



No estas sola/*You are not alone*

Using a family focused approach to engage and empower HIV positive women of color.

Iris House, 11th Annual Women as the Face of AIDS Summit
May 3rd 2016

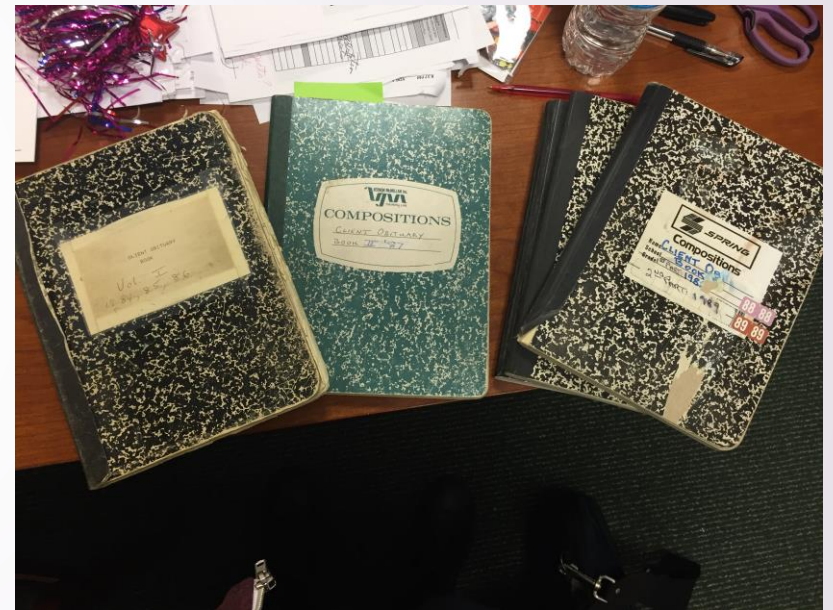


Our Presenters



- ▶ Glynis Simmons, Director of Women's Care, Prevention, and Support Services
- ▶ Nelly Melendez, Counseling Assistant, Women's Care, Prevention, and Support Services
- ▶ Christina Melendez, Outreach Data Specialist, Women's Care Prevention, and Support Services
- ▶ Katie Douglass, LCSW-R Managing Director of Mental Health & Support Services

GMHC History



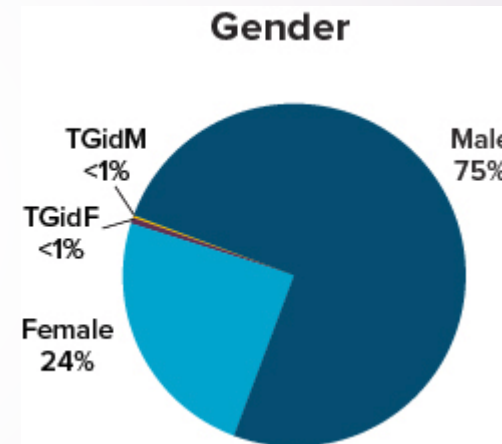
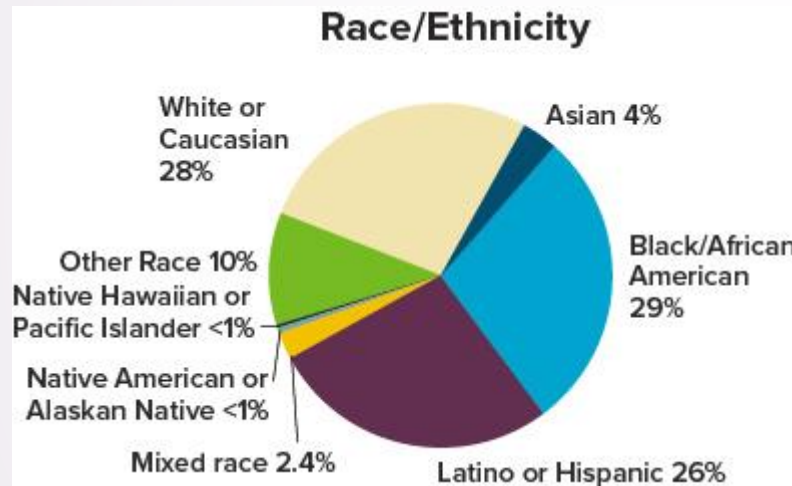
GMHC Today

Services Include:

- Food & Nutrition
- Work & Wellness
- Prevention & Outreach
- Counseling & Testing
- Mental Health
- Latex Ball
- Hotline
- Legal Services
- Care Coordination



GMHC Client Demographics





Impact of HIV on Women, per CDC

- ▶ Women made up 19% (8,328) of the estimated 44,073 new HIV diagnoses in the United States in 2014. Of these, 87% (7,242) were attributed to heterosexual sex, and 13% (1,045) were attributed to injection drug use.
- ▶ Among all women diagnosed with HIV in 2014, an estimated 62% (5,128) were African American, 18% (1,483) were white, and 16% (1,350) were Hispanic/Latina.
- ▶ New HIV diagnoses declined 40% among women from 2005 to 2014. They declined 42% among African American women, 35% among Latina women, and 30% among white women.
- ▶ Of women diagnosed with HIV in 2013, 84% were linked to HIV medical care within 3 months. But only 55% of women living with HIV were retained in care (receiving continuous HIV medical care). Only 39% of women living with HIV at the end of 2012 were prescribed antiretroviral therapy (ART), the medicines used to treat HIV, and only 30% had achieved viral suppression.



