A Social Work Primer
Marshall Feldman, LCSW


The first thing that strikes the reader of this collection is its sheer size. At more than 500 pages and with more than 40 chapters, it appears to be comprehensive. Its scope is extensive, encompassing a range of topics, settings, and populations.

Editors David Aronstein and Bruce Thompson have set for themselves the task of providing a wealth of information from which the novice social worker can build a solid foundation to begin working with HIV. They have divided the book into five sections in order to guide the reader—an introduction covering a basic overview of the issues and sections on practice settings, people with special circumstances, economic supports, and caring for the professionals who provide care to these populations. Each section is further divided into eleven subsections.

Aronstein and Thompson have brought together an impressive roster of authors—social workers with a wealth of experience, many of whom are among the most noted in their fields. For example, Michael Shernoff presents a solid overview of the topics of general interest to the novice social worker; Jack Stein admirably addresses the issues pertinent to working with clients who use drugs; and R. Dennis Shelby crystallizes the issues that face couples.

These chapters provide an important introduction to these topics and a guide to further work in these areas.

Source of Basic Information
But the emphasis of this book—providing basic information for the novice social worker—is too often its major flaw. There are too many instances where the presentation of good, solid social work practice obscures issues specific to working with HIV. Two examples are notable.

In his chapter on "Clinical Issues for Families," Ian Stulberg does a competent job addressing this topic as it relates to a client's biological family, but, neither he nor any other author in the book addresses the issues of the client's family of choice. Frequently it is the social worker who must intervene between these two equally important types of family and their sometimes conflicting needs.

Judith Hansen Bobcock devotes three chapters to work in acute care settings. She examines discharge planning, issues involving families, and bereavement work. But while Babcock clearly describes social work practice, she fails to address key HIV-related issues. One key difference is the age of the clients: the average client in most acute settings is above 70 years old; the average person with HIV is in his or her thirties, and often younger. Issues related to illness and end-of-life are very different for people in these two groups. Further, the issue of age brings forth very different countertransference issues for providers. Frequently providers in HIV settings are also in mid-life, and anxieties surrounding illness and death are likely to increase when the barrier that age can provide is removed.

Conclusion
Overall, despite its deficiencies, this collection provides the novice social worker with a starting point from which to address and think about the issues involved in working with people affected by HIV. It presents an introduction to important research and advanced texts in the field, and succeeds best as a basic primer.
Community Mental Health and HIV

James W. Dotson, MD


This is a book I didn’t want to like, but, slowly and reluctantly, I warmed up to it. The scope of topics seems recklessly ambitious: epidemiology, law, ethics, health care, special populations. How could an author devote just a few pages to such huge issues without being insipidly simplistic? I was annoyed before I even started the first chapter.

I eventually discovered, however, that HIV and Community Mental Healthcare would be an excellent resource for mental health students or clinicians with limited experience working with HIV. Presented as a study guide, all of the book’s chapters start with an outline and include learning objectives and bulleted lists of important ideas. The strength of the book is its ability to strip numbingly complex topics to their essence.

A good example of this is the first chapter, “HIV-Related Community Mental Health Services,” by the book’s editor, Michael D. Knox, is an impressive and lucid overview of an HIV mental health clinic’s most common issues, including the spectrum of affected significant others, risk reduction, modes of treatment, and staff needs.

For Seasoned Professionals?

Does this book have anything to offer the seasoned HIV professional, the sort of person who dreads going to conferences because there obviously won’t be anything new? The answer is maybe. The chapter on ethics, for instance, revisits the concept of confidentiality and the sometimes conflicting goals of “the duty to warn” and “the duty to protect.” This discussion succinctly guides the reader through tough decisions, such as whether or not to notify sexual partners of HIV-infected clients that the client may have put them at risk.

Other chapters are less successful. “Treating Persons with Serious and Persistent Mental Illness,” for example, provides vague and partially accurate information on psychiatric medications while not being specific enough in addressing the treatment of people with psychotic disorders. On the positive side, it does outline the HIV-related educational needs of mentally ill clients. The chapter on substance abuse covers the basics but never specifically mentions subjects such as harm reduction or the medical use of marijuana, two particularly topical issues.

The medical management chapter promised initially to be particularly annoying. “How could the author hope to cover this topic in less than 20 pages?” I thought. However, this chapter is made accessible with a minimal use of jargon and manages to cover newer issues, such as those pertaining to protease inhibitors.

Conclusion

In the end, HIV and Community Mental Healthcare is quite comprehensive and offers referrals to more detailed sources, including a good appendix on internet resources. I would definitely recommend it as a reference book for mental health programs that offer internships and other teaching activities. It may also provide seasoned practitioners with a refresher course on basic HIV-related issues.

Clearinghouse: HIV-Related Books


HIV Risk and Latino Gay Men

Francisco J. Gonzalez, MD


These days, when the buzz words "cultural competence" are too often a grant writer's afterthought, it is comforting and exciting to read a book like Latino Gay Men and HIV: Culture, Sexuality, and Risk Behavior. Rafael Díaz, a Latino gay man and a researcher at the University of California San Francisco Center for AIDS Prevention Studies, takes the concept of culture to heart and does not drub us with cold statistics, setting his book apart from so much of the HIV prevention literature.

