55.3	36.1 - 73.8	24.8
Childhood Sexual Abuse	7	3013	39.3	33.9 - 44.8	16.2
Childhood Physical Abuse	6	1582	42.7	31.5 - 54.4	22.9
Childhood Abuse Unspecified	2	232	58.2	36.0 - 78.8	31.9
Lifetime Sexual Abuse	8	1182	61.1	47.7 - 73.8	12.0
Lifetime Abuse Unspecified	6	1065	71.6	61.0 - 81.1	39.0
Recent PTSD	6	499	30.0	18.8 - 42.7	5.2

29 studies met our inclusion criteria, resulting in a sample of 5,930 individuals.

Machtlinger EL, Wilson T, Haberer J, Weiss, D. **Psychological trauma in HIV-positive women: a meta-analysis.** AIDS and Behavior. January 17, 2012



Rates of trauma and PTSD in WLHIV are much higher

Meta-analysis of all studies among US WLHIV

Categories	Number of Studies	Pooled <i>n</i>	Prevalence (%)	95% Confidence Interval	Reference Prevalence
Intimate Partner Violence	8	2285	55.3	36.1 - 73.8	24.8
Childhood Sexual Abuse	7	3013	39.3	33.9 - 44.8	16.2
Childhood Physical Abuse	6	1582	42.7	31.5 - 54.4	22.9
Childhood Abuse Unspecified	2	232	58.2	36.0 - 78.8	31.9
Lifetime Sexual Abuse	8	1182	61.1	47.7 - 73.8	12.0
Lifetime Abuse Unspecified	6	1065	71.6	61.0 - 81.1	39.0
Recent PTSD	6	499	30.0	18.8 - 42.7	5.2

Machtlinger EL, Wilson T, Haberer J, Weiss, D. **Psychological trauma in HIV-positive women: a meta-analysis.** AIDS and Behavior. January 17, 2012



Rates of trauma and PTSD in WLHIV are much higher

Meta-analysis of all studies among US WLHIV

Categories	Number of Studies	Pooled <i>n</i>	Prevalence (%)	95% Confidence Interval	Reference Prevalence
Intimate Partner Violence	8	2285	55.3	36.1 - 73.8	24.8
Childhood Sexual Abuse	7	3013	39.3	33.9 - 44.8	16.2
Childhood Physical Abuse	6	1582	42.7	31.5 - 54.4	22.9
Childhood Abuse Unspecified	2	232	58.2	36.0 - 78.8	31.9
Lifetime Sexual Abuse	8	1182	61.1	47.7 - 73.8	12.0
Lifetime Abuse Unspecified	6	1065	71.6	61.0 - 81.1	39.0
Recent PTSD	6	499	30.0	18.8 - 42.7	5.2

Machtlinger EL, Wilson T, Haberer J, Weiss, D. **Psychological trauma in HIV-positive women: a meta-analysis.** AIDS and Behavior. January 17, 2012



