



HEALING FROM TRAUMA FOR SURVIVORS LIVING WITH HIV

All survivors of trauma respond differently. Trauma informed care is understanding the impacts of trauma on the brain, body, and whole being. There are times when a survivor of trauma may want to discover healing practices that work past listening, talking, and learning about trauma.

WHEN WORKING WITH SURVIVORS LIVING WITH HIV, THERE ARE A FEW THINGS TO CONSIDER BEFORE OFFERING SERVICES:

- ★ Consider the impact of asking about HIV status.
- ★ Remind survivors that their HIV status does not impact their housing or the availability of services.
- ★ Consider the intersection of HIV and DV, and how those traumas may differ in how they impact the survivor in day-to-day activities.
- ★ Consider that the survivor may want to work with an advocate and not discuss the details of the trauma, their HIV status, or how the trauma is impacting them.

Trauma is complex. In addition to the trauma of experiencing domestic violence or receiving an HIV diagnosis, individuals may have additional traumas related to these such as the way in which HIV was acquired, discrimination by medical providers, historical trauma, even trauma associated with a natural disaster. While the survivor may not want to discuss related trauma, it's important to explain that trauma looks and feels differently for everyone.

Survivors all process trauma at different rates throughout their lives. Depending on where they are in their journey toward healing, they may not wish to talk in depth about certain traumas or circumstances that they might be going through. There are some things that we want to make sure that survivors are aware of, so that they have the information that they need in order to take next steps toward healing.



HERE ARE SOME THINGS TO CONSIDER:

- ★ Are all materials available in languages other than English as to be accessible to as many survivors as possible?
- ★ Make sure that all publications, informational sheets, group content, is available in plain language, as to be accessible to all.
- ★ Do survivors have to ask for information, or can they locate publications, such as brochures, in a common area without having to talk with an advocate?
- ★ Do not require that survivors share their HIV status.
 - Remember that HIV status is legally protected information that cannot be shared without their explicit consent. If HIV status is shared, let the individual know that it will not be shared with others.
 - Instead of requiring a survivor to share their status, provide all survivors information on services that may be available specifically to individuals living with HIV, such as Housing Opportunities for Persons with AIDS (HOPWA) Housing.
 - Create safe spaces for discussing HIV. Do you have posters, brochures, other resources to let survivors know they can safely discuss HIV?
- ★ Are there services available that do not have a central focus on Domestic Violence and/or HIV?
 - Survivors may resist meeting with an advocate or participating in services if they are asked to only share their trauma or their progress in medical treatment.
 - Access to groups/services such as cooking classes, yoga, art therapy, provide opportunities for healing through a more holistic lens
- ★ Healing isn't planned.
 - We can never predict what service may lead to the most healing for a survivor—as that varies from person to person. However, the larger the variety of services, the more opportunities a survivor may have to find what heals them.
 - Some examples of some unconventional ways to cover conventional service needs are:



Positively Safe:

THE INTERSECTION OF DOMESTIC VIOLENCE & HIV/AIDS

- Meeting outside of the office. Sometimes going for a walk or a drive, gardening, or doing art can lead to some very meaningful moments to bond, and can lead to more fruitful meetings.
- Creating a peer-network. Consider creating a peer-network of survivors who have participated in the program to help build a network of support. Almost all programs have domestic violence support groups; however, consider creating a time where survivors can meet and discuss whatever is important to them without the presence of staff. Open-ended groups that aren't based on a curriculum allow survivors to talk about what is most important to them at any one time.
- Consider holistic healing practices that may take the place of traditional therapy. Some holistic healing practices can include: acupuncture, meditation, art projects, or anything else that is not paperwork driven.

RESOURCES

For more information on trauma-informed care, including Voluntary Services, checkout NNEDV's [Transitional Housing Toolkit](#). For more information on discussing HIV with survivors of domestic violence, see the [Conversation Guide: Starting the Discussion About HIV/AIDS](#).