

ADDRESSING TRAUMA WILL BOLSTER THE HIV RESPONSE FOLLOWING THE COVID-19 PANDEMIC

THE COVID-19 PANDEMIC HAS BEEN TRAUMATIC FOR MANY PEOPLE and continues to have ramifications for public health, individual health, and social cohesion. Trauma is a deeply distressing or disturbing event (or series of events) that overwhelms an individual's ability to cope, causes feelings of helplessness, and diminishes their sense of self and ability to feel a full range of emotions and experiences." Trauma comes in many forms, including individual trauma, family trauma, systemic trauma, and vicarious trauma. Taking the following steps to address trauma can strengthen our communities.

BROADEN THE UNDERSTANDING OF TRAUMA

In recent years, many HIV programs and clinics have embraced the principles of trauma-informed primary care as a critical strategy for increasing engagement in care. Federal agencies should issue program guidance to grantees explaining the benefits of, and offering models for, trauma-informed primary care. The implementation of trauma-informed services should become a condition of HIV prevention and care grant awards by federal and state funding agencies.

EXPAND ACCESS TO MENTAL HEALTH AND WELLNESS SERVICES FOR PEOPLE LIVING WITH HIV AND THE HIV WORKFORCE

Insufficient and inflexible funding contributes to the failure to address the prevalence of trauma among clients and employees. Workers have rarely received support in response to potentially traumatic

incidents and workforce burnout exacerbated by COVID-19. Following the lead of President Biden's "Unity Agenda," health departments, community-based organizations, and clinics should allocate more resources and attention to expanding access to mental health and substance use disorder services for clients and employees.

EMBRACE TRAUMA-INFORMED, TEAM-BASED STRATEGIES

Clinics and organizations should adopt more team-based approaches, and various pandemic policies, such as telehealth services and others, to increase options for services delivery. With federal support, health departments also should be called upon to convene grantees and other stakeholders to re-imagine how to deliver a variety of services that support whole-person care and wellness.

THREE PERSPECTIVES ON TRAUMA

What does trauma mean to you?

We must talk about trauma because it is often misunderstood: it is not the event or series of experiences itself; trauma is our body's reaction to said events. Trauma lives in the body, rewires our brain structure, and can impact our thoughts, our interactions with others, and even our capacity to be creative in our lives. (Naina Khanna)

What are harm reduction and coping strategies?

Two primary consequences of trauma at an individual level are: (1) we may shut down from feelings of terror and the inability to stop what is happening, and (2) we may enter an over-performance mode where we become hyper-vigilant about

tasks in front of us, often working ourselves to exhaustion.

Some harm reduction and coping strategies to manage our individual trauma and help others affected by trauma include improving our body literacy to become aware of sensations and how they affect emotions and behaviors; developing a "tend and befriend" instinct, which involves caring for others and benefitting from connections within communities; and learning somatic practices, which can help us experience all of our emotions, from fear and anger to joy and connection. (Teo Drake)

Are there ways to overcome organizational trauma?

Trauma felt by organizations can be similar to the impact felt

by individuals. A traumatized organization can be fragmented, reactive, numb, or even feel unsafe to the individuals who work there and the patients they serve. Most organizations exist somewhere between being a traumatized/traumatizing organization and being a trauma-informed, healing organization. It is essential for organizations to take steps to move from the former to the latter. Thus, overcoming organizational trauma requires acknowledgment, buy-in, and engagement from the leadership and all members of the organization. These efforts can have a transformative impact on the experiences of staff, providers, and patients. (Dr. Eddy Machtinger)

This is an excerpt of an edited dialogue that occurred at stakeholder consultations in December 2021 and January 2022 with Naina Khanna (Positive Women's Network), Teo Drake (Positively Trans), and Edward (Eddy) Machtinger, MD (University of California, San Francisco).