

UC San Diego Health

A Trauma-Informed Approach to Serving HIV+ Women with Co-Occurring Disorders & their Affected Children



UCSD Mother Child Adolescent HIV Program

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UCSD Mother Child Adolescent HIV Program

Integrated care model providing **comprehensive services** including HIV primary care, intensive case management, mental health & substance use services, nutrition, health coaching, clinical trials, partner services, transportation, & benefits counseling from a *family systems approach*.

Serving:

- ...Pregnant women
- ...At-risk women
- ...Children
-Youth <25 years
- ...*affected family members*

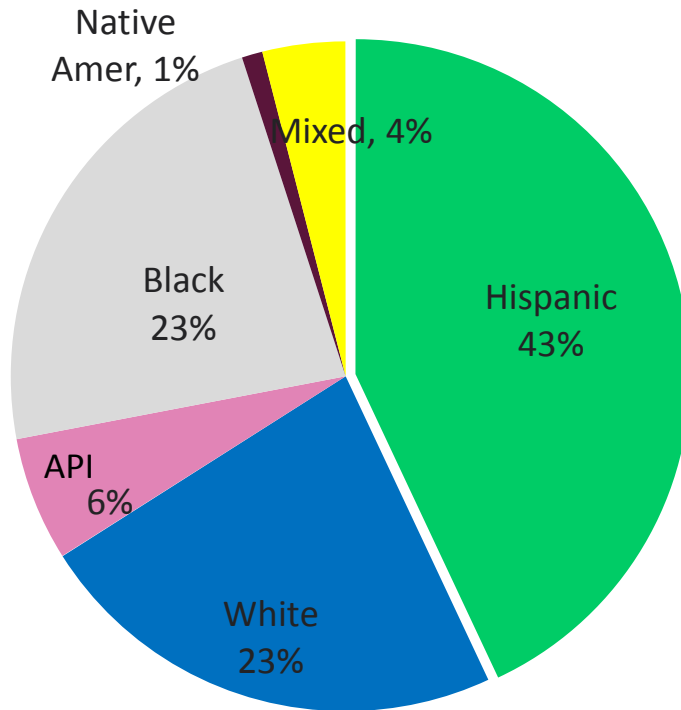


UCSD MCAP Demographics

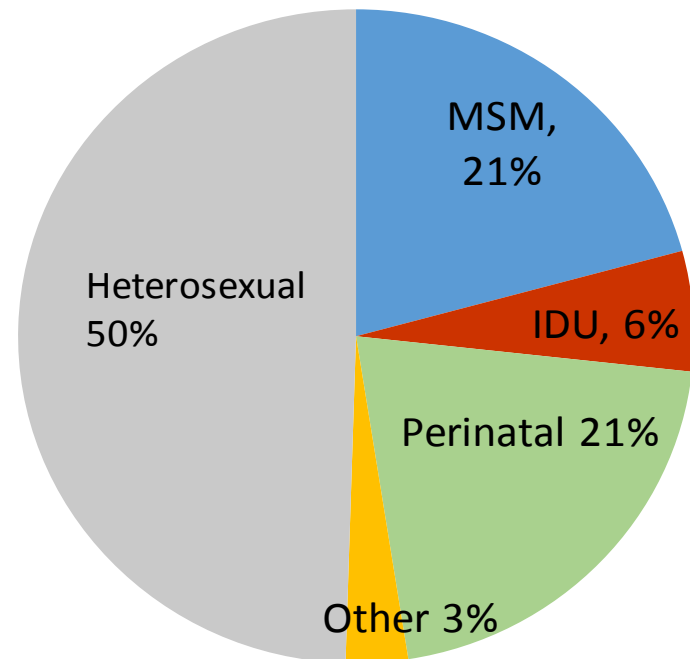
492 patients (2015): 77% female, 30% <25 yr old, over 50% below poverty