Table 2**Heath-related Characteristics**

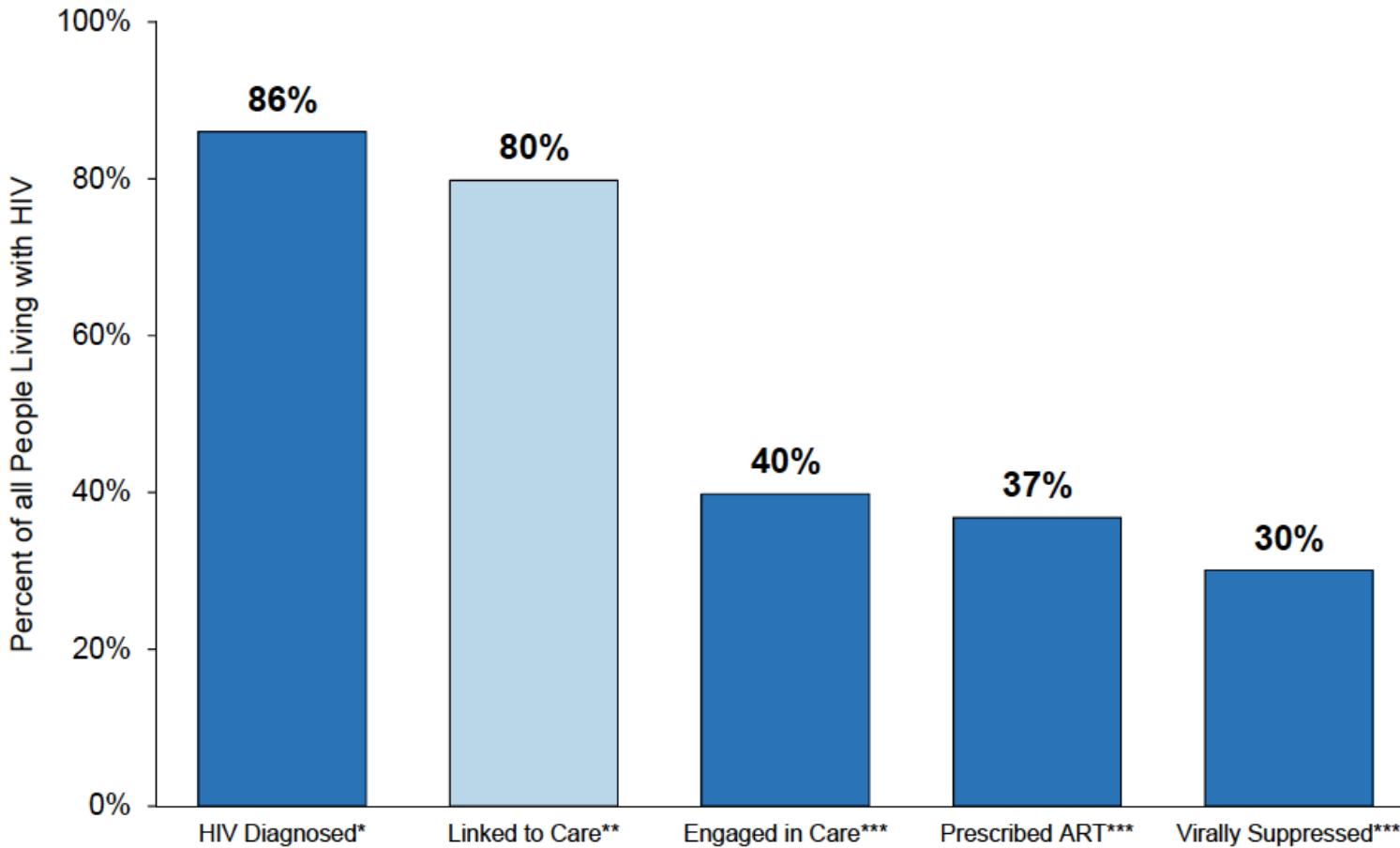
Description	Sample size	Number (percent) of participants with each characteristic
Mental health	111	
Depression		53 (47.7%)
Bipolar		8 (7.2%)
Anxiety		9 (8.1%)
Schizophrenia/psychosis		3 (2.7%)
Other		4 (3.6%)
Low self efficacy	109	18 (16.5%)
Trauma		
Abused, threatened, and/or victim of violence in the past 30 days	110	19 (17.3%)
Abused, threatened, and/or victim of violence in lifetime	110	79 (71.8%)
Coerced to have sex in the past 30 days	110	9 (8.2%)
Coerced to have sex in lifetime	110	71 (64.5%)
Median CD4 count (cells/ μ l) at survey	93	387 (range 0 – 1363)
Viral load (copies/ml) at survey	90	
<75		33 (36.7%)
75-9,999		30 (33.3%)
10,000+		27 (30.0%)
Antiretroviral therapy		
On ART*	112	63 (56.2%)
On ART and detectable viral load	90	17 (18.9%)
Self-reported adherence < 90% by VAS**	63	15 (23.8%)

*ART = highly active antiretroviral therapy; **VAS = visual analog scale

Machtinger EL, et al. **Recent trauma is associated with antiretroviral failure and transmission risk behavior among HIV-positive women and female-identified transgenders** AIDS and Behavior. March 12, 2012



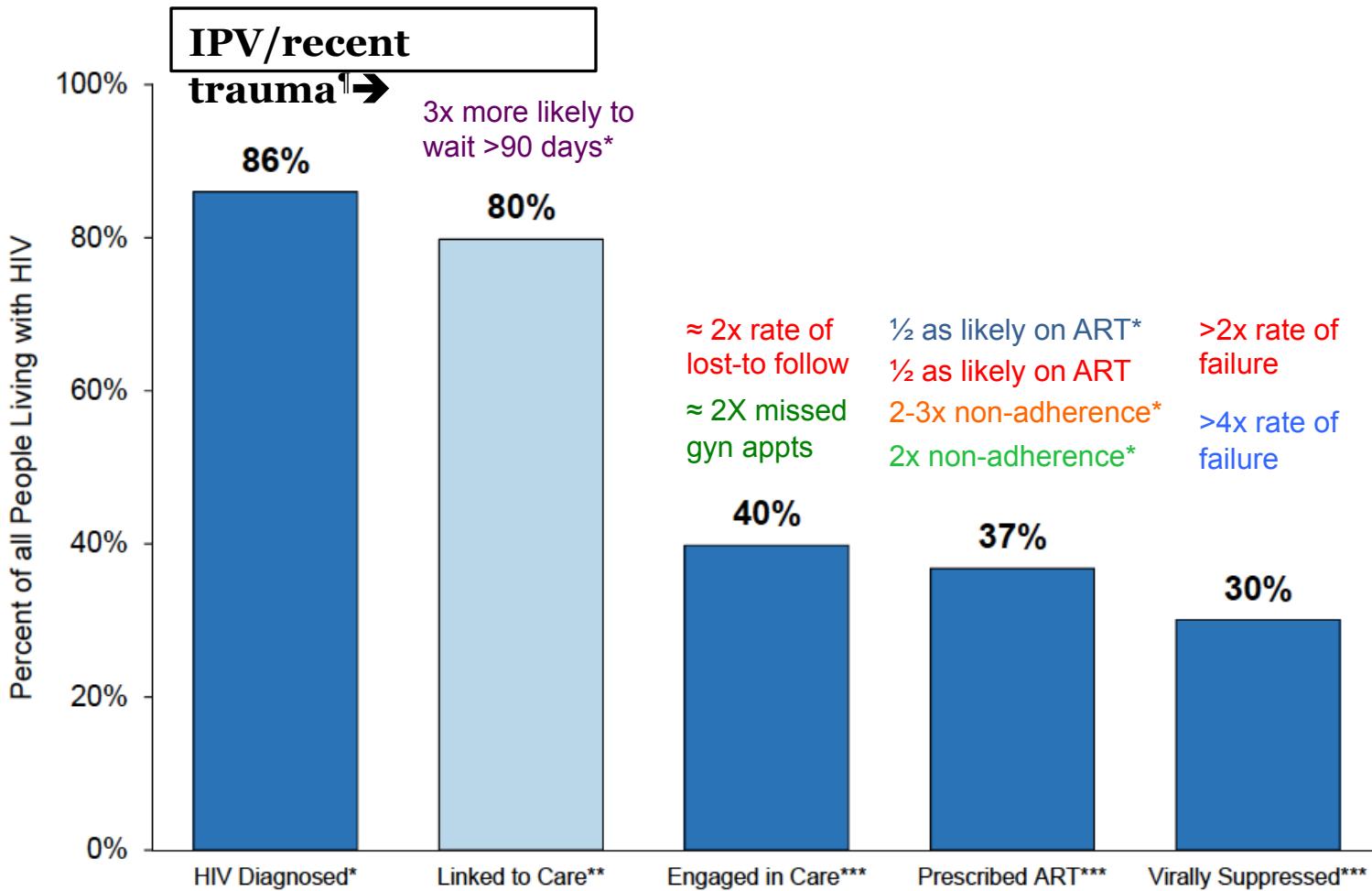
The HIV Care Continuum in the United States, 2011.



