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Background

Drexel University's Partnership Comprehensive Care Practice (PCCP) is a large Ryan White-funded practice in Philadelphia, PA. Multidisciplinary care is provided to over 1,700 people living with HIV annually.

Patient population:

- 35% women
- 64% men
- 77% non-Hispanic Black
- 11.5% Hispanic
- 0.7% non-Hispanic White

Unmet need and Barriers

Women with HIV:

- More likely to have experienced trauma such as childhood abuse and neglect, and intimate partner violence
- Have higher rates of shame, isolation, addiction, and non-adherence to antiretroviral therapy (ART)
- Be blamed for HIV transmission and rejected by their community/family

Barriers	Solution
Transportation	Tokens provided
Childcare	Meet during school hours
Racial Disparity	African American therapist
Stigma/Social Isolation	Safe space/community
	created
Food	Lunch provided
risk emotional cooritive irritable	

tanxiety hypervigilance fear

osttraumaticassault

nightmares Stress therapy veterant

Facilitators: 2 masters-level female clinicians (one is African American) experienced with trauma and addiction treatment

Group composition: Open-ended group, inclusive to any woman receiving care at PCCP who struggles with self care and at risk for ART nonadherence

proper fit

Teach about:

- activities Create:
- Learn self-soothing with:
- lives and help others

The impact of a gender specific support group in a Philadelphia HIV clinic

Creation of Women's Group

• No exclusionary diagnosis • Predominantly composed of African American females

Referral: Self-referral, by someone at PCCP, or by community member • Individuals invited to group after brief assessment with facilitators for

Group Norms: Attend regularly, call if unable to attend 1.5 hr-long weekly meetings with phone call reminder • Group is flexible, no penalty for excessive absenteeism • Combination of process-orientated group and psychoeducation • Topics and activities determined by the women

Creating Group Activities

wellness, resiliency, mental health, emotional regulation, HIV status disclosure through structured

tool boxes and vision boards coloring books, music, fidget toys Provide tools that fill their "bucket" to allow them to have wellness in their

Wellness Disclosure Resiliency Boundaries Vision Boards



Continue to have 5-7 women attend each session today. Members of the group have achieved the following:

- addiction
- members



References: alth, 12(1), 53.



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What did facilitators learn from **Women Participants**

Outcomes and Celebrations

Earning a GED resulting in obtaining a full-time job soon after Becoming drug and alcohol free for the last 1.5 years after years of

Disclosing HIV status to long-term partners, children, and family

Having safe female friends to rely on and be vulnerable with

Taking ART daily and developing a healthier lifestyle

Renewing the sense of hope and mastery in their lives

Re-writing trauma narratives as events not as how someone is defined





1. Machtinger, E. L., Wilson, T. C., Haberer, J. E., & Weiss, D. S. (2012). Psychological trauma and PTS D in HIV-positive women: a meta-analysis. AIDS and Behavior, 16(8), 2091-2100.

2. Paudel, V., & Baral, K. P. (2015). Women living with HIV/AIDS (WLHA), battling stigma, discrimina tion and denial and the role of support groups as a coping strategy: a review of literature. Reproductive he