

Introduction

American Indian and Alaska Natives (AI/AN) have the highest rate of new HIV diagnoses, and the highest seroprevalence rate of all racial/ethnic groups in Los Angeles.¹ In addition to disproportionately high rates of HIV, AI/AN report more trauma than other racial/ethnic groups in the US.² Recent studies highlight the connection between trauma and low adherence to HIV antiretroviral treatment.³ In Los Angeles, data shows a possible relationship between trauma and low adherence to the HIV Care Continuum for AI/AN. Among people living with HIV in Los Angeles, AI/AN have the lowest percentage of viral suppression (44.1%), and highest HIV related death rate (36 per 100,000).⁴

Objectives

To examine the prevalence of trauma, types of trauma, and how trauma impacts AI/AN capacity to adhere to the HIV Care Continuum.

Methods

Among a split sample of HIV positive and HIV negative AI/AN who identify as gay, bisexual, transgender and Two-spirit, we administered:

- twenty (n=20) risk assessment questionnaires and
- twenty (n=20) structured and semi-structured interviews about lifetime exposure to trauma and resilience factors.

The research team included a self-identified Two-Spirit Navajo Nation community activist and HIV specialist who supported:

- development of research tools,
- recruitment, and
- administration of the surveys and interviews.

We used an indigenous-centric approach.

Participant recruitment:

- community members with tribal affiliation,
- individuals connected to HIV services organizations, and
- study team network affiliates.

Participants were paid a \$150 cash incentive.

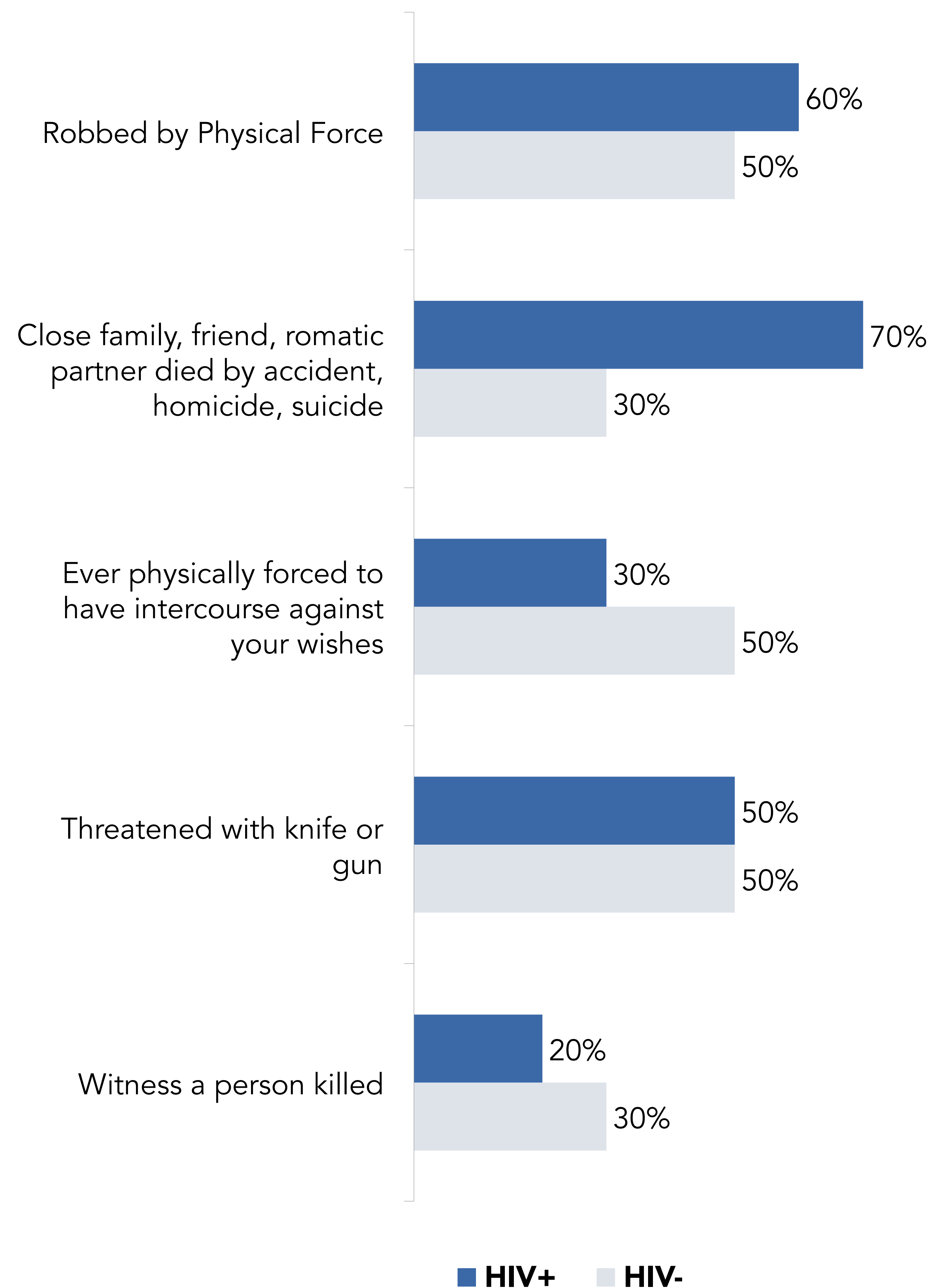
Figure 1. Recruitment Flier.