Centers for Disease Control and Prevention. Monitoring selected national HIV prevention and care objectives by using HIV surveillance data—United States and 6 dependent areas—2012. HIV Surveillance Supplemental Report 2014;19(No. 3). <http://www.cdc.gov/hiv/library/reports/surveillance/>. Published November 2014. Accessed January 16, 2014



The HIV Care Continuum in the United States, 2011.



Siemieniuk RA, et al. AIDS Patient Care STDs. 2010*

Siemieniuk, RA, et al. J Acquir Immune Defic Syndr. 2013

Illangasekare, S., et al. Women's Health Issues. 2012

Kalokhe, A.S., et al. AIDS Patient Care and STDs. 2012*

Lesserman, L, et al. AIDS PATIENT CARE and STDs. 2008*

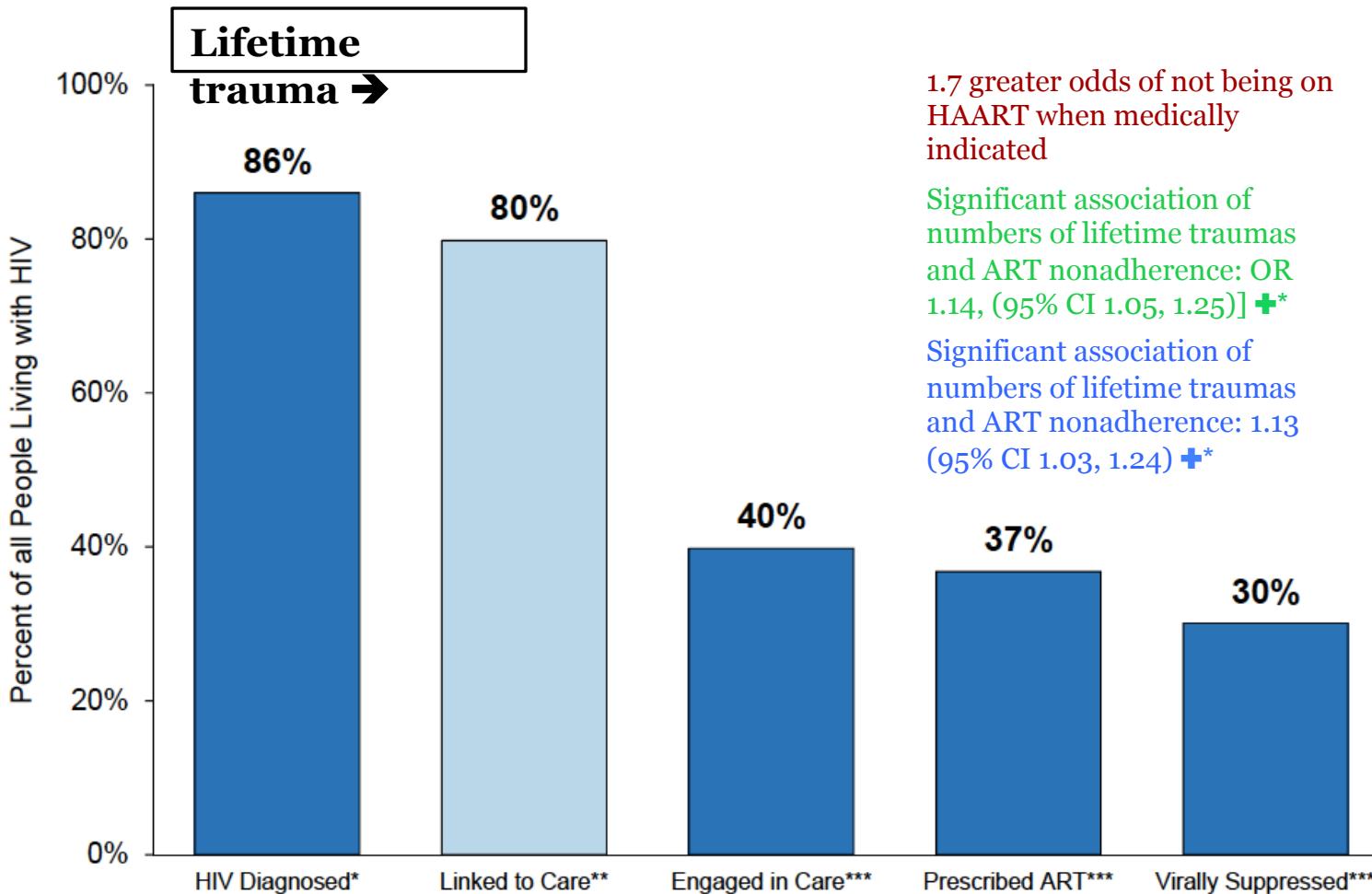
Magavero, MJ, et al. Psychosomatic Medicine. 2009.*

