

Associations between interpersonal and community-level violence experiences and HIV outcomes: implications for violence screening in Ryan White Clinics

Background:

People living with HIV (PLWH) often experience high rates of interpersonal and community-level violence, such as intimate partner violence, childhood abuse, and hate crimes. These experiences can negatively affect mental health and HIV outcomes like care retention and viral suppression. Although guidelines recommend screening for violence and mental health in HIV care, it's unclear which forms of violence should be prioritized. Comprehensive assessments may retraumatize patients, so simpler tools like PTSD screening may be more practical. Ryan White Clinics, which serve many vulnerable PLWH, are ideal for implementing trauma-informed care. This study explores which violence experiences most impact HIV outcomes to guide efficient, low-burden screening approaches.

Key Takeaway

People with HIV often experience violence and develop PTSD which may worsen health, highlighting the need for PTSD screening and trauma-informed care.

Methods:

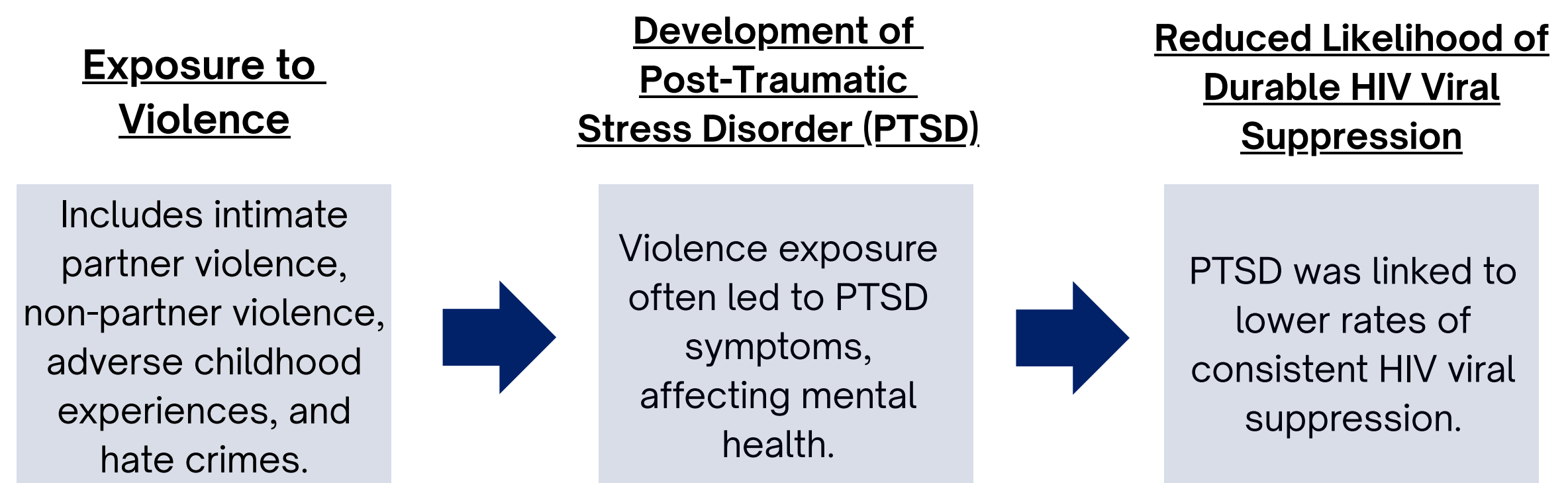
Data Collection:

- Recruited 285 adults living with HIV from Ryan White Clinics, hospitals, and AIDS organizations in Atlanta (2021–2022).
- Participants completed a one-time survey (~60 min), blood draw for viral load, and consented to medical record review.
- Survey included validated tools on violence exposure (adverse childhood experiences, intimate partner violence, non-partner violence), post-traumatic stress disorder, depression, anxiety, and substance use.
- HIV care engagement and viral suppression data were extracted from clinical records.

Analysis:

- Descriptive statistics summarized demographics, violence history, mental health, and HIV outcomes.
- Bivariate analyses tested associations between violence types, mental health symptoms, and HIV outcomes.
- PTSD showed significant associations with HIV outcomes and was further examined using logistic regression.
- Multivariable models adjusted for demographic, substance use, and mental health covariates.

Violence experience leads to worse HIV health through PTSD



Findings:

- High rates of violence were reported: 89% experienced lifetime IPV, 97% non-partner violence, 93% hate crimes, and 59% moderate-to-severe childhood adversity.
- PTSD was significantly associated with all forms of violence and was reported by 59% of participants.
- PTSD symptoms were linked to lower odds of durable viral suppression at 12 and 24 months.
- No significant direct association was found between violence types and HIV care retention or viral suppression, but violence impacted mental health, which in turn affected HIV outcomes.

Discussion:

This study reveals a high prevalence of interpersonal and community-level violence among people living with HIV in Atlanta, including intimate partner violence, non-partner violence, and hate crimes. Although violence alone wasn't directly linked to HIV outcomes, it was strongly associated with PTSD, which in turn was tied to lower odds of durable viral suppression. These findings suggest PTSD may mediate the effects of trauma on HIV care, supporting the need for trauma-informed care and routine PTSD screening to improve health outcomes in this population.

Citation:

Kalokhe, A. S., Anderso, K. M., Carlson, M., Hadera, S., Rose, E., Livingston, M. D., & Sales, J. M. (2025). Associations between interpersonal and community-level violence experiences and HIV outcomes: implications for violence screening in Ryan White Clinics. *AIDS care*, 1-12.

Correspondence:

Ameeta Kalokhe, MD, MS
ameeta.kalokhe@emory.edu