

Moving Toward a Trauma Informed System of Care for People Living with HIV (PLWH)

TARGET POPULATION: PLWH LOCATION: Iowa PROGRAM DESIGN: Dedicated internal staff workgroup, provider capacity-building/training statewide ESTIMATED COST: \$100,000 per year FUNDING SOURCE: Rebates, Ryan White Part B Supplemental, and State Funding

SUMMARY

A growing body of research is identifying the relationship between adverse childhood experiences—such as abuse, neglect, and household dysfunction—and poor physical and mental health outcomes later in life. The Iowa Department of Public Health Trauma Leadership Workgroup is an interdepartmental team dedicated to breaking down silos and promoting trauma informed care across disciplines. As stated by an Iowa services provider:

"A trauma informed approach to my work helps me see my clients as humans who are in need of compassion and assistance when it can be so easy to instead be overwhelmed by the volume of what needs to be done."

BACKGROUND

Trauma Informed Care Matters

Research demonstrates a strong relationship between developmental trauma, also known as adverse childhood experiences (ACEs), and poor physical, social, and mental health outcomes decades later. These outcomes include:

- Increase risk of chronic disease (e.g., cancer, heart disease, COPD, liver disease, asthma, diabetes, stroke)
- Increase risk of engaging in risky behavior (e.g., substance use, violence, smoking, overeating)
- Increased risk of mental health disorders (e.g., depression)

CORE ACTIVITIES

Develop Trauma Informed Leadership Workgroup at State Health Department

The Iowa Department of Public Health (IDPH) Trauma Leadership Workgroup is an interdepartmental team dedicated to breaking down silos and promoting trauma informed care across disciplines. The workgroup meets bimonthly and includes several programs who all are at various stages of integrating trauma-informed principles into their respective programs including HIV, Early Childhood Mental Health, Tobacco Control, Domestic/Sexual Violence, Substance Abuse-Treatment and Prevention, Multi-Cultural Health, Nutrition and Physical Activity, Planning Services, and Chronic Disease Prevention and Management (e.g., cancer). The group has drafted a strategic plan including several coordinated and collaborative goals, objectives, and strategies (e.g., hiring dedicated staff, supporting capacity-building efforts). They have also submitted goals, objectives, and strategies to Healthy Iowans 2020 to ensure a statewide coordinated response beyond public health.

Hire Trauma Informed Prevention and Care Coordinator

As part of the Trauma Leadership Workgroup's vision, a Trauma Informed Prevention and Care Coordinator position was conceived through the Ryan White HIV/AIDS Program (RWHAP) Part B program to support the collection and dissemination of trauma informed prevention and care activities occurring at the local and state level including: the coordination of trauma informed care capacity building/training; assessments of existing lowa initiatives; developing a shared vision; integration of existing strategic plans for the development of a state-wide plan; management of program budgets; and facilitating trauma-informed prevention and care support across disciplines, including ACEs. Trauma Informed Excellence Trainings The Trauma Informed Excellence (TIE) training series was designed by the <u>Coldspring Center for</u> <u>Social and Health Innovation</u> to give organizations and systems of care the knowledge and skills to fully integrate the trauma informed paradigm into their operations. Service providers across Iowa, including case managers, nurses, and support staff complete the TIE training series to work an HIV care continuum that is trauma informed at each bar. The training courses build a foundation and understanding of trauma informed care and provider self-care as well as organizational culture, leadership, and trauma specific treatment. One case manager participant stated:

"A trauma informed approach to my work helps me see my clients as humans who are in need of compassion and assistance when it can be so easy to instead be overwhelmed by the volume of what needs to be done."

These trainings meet the Trauma Informed Leadership Workgroup's goals of increasing statewide capacity to provide HIV prevention and care services in a trauma informed manner.

DATA

ACE prevalence was collected in the 2016 Iowa HIV Consumer Needs Assessment survey in order to determine the impact of childhood trauma on people living with HIV compared to that of Iowa's general population. The results were compared to the ACE prevalence collected in the 2012 Iowa Behavioral Risk Factor Surveillance System. The results suggest that experiences of childhood trauma are much higher amongst Iowans living with HIV versus the general population.

ACE Score



Prevalence of Individual ACEs



EVALUATION

The impacts of implementing a trauma informed system of care and prevention has not been formally evaluated yet. Iowa staff plan to conduct an evaluation of the integration of trauma informed care in case management later this year.

OUTCOMES

During 2016, the Trauma Informed Leadership Workgroup focused on developing a scope of work for and hiring the Trauma Informed Prevention and Care Coordinator position. The coordinator was hired in April 2017 and will be shared by the health department and Prevent Child Abuse Iowa, private sector organization. The health department is in the process now of assisting Prevent Child Abuse Iowa in obtaining two Vista volunteers to help the coordinator in managing trauma informed care activities on site and within the health department. The TIE is now offered once a year to all new case managers and is consistently well reviewed. The feedback from veteran case managers has been particularly positive. Many participants have observed that they are now better able to manage symptoms of burnout and fatigue while providing optimal care to their clients. Burnout and turnover have since been reduced among case managers. The Trauma Informed Leadership Workgroup has also arranged related trainings for health department staff. A three-hour staff in-service training was subsequently held in February 2017 and was well received by participating staff.

STRENGTHS

- The evidence tying developmental trauma, various forms of violence, and stress to health outcomes continues to grow and solidify.
- Strategies can be cross-disciplinary and encourage collaboration.
- Integrating trauma informed principles requires a system-wide paradigm shift as well as consistent, continuous funding to support these activities.
- Addressing trauma efficiently and effectively allows programs and staff to address root causes of comorbid conditions (e.g., incarceration, substance use, homelessness).
- Trauma informed approaches to care and prevention align with the vision and missions of the Healthy Iowa Initiative, Blue Zone Projects, the Affordable Care Act (ACA), IDPH, and other state government agencies.

LIMITATIONS

- Initially, there was no dedicated staff time internally to the health department. The strategic plan implementation regarding trauma informed care and prevention was therefore delayed.
- There are long standing silos between the health department and other government agencies that could also benefit from the

adoption of trauma informed care (e.g., departments of corrections).

- Responsibilities for oversight and leadership for trauma informed activities are not assigned to one overarching program or staff person.
- To date, there is no targeted funding to support trauma informed activities.

FUNDING & COST

IDPH began using Ryan White HIV/AIDS Program (RWHAP) ADAP rebate funds for capacity-building efforts in 2012. That funding was later used to support the TIE. The Trauma Informed Leadership Workgroup has no dedicated funding, just in kind staff time. When Ryan White Part B supplemental funding became available 2017, it was paired with state funds to pay for the Trauma Informed Prevention and Care Coordinator's salary.

STAKEHOLDERS

Various offices of IDPH, including: HIV, Early Childhood Mental Health, Tobacco Control, Domestic/Sexual Violence, Substance Abuse-Treatment and Prevention, Multi-Cultural Health, Nutrition and Physical Activity, Planning Services, and Chronic Disease Prevention and Management (e.g., cancer); Prevent Child Abuse Iowa; Sioux Land Community Health Center; Nebraska AIDS Project; Project at Primary Health Care; North Iowa Community Action Organization (NIACO) – Mason City; Cedar AIDS Support System; Linn County Aging and Disability Center; University of Iowa Hospitals and Clinics; the Project of Quad Cities; Dubuque Visiting Nurses Association; Coldspring Center for Social and Health Innovation.

PROGRAM CONTACT

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