81% women & 89% youth retained in care virally suppressed

Race/Ethnicity



HIV Risk



Background

- **1.2 million** people living with HIV (≥ 13 yrs) in the U.S.¹
- Proportion of **women living with HIV more than tripled** (1985-2000)²
- A **quarter** of people living with HIV in the U.S. are women³
- Women **13-34 years** old accounted for over half of new infections (2010)⁴
- Profound health disparities, of women diagnosed with HIV⁵:
 - Black women account for 65%
 - Latinas account for 14%
 - White women account for 17%

Background: Syndemics

The **Substance Abuse, Violence, and AIDS (SAVA) syndemic** among women has received important research attention highlighting the clear association between gender-based violence, HIV infection & drug use (Gilbert et al., 2015)

HIV treatment must address '**triple diagnoses**' of HIV, mental illness and substance use which requires integrated treatment (Hobson, 2014; Durvasula & Miller, 2014; Altice et al., 2010)

35%

HIV+ mothers screened positive for a psychiatric or substance use disorder
(Malee, et al., 2014)

32%

HIV+ women are virally suppressed (CDC, 2014)

30%

HIV+ women have PTSD, **five times** national average for HIV(-) women
(Machtiger, et al., 2012)

Objectives:

Families First Demonstration Project

- Administration on Children Youth & Families (Children's Bureau), 4 yr grant
- Quasi-experimental multisite demonstration project
- Inclusion: HIV+ mother (≥ 18 yrs) with history of or current substance use

*Purpose: Families First seeks to **reduce the risk of child abandonment and neglect** through early identification and implementation of a countywide integrated intervention designed to treat **substance use** and **mental illness** in HIV+ parents and to develop and support their role as active, engaged parents.*

Integrated services offered in context of HIV primary care:

1. Therapy
2. Psychiatry
3. Substance use counseling
4. Parenting support

Methods

Eligible participants:

- HIV+ woman ≥ 18 yrs receiving care through UCSD MCAP
- Parenting or of childbearing age
- Active or historical substance use (including TOB/ETOH)

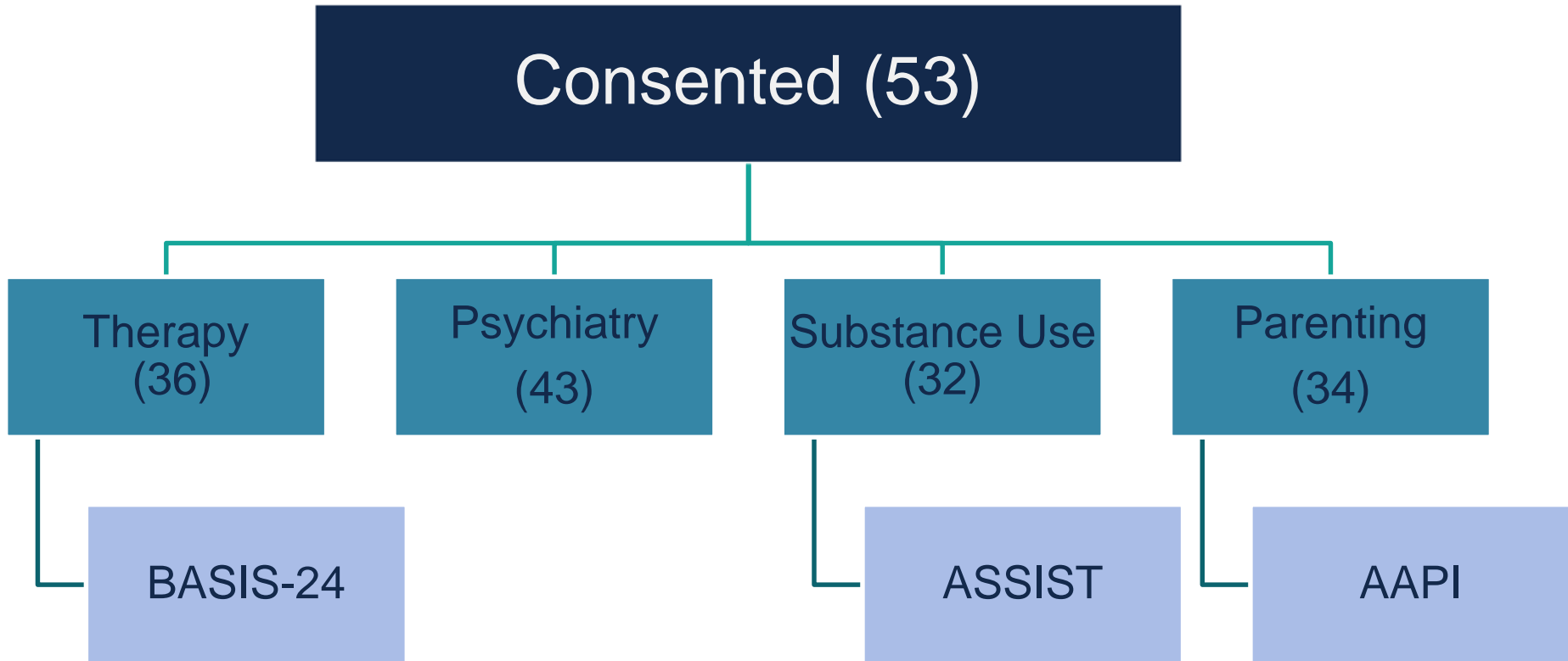
Social workers or medical providers referred participants

