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Screening for Adverse Childhood Experiences Among Youth with HIV in Integrated Care Settings

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INTRODUCTION



- People living with HIV (PLWH) have several behavioral health risks, including co-occurring mental health and substance abuse disorders (Felker-Kantor et al., 2019).
- PLWH are diagnosed more often with mental health disorders such as depression, anxiety, PTSD, and substance abuse than those without HIV (Felker-Kantor et al., 2019).
- These co-occurring diagnoses can impact a person's medication adherence, contribute to less engagement in HIV care, and poor health outcomes (Sullivan, Messer, & Quinlivan, 2015).
- Research suggests that Adverse Childhood Experiences (ACEs) can contribute to HIV risk behaviors (Fang, Chuang, & Lee, 2016).
- PLWH may also be more vulnerable to the negative health outcomes and adverse effects of stressors documented on the ACEs screener (Wallace et al., 2019).

Purpose of Study



- To examine Adverse Childhood Experiences among YLWH in an integrated care setting.

Participants and Procedures

- This study used de-identified ACES data collected as part of the standard protocol of care from January to December 2019 in an integrated care pediatric and adolescent HIV clinic in the southeastern United States.
- Complete data were available for 35 YLWH aged 17-24 (mean age = 20.9).
- Given the use of existing program evaluation data, this study was exempt from Institutional Review Board approval.

Measures

- Demographic data included age, gender identity, race, sexual orientation, and mode of HIV transmission.
- Adverse Childhood Experiences screening instrument
 - Traditional 10 question ACE + 7 additional questions

Data Analysis

- Data were analyzed based on an archival review of patient records.
- Descriptive statistics were used to characterize the sample and scores on the ACEs screener.
- Comparisons were made between positive and negative screeners based on demographic variables.

Participant Demographics

- Youth ranged in age from 13-24 (M=20.9, SD=1.9)

Majority of respondents were

- Boys or young men (N=68, 53%)
- Black/African American (N=77, 60%)
- Identified as homosexual, bisexual, or questioning (N=20, 57.2%)
- Most acquired HIV behaviorally (N=67, 52%)

ACEs Screening

- Among 35 youth administered the ACEs Screener
 - 26 (74.3%) screened positive with 4 or more endorsements on the ACE screener
- There were no differences by groups on ACE scores for any demographic variable

- Based on literature, service providers for HIV should adopt a trauma-informed lens and approach (Fang, Chuang, & Lee, 2016).
- A better understanding of the role of early adverse experiences can help improve the the continuum of care for people living with HIV (Wallace et al., 2019).
- Limitations include a relatively small sample size and the fact data drew from one clinic in the southeastern US, which may affect generalizability.
- Despite limitations, findings have important implications for healthcare providers working with YLWH with regard to substance use prevention, screening, intervention, and treatment planning.

References available upon request.

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