Machunger EL, et al. AIDS and Behavior. 2012

* Includes both men and women

† Includes "Stressful Life Events"

The HIV Care Continuum in the United States, 2011.



1.7 greater odds of not being on HAART when medically indicated

Significant association of numbers of lifetime traumas and ART nonadherence: OR 1.14, (95% CI 1.05, 1.25) +*

Significant association of numbers of lifetime traumas and ART nonadherence: 1.13 (95% CI 1.03, 1.24) +*

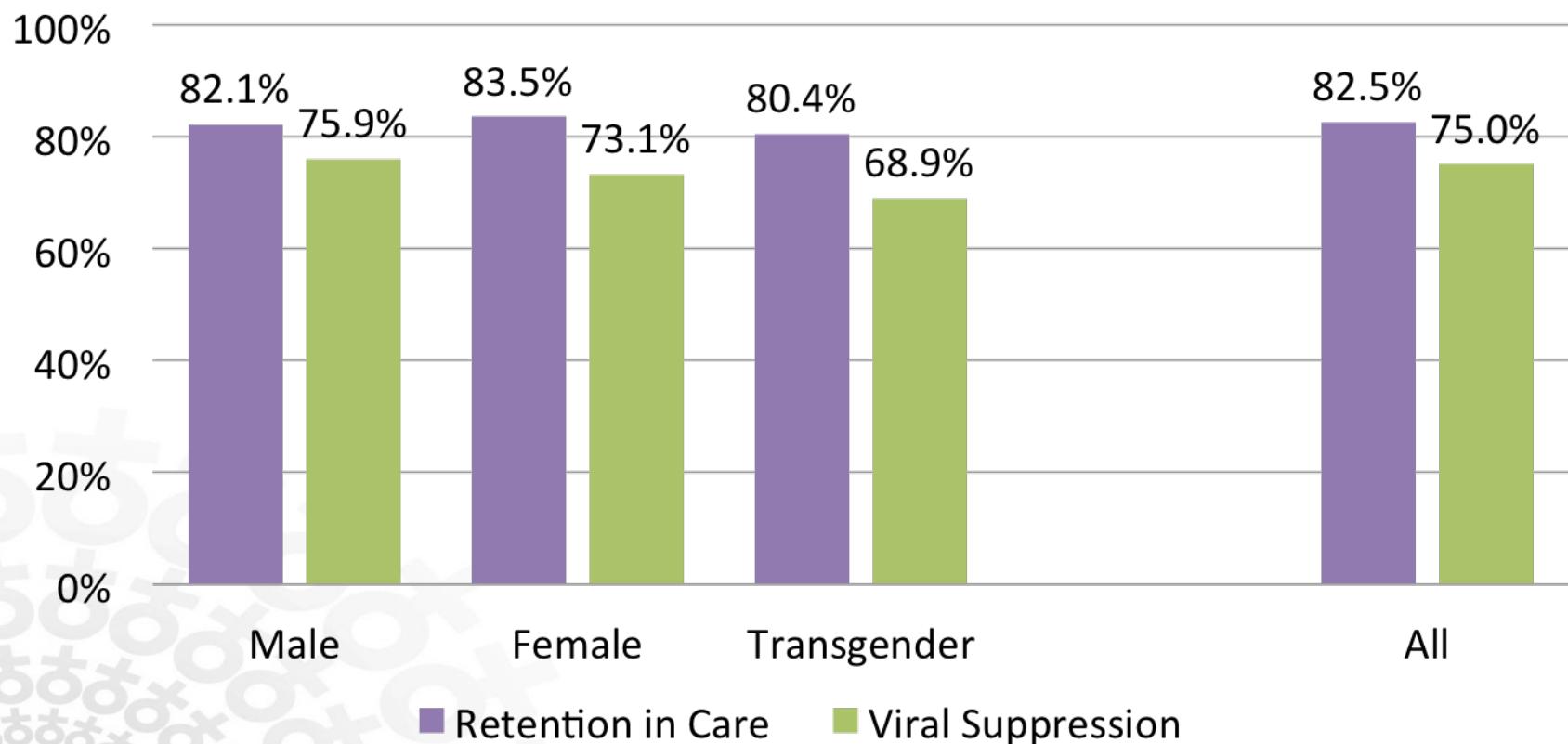
Cohen, MH, et al. Medically Eligible Women Who Do Not Use HAART: The Importance of Abuse, Drug Use, and Race. Am J Public Health.2004;94:1147–1151)