Participants were consented & offered co-located & in-home services:
therapy, psychiatry, parenting, substance use

Measures collected depending on arm:
BASIS-24, ASSIST, AAPI

Protocol approved by UCSD IRB

Families First Demonstration Project



Primary Outcomes

- BASIS-24® score
 - validated self-report measure
 - Baseline & 6 mo
- HIV RNA
 - Serum lab results
 - Baseline & 24 mo

Behavior & Symptom Identification Scale (BASIS-24®)

Validated behavioral health assessment tool

Domains:

1. Depression & Functioning
2. Interpersonal Relationships
3. Self-Harm
4. Emotional Lability
5. Psychosis
6. Substance Use



Findings:

Families First Demographics (N=53)

Mean Age	37 (SD 8, Range 22-54)
Number of children	3 (SD 1, Range 0-9)
Mean Years since HIV dx	10 (SD 7, Range 0-29)
% Virally suppressed (Baseline)	55%
% Incarceration history	42%

Race/Ethnicity:

White 31%

Hispanic 27%

Black 29%

Asian 4%

Other 9%

Findings: Substance Use

Most frequently used substances (ASSIST N=32):

1. ETOH = 29 (91%)
2. Cannabis = 28 (88%)
3. TOB = 27 (84%)
4. Stimulants = 24 (75%)
5. Opioids = 9 (28%)

IVDU = 8 (25%)

Treatment history = 17 (53%)

Polysubstance use 100%

Findings:

Primary Outcomes

- Improved viral suppression
 - **21%** increase in number of women with undetectable VL
 - Baseline: 55% to 24 Mo FU: 76%
- Reduced substance use (N=21)
 - **20%** decrease in recent substance use
 - BASIS-24® substance use domain
- Improved mental health functioning (N=21)
 - **20%** overall decrease in behavioral risk symptoms
 - Composite BASIS-24® score

Discussion: Limitations

Demonstration project in a clinical setting with a small N

Participants chose from a 'menu' of available services
limiting comparisons across groups

Conclusions

- Program efficacy to **achieve positive health outcomes** for HIV-positive mothers with co-occurring disorders
- Integrated models, which **include the family system**, are effective in improving well-being and health for high-risk families
- **Multidisciplinary treatment teams are essential** to address the diverse needs of families impacted by HIV with co-occurring disorders

UC San Diego Health

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