Structural Barriers to Vocational Rehabilitation Outcomes with HIV-positive Persons

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HIV-positive persons commonly experience difficulties with employment that are associated with declining physical health.

- Unemployment is associated with lower HAART adherence and diminished quality of life (Blalock et al. 2002; Nachega et al., 2015; Rueda et al., 2011).
- Individuals with more advanced HIV disease, those with other medical and psychiatric comorbidities, and persons receiving disability benefits display poorer employment outcomes (Brooks et al., 2004; Dray-Spira et al., 2012; Martin et al., 2006; Rabkin et al., 2004; Rodger, 2010).
HIV and Disability Benefits

- Individuals accessing SSI/SSDI benefits are less likely to consider returning to work (Brooks et al., 2004) and work significantly fewer hours than those not receiving these benefits (Escovitz et al., 2005; Rabkin et al., 2004).

- Perceived difficulties with workforce readiness, concerns related to the effects of work-related stress on health, and fear of losing SSI/SSDI benefits are enduring barriers to enhanced workforce participation in this population (Brooks et al., 2004).
Barriers at Baseline

- 108 participants enrolled at Positive Resource Center

- High baseline prevalence of syndemic conditions
  - Moderate or Severe Depression (33%)
  - Substance Use Disorder (33%)
  - Moderate or Severe Food Insecurity (50%)
  - Any Housing Instability (20%)
Qualitative Sample

- N = 22

- 16 male, 5 female and 1 MTF

- 11 Caucasian, 4 Black/African American, 4 Hispanic/Latino, and 3 of multicultural heritage.

- 10 were on SSI/SSDI and 12 were not on SSI/SSDI.
Results

- Structural Barriers

- Social Stigma

- Basic Needs & Prioritizing
Structural Barriers

“Oh, well, he just berated me. He said what do you think you are some sort of a slouch? **No, you don't deserve disability, no, no, no.** You're not going to parlay this into some sort of disability claim. So, and that was the end of it. I never seriously pursued it after that.” (Po78: 58, M, Caucasian, NOD)
Structural Barriers

“The major obstacle that I have faced is the fact that I do work. [...] And their goal is to assist people who cannot work get to work. And the argument that I stated -- I just said, you know, I totally understand that. It makes perfect sense to me and the reason I'm here is because I would like to prevent getting to that point.” (P059: 35, M, Caucasian, NOD)
"I don't like the way our culture views disabled people. [...] They make it difficult. I'm so -- I mean even as a legal person it's difficult for me to keep up with it all [...] It's an oppressive -- it's almost like it's a burden enough to have it, but then you've got the bureaucracy layer on top of it [...] I mean my little inconveniences, personal inconveniences are nothing compared to just all the stuff around it." (P063: 35, M, Caucasian, OD)
Structural Barriers

“That's one thing I fear, like, if I get a good enough job to where I can -- I can sustainably support myself then I'm afraid that I might lose my Medi-Cal.” (P053: 25, M, Black, OD)
Social Stigma

“I don't want to be on the system. [...] Yeah, so I guess I don't consider myself unemployed until I'm not going to be on long-term disability. [...] You know, I wasn't cracked out, or I wasn't a screaming drag queen -- and nothing against drag queens, or I was in like, some (inaudible), you know, asking for help. Or, you know, and I look like I didn't need help. And my (inaudible) was just a little too much, it's like, I'm sorry. I can't help you. You know, and that's embarrassing when, you know, you have to go stand in line and then you get refused for it the whole time.” (P013: 47, M, Hispanic, NOD)
Social Stigma

“I would like the safety net of having legitimate services or legitimate benefits for me there when I need them. And I don't want to make -- I don't want to abuse them. And I'm not being sort of hoity toity and high and mighty about it. But I have to say that I think a lot of HIV positive -- a lot of gay men in this town have taken -- have really taken advantage of the social services available. ” (P016: 47, M, Caucasian, NOD)
Social Stigma

“[...]just not being accepted by, you know, the normal working society[...] -- I've definitely heard the put downs and I, you know, I mean, it was very verbal and it was very harsh, like, retarded and crazy and stupid ”  
(Po53: 25, M, Black, OD)
“See I - you know, except for me I have a hard time asking for help because it’s a pride thing. Black people don’t ask for help, you know. Some black people do, but me my family - my family just always said well, you need to do things on your own. You don’t need no - you don’t need to ask for no help. You need to be independent. Do it on your own.” (P054: 43, F, Black, OD)
“So, but I basically knew I had to take care of my health first, and my back is more important right now than a job. [...] So, but the biggest thing is keeping insurance or some kind of health provider is the biggest issue for me right now.” (P013: 47, M, Hispanic, NOD)
Basics Needs & Prioritizing

“You know, the idea that I will be supported by some government agency at least for a while is not exciting. [...]And it terrifies me, too, and that's an understatement to think that I'm that way or that I'm headed in that direction when, you know, I should have had, yeah, yeah. It's really scary.” (Po55: 50, M, Hispanic, NOD)
Basics Needs & Prioritizing

“I need to supplement my income because SSI is taking out money every other month and [unintelligible] and my rent is too high and I have a kid that I need still to support. And the cost of living here is too expensive. [...]But I need to get a job.” (P054: 43, F, Black, OD)
Basics Needs & Prioritizing

“I have to respect my limitations. My limitations tell me I can't hold down a full time job. And I have to respect that, but a lot of people think I'm just being lazy. And so that's one of the drawbacks of being on disability.” (Po56: 43, MTF, Black, OD)
Discussion

- When to ask for help vs When to rescind help

- Anticipated vs Felt

- Urgency vs Stability
Conclusions

- Policy and Programming Implications
- Syndemics
- Interventions