Mugavero M, et al. Barriers to antiretroviral adherence: the importance of depression, abuse, and other traumatic events. AIDS patient care and STDs. 2006 Jun;20*

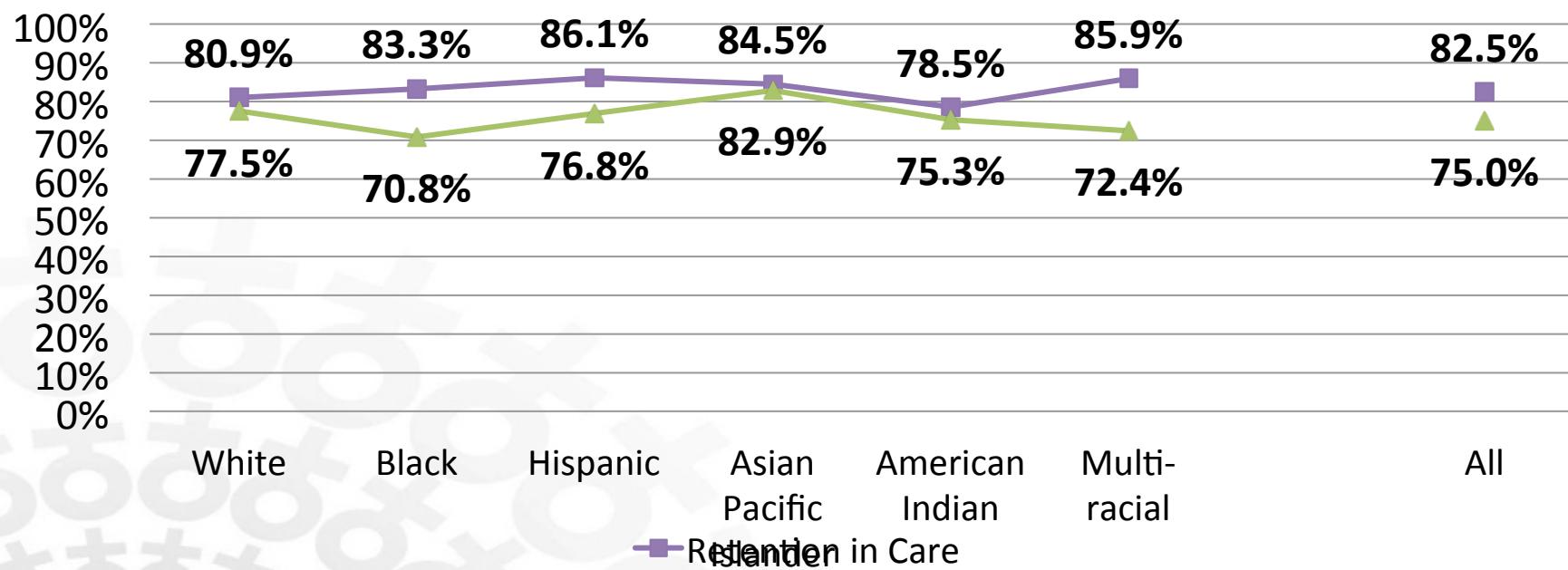
Pence BW, et al. Childhood trauma and health outcomes in HIV-infected patients: an exploration of causal pathways. Journal of acquired immune deficiency syndromes. 2012 Apr 1;59(4):409-66.

* Includes both men and women
+ bivariate data; association also significant on multivariate analysis

Retention in Care and Viral Load Suppression by Gender – RSR 2012 data



Viral Load Suppression and Retention in Care by Race/Ethnicity for Women, 2012



Retained in care: had at least 1 OAMC visit before September 1, 2012, of the measurement year and had at least 2 visits 90 days or more apart
Viral suppression: had at least one OAMC visit, at least one viral load count, and last viral load test <200



“Interestingly, while women had higher levels of retention [in the Ryan White program] than men, their viral suppression was lower, suggesting that there may be a significant gap in ART use and/or adherence.” – Doshi et al

High Rates of Retention and Viral Suppression in United States HIV Safety Net System: HIV Care Continuum in the Ryan White HIV/AIDS Program, 2011

Clinical Infectious Diseases Advance Access published September 15, 2014



Impact of trauma on other HIV-specific outcomes

Recent or lifetime trauma associated with:

- **HIV risk factors/HIV incidence**

Maman S, Campbell J, Sweat MD, Gielen AC. The intersections of HIV and violence: directions for future research and interventions. *Soc Sci Med.* 2000;50:459–78.*

Jewkes RK, Dunkle K, Nduna M, et al. Intimate partner violence, relationship power inequity, and incidence of HIV infection in young women in South Africa: a cohort study. *Lancet.* 2010;376:41–8.

