



The Experience of Trauma for HIV+ Aboriginal Women

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Defining Aboriginal

- Recognizing the extensive diversity among indigenous peoples in Canada, the term *Aboriginal* refers generally to indigenous peoples who include First Nations, Métis and Inuit people. Specifically, the term First Nations replaces the term Indian, Inuit replaces the term Eskimo, and the term Métis refers to people of mixed European and Aboriginal ancestry (Royal Commission on Aboriginal Peoples, 1996, p. xii)

Background

- In 2008, Aboriginal peoples comprised 29.4% of HIV infections despite comprising only 3.3% of the population (Public Health Agency of Canada, 2010)
- Aboriginal peoples have disproportionate experiences of violence and childhood sexual abuse, and high rates of substance use (PHAC, 2010)
- Aboriginal people have a greater vulnerability to traumatic life events than the general population (Karmali et al, 2005)
- Trauma is associated with decreased ART adherence, distrust of medical professionals and depression (Mugavero et al, 2006; Meade et al, 2009; Whetten et al, 2008)

Marla

- Unemployed, 52 year old, First Nations female
- History of residential school as a child
- Sexually abused at the school as well as by her stepfather and two male neighbours
- Ran away from home at age 16
- Drug addicted with a drug addicted boyfriend who is in the drug trade
- Sex trade worker
- Has difficulty following up for medical care
- Admitted to hospital with PJP – CD4 is 180, fraction is 9% and viral load is 575,000 copies

Issues

- She is hostile, suspicious and resistant to care
- Frequently leaves the unit to use
- Has difficulty adhering to ART

Review of the Literature

- Both HIV infected and Aboriginal people have had a disproportionate experience of traumatic events (Mugavero et al, 2009)
- The trauma is directly related to the experience of colonization which has led Aboriginal peoples to being one of the most disadvantaged populations
- There is a strong linkage between the HIV epidemic in this population and their experience of both historical and current trauma (Pearce et al, 2008)

Review of the Literature

- Colonization is linked to higher rates of homelessness, poverty, addiction, incarceration, physical and sexual violence, street involvement, infectious diseases, and suboptimal utilization of health services (Prentice et al, 2011)
- All of these issues put Aboriginal people at high risk of post traumatic stress disorder (PTSD)
- The rate is estimated to be about 21-54% (Tsosie et al, 2011) and a majority of Aboriginal women who engage in sex trade work meet the criteria for PTSD (PHAC, 2010)
- PTSD is strongly associated with colonization, depression, re-victimization and substance use

PTSD

- A common and disabling condition that follows a traumatic event
- Trauma refers to psychological trauma in relation to childhood sexual abuse, physical abuse and emotional neglect – often occurs in a family context of deprivation and destruction
- A pathological environment of prolonged abuse results in the development of an array of psychiatric symptoms and aberrant behaviours
- Characteristic symptoms include intrusive re-experiencing (nightmares and flashbacks), numbing and avoidance, and hyper-arousal (Beckerman & Auerbach, 2010)
- May also be anxious, agitated, and have somatic symptoms such as headaches, GI disturbances and abdominal pain (Herman, 1992)

Colonization

- There is a direct link between the challenges that Aboriginal women face and the historical impact of colonization
- Aboriginal people have experienced subordination as a result of colonization and they face significant discrimination and disadvantage in all facets of their life (Borassa, McKay-McNab & Hampton, 2004)
- Colonization has led to the loss of traditional lands, spiritual disengagement, cultural genocide, adoption of Native children by non-Native families and the enforced removal of children to residential schools (Walters & Simoni, 2002; Pearce et al, 2008)
- The poverty, displacement and discrimination that has been caused by colonization has led to intergenerational trauma
- This intergenerational trauma has led to disproportionately high rates of substance use and addiction and the high rates of HIV seen in Aboriginal women should be understood as a direct consequence of the negative effects of colonization (Browne, 2005; Varcoe & Dick, 2008)

Depression

- Sexual and physical abuse is strongly associated with depression (Whetten et al, 2008)
- Shocking rates of sexual abuse were revealed in Pearce et al's study – 69% of female participants, with a median age of six
- Having a elevated risk for PTSD elevates the risk for depression and 30 to 50% of people with PTSD experience clinically significant depressive symptoms (Galovski et al, 2010)

Re-Victimization

- Direct link between victimization and childhood sexual abuse
- Childhood sexual abuse survivors over-idealize their sexual partners, have learned helplessness and are unable to identify others who are trustworthy (Allers et al, 1993).
- Childhood sexual abuse survivors are more likely to engage in survival sex trade work which puts them at risk for being re-victimized (Pearce et al, 2008)

Substance Use

- People who have a diagnosis of PTSD are more likely to engage in substance use (Beckerman & Auerbach, 2010)
- Substance use is particularly associated with childhood sexual abuse (Liu et al, 2006)
- The more significant and long lasting the childhood sexual abuse, the more severe the drug use (Liu et al, 2006)

Discussion

- Patients like Marla present with a complex array of symptoms that require astute and expert nursing care
- Nurses must be alert to signs of distress in marginalized patients and quick to intervene to foster feelings of safety
- These patients have difficulty coping with a care plan – nurses need to prepare them carefully for any procedure that they need to undergo, modify procedures as needed to make it easier for them to cope and arrange for support that they need to deal with whatever is planned

- Nurses who are experienced in working with traumatized patients would know that Marla probably felt ashamed for leaving the unit, missing her antibiotics and using drugs – they need to make her feel valued by expressing their concern for her health and safety while she is off the unit and telling her they are glad to see her when she returns

- It is important to advocate for adequate pain and withdrawal control as well as night time sedation – many trauma survivors are fearful of the dark
- Many trauma survivors have limitations with their communication and coping skills – nurses need to collaborate with patients to help them cope – might be as simple as ordering double portions for meals, asking the pharmacist to alter the medication schedule to better suit their activities, and arranging for special comforts such as free tv

- It is important to screen for and treat depression – Marla needs to know that there is a potential for recovery, healing and relief of symptoms
- Denenberg's guidelines for working with survivors of childhood trauma – see handout

Discussion

- It is important to incorporate the principles of cultural safety and trauma informed care into our care of Aboriginal and marginalized patients
- Cultural safety is about recognizing the position of people in relation to the health care system
- It asks nurses to appreciate how the values and beliefs they hold impact on their relationships with their patients
- It is also important to understand that there is a power imbalance between the providers and users of the system

Policy and Advocacy

- Increased public awareness of the experiences of trauma that many Aboriginal people have dealt with
- Increasing awareness is critical to revival and reconciliation (The Province, 2012)
- Sexual health programs need to address sexual abuse and violence as well as consensual sex
- Aboriginal people need to be involved in the planning, delivery and execution of health care programs

Conclusion

- Nurses need to educate themselves about the challenges that this population faces
- Nursing care must be trauma informed, culturally safe and patient centred
- Given that Aboriginal women die of AIDS related illnesses at a higher rate than the general population and are less likely to go on ART (Wood et al, 2003) they must feel valued and respected so that they feel safe seeking care when they need it

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