Results

Preliminary results reveal high rates of exposure to lifetime trauma by HIV positive and negative participants.

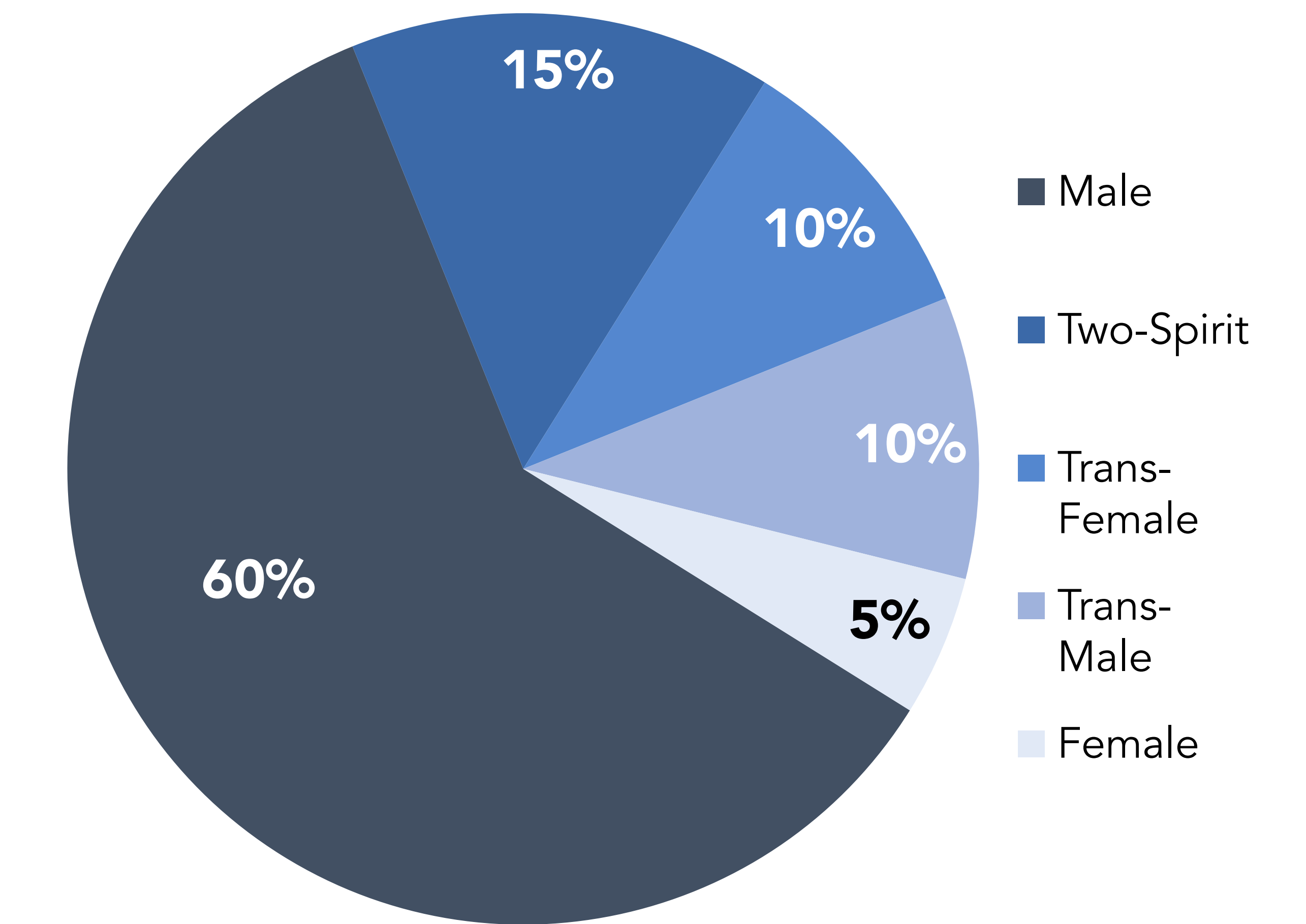
Figure 2. Stressful Life Events



Participant Demographics

Participants represented the multitude of identities across the sex, gender, Two-Spirit, sexual identity spectrum.

Figure 3. Gender Identity



Conclusion

The preliminary results of this study highlight an alarming level of stressful life events experienced by American Indian and Alaska Native participants regardless of their HIV status. Recent studies of war veterans demonstrate a 43% increased risk of suicide related outcomes when exposed to killing or atrocity.⁵ In the current study with AI/AN participants, 20-30% witnessed a person killed, 30-70% had a person close to them die as a result of accident, homicide or suicide, and 50% had been threatened with a knife or gun.

Although the sample is small, these preliminary results point to a greater need to investigate the relationship between trauma, HIV, and other health outcomes among American Indian and Alaska Natives, especially those who identify as Two-Spirit, gay, bisexual, and trans.

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