- **Faster disease progression**

Pence BW, et al. Childhood trauma and health outcomes in HIV-infected patients: an exploration of causal pathways. *Journal of acquired immune deficiency syndromes.* 2012 Apr 1;59(4):409-16*

Mugavero, MJ, et al. Predictors of AIDS-related morbidity and mortality in a southern U.S. Cohort. *AIDS Patient Care STDS* 2007 Sep;21(9):681-90.] *

Leserman, J, et al. Progression to AIDS, a clinical AIDS condition and mortality: psychosocial and physiological predictors. *Psychol Med Aug;*32(6):1059-73.*

- **More hospitalizations**

Pence BW, et al. Childhood trauma and health outcomes in HIV-infected patients: an exploration of causal pathways. *Journal of acquired immune deficiency syndromes.* 2012 Apr 1;59(4):409-16*.

- **Almost twice the rate of death***

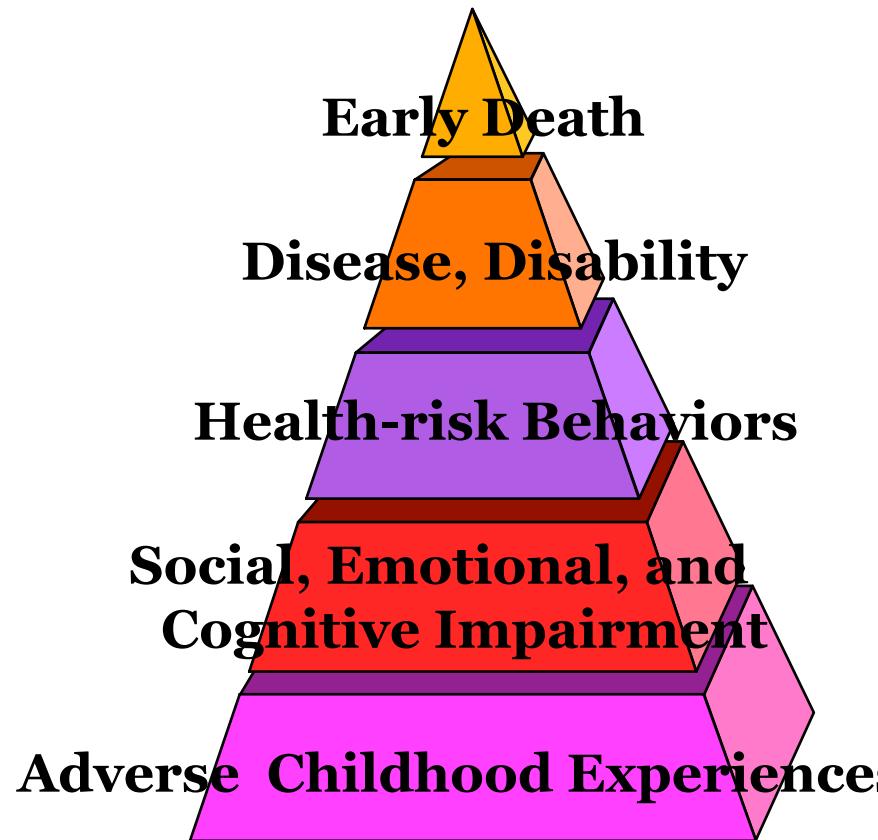
Weber, K., et al. The effect of gender based violence (GBV) on mortality: a longitudinal study of US women with and at risk for HIV. International AIDS Conference 2012. * = bivariate analysis

* Study included both men and women



The ACE Study

- 17,000 patients completed surveys about 10 categories of childhood abuse, neglect and family dysfunction
- Compared answers to an array of current health behaviors and conditions
- **Conclusion:** ACEs are common; and are strong predictors of later health risks and disease



Felitti VJ, Anda RF, Nordenberg D, Williamson DF, Spitz AM, Edwards V, et al. Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. American journal of preventive medicine. 1998 May;14(4):245-58.

Adult Trauma & PTSD → Poor health

Associated with IPV: *(partial list)*

Cardiovascular disease
Gastrointestinal disorders
Musculoskeletal disease
High-risk sexual activities
Chronic pain
Suicide attempts
PTSD
Inadequate social support
Depression
Substance abuse
Homelessness

Associated with PTSD: *(partial list)*

Cardiovascular disease
Gastrointestinal disorders
Musculoskeletal disease
High-risk sexual activities
Chronic pain
Suicide attempts
Risk of perpetration of violence
Inadequate social support
Depression
Substance abuse
Homelessness

