“I have moments where I am down, but it has made me resilient”: Mental Health Strengths Among Youth At-Risk for and Living with HIV

Background & Objectives

• Strengths-based approaches leverage and expand upon existing strengths to improve health outcomes

• Resilience framework (Fergus & Zimmerman)
  • Resilience assets: intrapersonal
  • Resilience resources: external

• Objective: examine how youth at-risk for and living with HIV identify and describe their own strengths related to mental health
Methods

• 3 HIV prevention and treatment continua studies through Adolescent HIV Medicine Trials Network (ATN 147, 148, 149)
  • Text-based automated messaging and monitoring, online peer support groups, strengths-based telehealth coaching

• Youth (ages 12-24) living with HIV or at-risk for HIV in Los Angeles and New Orleans

• Strengths Assessment delivered by trained, near-peer coaches

• Coach’s notes of participant responses qualitatively analyzed in Dedoose software
Results

Intrapersonal Resilience Assets
1) Protective traits
2) Stress management activities
3) Feeling positive despite current mental health challenges
4) No current mental health problems

External Resilience Resources
1) Social/emotional support
2) Engaging in mental health care
   2a) Therapy/counseling
   2b) Medication use
Protective Traits

- Self-awareness
- Optimism
- Resilience
- Self-confidence

“I don't allow it to get to a bad point...Realistically I have moments where I am down, but it has made me resilient and I’m able to bounce back.” (Non-Binary, pansexual participant, White, age 20)

Stress Management Activities

- Self-care
- Leisure activities
- Health or mindfulness-related activities

“I have been feeling really good these past couple months. I reach out to friends or hike to manage stress.” (Cisgender gay male, Native American/Alaskan Native, age 23)
Feeling Positive Despite Challenges

“I usually feel good, I feel happy even though my life is a mess right now.”
(Transgender bisexual male, Latino, age 23)

No Current Mental Health Challenges

[Participant] has had suicidal ideation in the past, relating to feelings of not belonging because he was not comfortable with his sexuality and hadn’t come out yet...Once he came out to his family and figured out who he was, he no longer had those thoughts.
(Cisgender gay male, Latino, age 23)
Social/Emotional Support

- Stability
- Positivity
- Acceptance

“When I feel low, I can call him [my friend] since he deals with it [depression] too and we can talk about it and go through it together.” (Cisgender heterosexual male, Black, age 23)

Mental Healthcare Utilization

- Accessibility
- Affordability
- Affirming care

"Having my medication is a strength. But having it NOT work perfectly is also a strength because it has pushed me to develop tools for my mental being. If Zoloft was perfect, I wouldn't have discovered the techniques in managing my depression and anxiety." (Cisgender gay male, White, age 20)
Limitations & Future Directions

- Utility of strengths-based approaches to health promotion efforts for youth who have experienced identity-based marginalization
- Importance of allowing participants to self-identify strengths
- Self-selection of participants into coaching participation among those offered coaching
- Use of case notes from strengths assessment: incorporation of qualitative methods in contexts besides interviews/focus groups