

Addressing the Intersection of HIV/AIDS and Violence: Perspectives and Experiences of Service Providers

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Project Description: This is a 1-year pilot study that will describe how health and social service providers are addressing the overlap in risk between HIV/AIDS and several specific forms of violence (e.g., intimate partner violence, child sexual abuse, suicidal ideation/self-harm, bias-motivated violence) in the client/patient populations they serve. The study will use in-depth, qualitative, semi-structured interviews to acquire data on the perceptions and professional experiences of 20 HIV/AIDS-related service providers and 20 violence-related service providers (N=40) in the San Francisco Bay Area. The specific aims of this pilot study are:

1. To describe institutional policies and actual practices currently in use to address the intersecting epidemics of HIV/AIDS and violence in a) HIV/AIDS prevention and case management services; and b) violence prevention and case management services.
2. To assess the current needs of providers to effectively serve their client/patient populations with regard to the crossover risk between HIV/AIDS and violence.
3. To indicate areas of overlap in the two epidemics, a) which have been identified by researchers, but are not being addressed in the provision of services; and b) which have been identified by service providers, but are not being examined by researchers.
4. To determine the feasibility of conducting a subsequent, nationwide study using a cross-sectional survey design and multi-site participant observation, and of testing an intervention designed to effectively address this intersection of the two epidemics.

Significance: Experiencing specific forms of abuse, such as intimate partner violence (IPV) and child sexual abuse, can increase a person's risk for HIV. Likewise, being HIV+ can increase a person's risk for experiencing IPV, suicidality/self-harm, and bias-motivated violence. Efforts made to avoid HIV infection (e.g., requesting condom use) also have shown an association with experiencing IPV. However, actual practices by health and social service providers to address this overlap in the epidemics are poorly understood, as are the institutional policies regarding such practices in agencies and/or clinics where they are employed. This study has the potential to contribute significantly to the ongoing feedback mechanism between research and practice, particularly in terms of how each side of this important partnership can collaborate more effectively with the other to make a difference in areas of overlap between the two epidemics.

Project Recruitment Dates: March 2006 – August 2006

Project End Date: January 2007