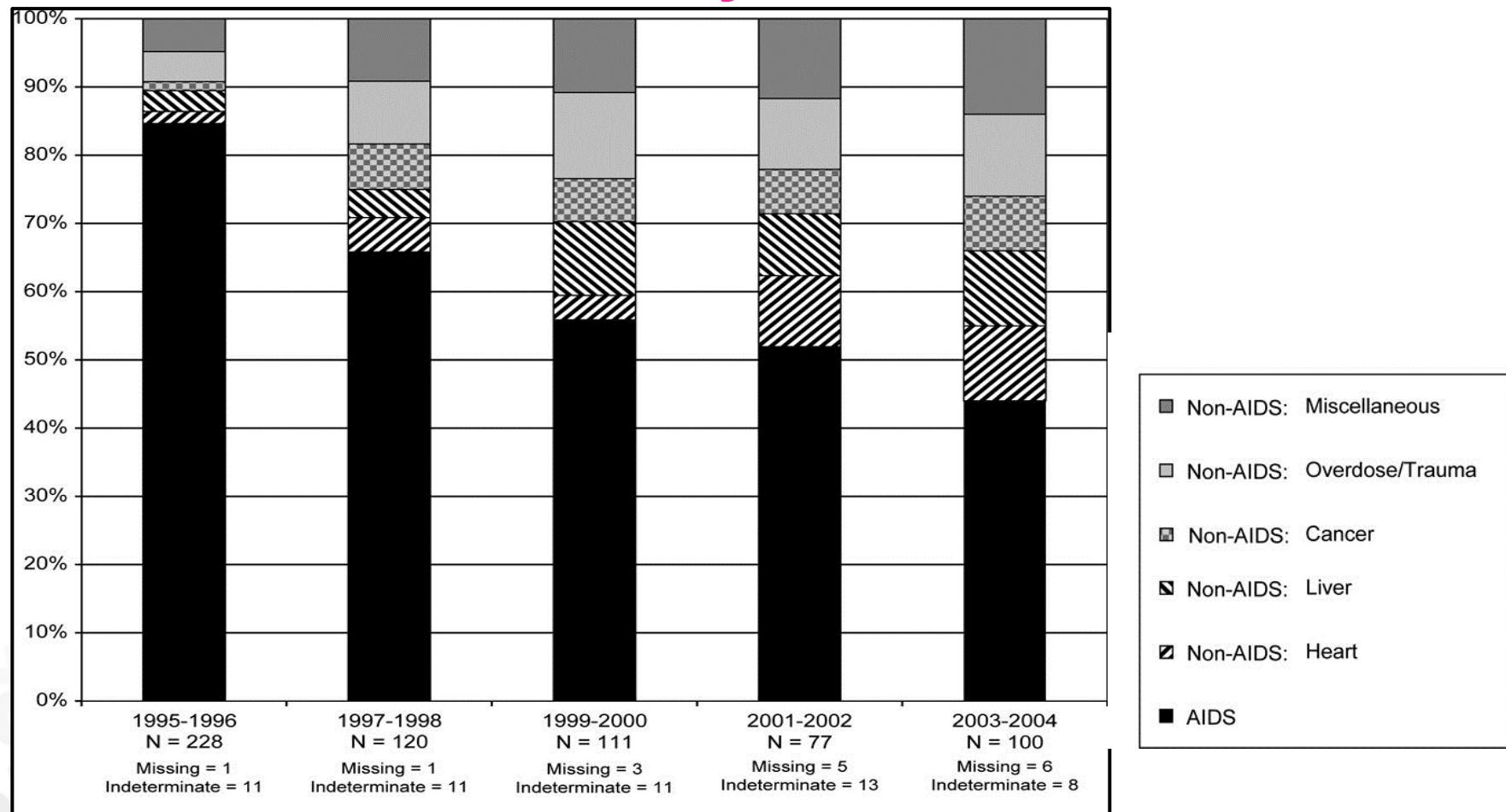


CDC Division of Violence Prevention. <http://www.cdc.gov/violenceprevention/intimatepartnerviolence/index.html>

National Center for PTSD. Department of Veteran's Affairs. <http://www.ptsd.va.gov/>

Stein JA, Nyamathi AM, Zane JI. Situational, psychosocial, and physical health-related correlates of HIV/AIDS risk behaviors in homeless men. American journal of men's health. 2009. 34