Women's Care, Prevention, and Support Services (WCPSS)

- ▶ Program is over 15 years old
- ▶ Serves over 90 women living with HIV or at high risk
- ▶ Programs include:
 - ▶ Women in Action
 - ▶ Alcohol and Other Drug Services
 - ▶ Together We Can (TWC)
 - ▶ Evidence Based Interventions
 - ▶ Community of Color
 - ▶ Sisterhood Affair




Women Served in WCPSS

- ▶ Are majority Latina & African American
- ▶ Range in age between 15 to 70 years old
- ▶ Majority are mothers and grandmothers
- ▶ Common themes:
 - ▶ Diverse and fluid sexualities
 - ▶ Significant trauma backgrounds
 - ▶ Active substance use issues
 - ▶ *Have Not* disclosed thier HIV status to significant others and family members



WCPSS Client HIV Wellness

- ▶ 97% of clients are prescribed ART
 - ▶ Mean CD4 613
 - ▶ 90% have an undetectable viral load (vs 44% overall in NYS)
- 



Concerns clients share about their children

- ▶ Fear their children will:
 - ▶ Hate, judge or be angry at them for contracting HIV
 - ▶ “Worry about me passing and being left alone.”
 - ▶ “Act out” or misbehave in response to disclosure
 - ▶ Be stigmatized for having a mother with HIV and be put in a position having to defend their mother



Concerns clients share about partners

- ▶ Disclosing HIV status to husbands, spouses, sex partners could result in:
 - ▶ Physical violence
 - ▶ Being judged, ridiculed, verbally abused
 - ▶ Abandonment
 - ▶ Bringing shame to their family



Concerns & questions children have shared about their mother's HIV status

- ▶ Death
- ▶ People judging their mother and having to “defend” mother
- ▶ Medication side effects, what are they and how harmful might they be?
- ▶ Will my mother be hospitalized?
- ▶ How can I properly help care for my mother?
- ▶ How can I emotionally support my parent?




WCPSS' Family Focused Model

- ▶ Program takes a “Second Family” approach
 - ▶ Supportive “no matter what,” staff are loyal to the client
 - ▶ Staff are non-judgmental but do not shy away from confrontation
 - ▶ Honesty
 - ▶ Humor
 - ▶ Affection
 - ▶ Food is often incorporated into services/events



WCPSS' Family Focused Model cont.

- ▶ Culture is honored via:
 - ▶ Peer Providers
 - ▶ Language
 - ▶ Style of engagement
 - ▶ Values
- 



WCPSS Intervention Examples

- ▶ One on one sessions with peer providers focus on creating the right environment for disclosure to happen
 - ▶ Prepping/practicing the disclosure
 - ▶ Reviewing possible consequences and benefits of disclosing
 - ▶ Encouraging disclosure to happen in a safe place (vs in the spur of the moment)
 - ▶ Ensuring back-up Mental Health support is in place
 - ▶ Bringing family member in for disclosure with peer counselor as support
- ▶ Disclosure Peer Group



WCPSS Intervention Examples

- ▶ Parent/Child Disclosure Event
 - ▶ Children sorted by learning needs
 - ▶ Those who knew parent's diagnosis and were well informed about HIV
 - ▶ Those who didn't know or had a negative view/misinformation about HIV
 - ▶ Those who knew about parent's diagnosis
 - ▶ Spoke with two peers
 - ▶ Shared fears and concerns about their parent's diagnosis
 - ▶ Talked about when parent is not open about HIV status
 - ▶ Group focused on increasing support and decreasing isolation
 - ▶ Those who did not know parent's status or had negative view
 - ▶ Spoke with HIV positive mother and daughter
 - ▶ Received HIV 101 education
 - ▶ Group focused on laying groundwork for disclosure to happen in the future



Questions for the audience:

1. What challenges do you see women face in disclosing?
2. What do you see as the biggest challenge to keeping women living with HIV healthy - physically, emotionally, spiritually?
3. What kind of disclosure tools/techniques do you use in your agency?
4. What interventions have you learned at this conference that you will look to replicate in your agencies?



Conclusions