Predictors of Mortality in WLHIV over time



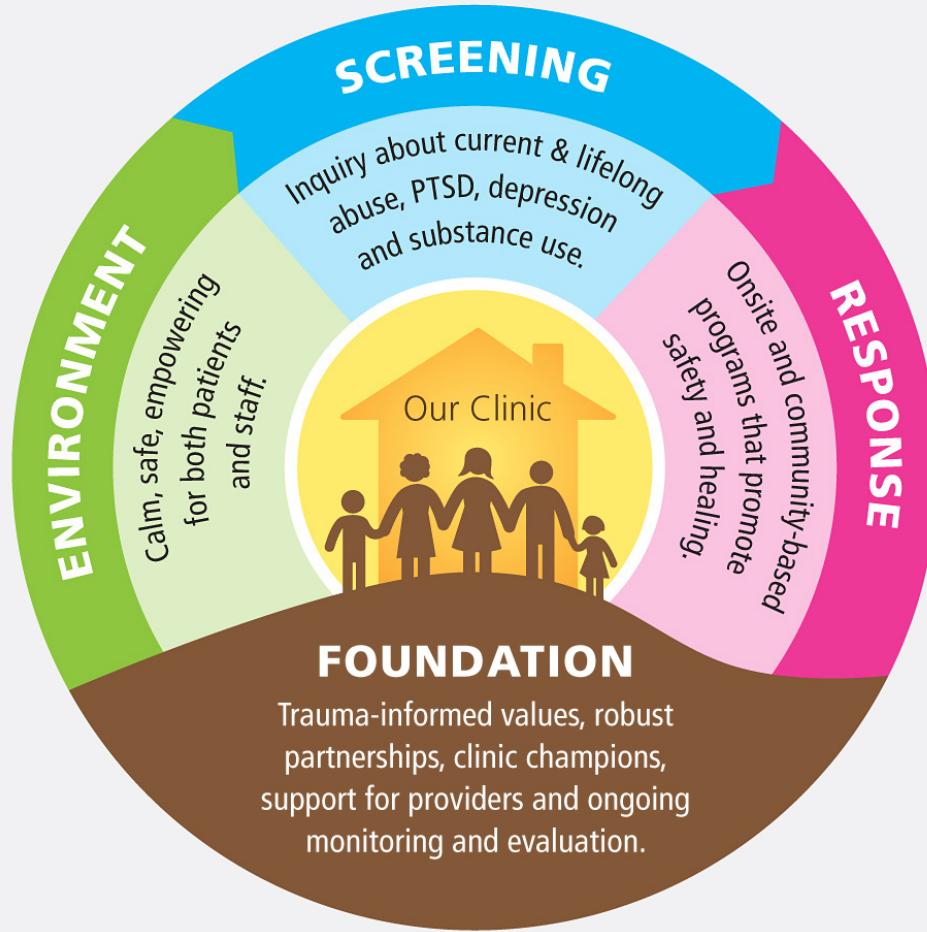
French AL, Gawel SH, Hershaw R, Benning L, Hessol NA, Levine AM, et al. Trends in mortality and causes of death among women with HIV in the United States: a 10-year study. Journal of acquired immune deficiency syndromes. 2009 Aug 1;51(4):399-406.



Towards an Anti-Oppressive Framework in HIV Care, Treatment and Prevention



Trauma-informed Primary Care



© Women's HIV Program (WHP) at UCSF & Positive Women's Network-USA



'She Killed Me, So I Killed Her': Man Allegedly Stabs Girlfriend to Death after She Tells Him She's HIV Positive

Cicely Bolden's children discovered their mother's body after she was allegedly killed by a boyfriend, angered after she told him she had the virus.

By Madison Gray @madisonjgray | Sept. 12, 2012 | 32 Comments

Dallas Woman Killed By Boyfriend For Admitting To Having HIV [VIDEO]



79° F
Clear

Home Local US & World Business Sports Food Entertainment Lifest

California Man Convicted For Murder Of Woman He Thought Gave Him HIV

We're not saying he was right, but we understand. Word to Chris Rock...

Man arrested in San Antonio suspected of killing woman because she had HIV

BY ALIA MALIK, SAN ANTONIO EXPRESS-NEWS : JUNE 17, 2014 : Updated: June 17, 2014



National Day of Action to End Violence Against Women Living with HIV

October 23 2015

Everywhere



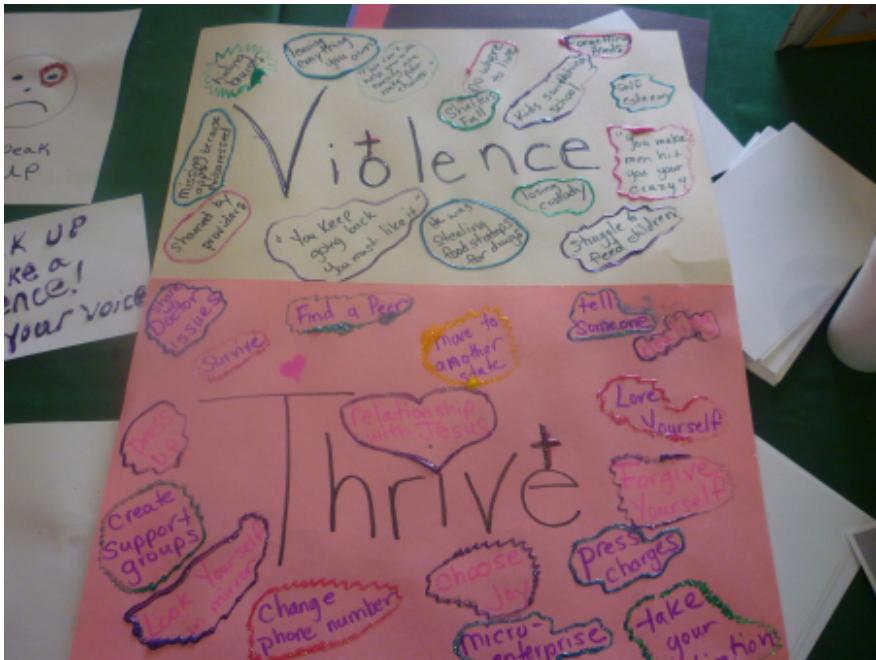
Barb Cardell
@BarbCardell



Following

Sisterhood, solidarity, action... #endvawhiv
#pwnspeaks





Thank
you!



Thank you

Naina Khanna

Positive Women's Network - USA

naina.khanna.work@gmail.com

510.681.1169

@nainadevi

@uspwn

www.pwn-usa.org



In memory of
Cicely Bolden
Elisha Henson



Share · 34 11 20