One of Díaz's most profound points is that we must look deeper than the surface of "objective" epidemiological data to see what lies at the core of HIV risk-taking: namely, a subject. As he writes in his introduction, "A major problem with many HIV risk-reduction interventions . . . is their failure to acknowledge the profound and subjective meaning of unprotected sexual encounters." Díaz responds by providing moving excerpts from in-depth interviews and focus groups with Latino gay men.

A Psycho-Cultural Model

The book's nine chapters are divided into three major sections. In the first two chapters, Díaz reviews the behavioral and epidemiological literature on Latino gay and bisexual men. (Díaz makes clear that his book focuses on these self-identified men and not on the elusive "men who have sex with men," a group that might also encompass Latino men who do not identify themselves as gay or bisexual.) This comprehensive review provides the evidence that Latino gay and bisexual men are, in fact, at high risk for HIV infection.

The second section of the book consists of five chapters and focuses on six "psycho-cultural barriers" to behavior change: machismo, homophobia, family loyalty, sexual silence, poverty, and racism. These provocative chapters investigate how cultural "scripts" can undermine the best intentions for safer sex. At times, as in his exploration of machismo, Díaz holds too tenaciously to a gay liberation ideology that can obscure the ways in which cultural values might also be productive, empowering, or distinctive. The persona of the "loca" (or "queen"), for example, is not simply a version of internalized homophobia, but also a figure of social resistance and a signal of certain desires. But, fortunately, neither does Díaz advocate that Latino men simply "come out" into a Westernized, "cloned" version of upstanding homosexuality.

In the final section of the book, Díaz presents a "psycho-cultural model of sexual self-regulation" specifically for Latino men. This model postulates that in the face of challenging sexual situations, intentions to practice safer sex are undermined by cultural "scripts." Poverty and racism, for example, might create an internalized sense of fatalism that weakens an individual's determination to be safe. The cultural imperative to "be a man" might erode the intention to use a condom. Based on this model, Díaz outlines a four-session group intervention that promotes self-reflection and encourages the group to construct safer sex strategies in the context of this cultural milieu. In the discussion of this intervention, Díaz gives the reader a practical example of his theory and opens the door to a cultural closet that has been closed for too long.

Conclusion

While Latino Gay Men and HIV: Culture, Sexuality, and Risk Behavior is obviously written to target Latino gay men, it will benefit any prevention worker or clinician dealing with HIV and cultural issues. Indeed, it is exemplary of what culturally-informed work can be when it moves beyond superficial rhetoric and reaches for the heart of the matter.

New Triple Diagnosis Book

The AIDS Health Project announces the second volume in its monograph series: The Alcohol and Drug Wildcard: Substance Use and Psychiatric Problems in People with HIV. The book reviews the complex diagnostic and treatment issues raised by this conjunction. The book costs $9.95 plus shipping and handling ($2.00) and tax for California purchasers (8.5%). For multiple, rush, or international orders, call 415-502-4930, or send payment and address to UCSF AIDS Health Project, Box 0884, San Francisco, CA 94143-0884.
Agency Dynamics and the Epidemic
Patricia Sullivan, MFCC


In Lessons from the Damned, Nancy Stoller offers a perspective on the history of the HIV epidemic. Drawing on the experiences of HIV agencies, she discusses ways in which disenfranchised populations have shaped the politics and dialogue of the U.S. AIDS epidemic. She also examines ways in which HIV organizations, from grassroots efforts to mainstream bureaucracies, have affected AIDS service delivery. In doing so, Lessons from the Damned offers techniques for managing organizational challenges, for example, staff diversity and effective community organizing.

Surviving as an AIDS Organization

The book is a collection of case studies focusing on various organizations, including “non-mainstream” agencies, and their struggles to maintain individualism in the face of what Stoller terms “bureaucratic universalism.” Among the biggest challenges are inter-ethnic cooperation and connecting to a community base. As agencies move from grassroots efforts to more uniform, corporate bureaucratic structures, they begin to lose touch with their primary communities. This move is often the result of greater reliance on public funding and the demands of funders. At such points, Stoller says, the “direct power of the community through volunteerism, membership, or participation by self-initiation is lost.” Stoller argues not to damn bureaucracies but to examine how AIDS organizations, which by nature must receive public funding, can stay connected to the community voice that was their original inspiration.

Stoller emphasizes the ways in which racism, sexism, and class “have both limited and energized . . . community organizations.” In doing so, she offers a means for the organizational—and perhaps personal—self-reflection that can lead to change.

For example, in her chapter on Prevention Point, the pioneering activist organization, Stoller both extols the group for its direct-action efforts and criticizes its inability to integrate the needs of women, people of color, and the poor into its agenda. Stoller writes about “the functional consequences of combining radical intent with a cultural base whose class and race privilege are not examined.” The idea that an agency’s greatest strength can also become its chief limitation is a common theme of the book.

In her chapter on Prevention Point, Stoller illustrates the effects of both growth and diversity. Prevention Point began in 1988 as an act of “civil disobedience by a group of pagan, hippie anarchists” whose goal was to provide clean needles to drug users. Its organizational structure was an anarchic, consensus management model. As it continued to distribute needles, it became highly effective in building community support, and by September 1989, the group had exchanged 100,000 needles.

Though predominantly a White organization, Prevention Point had a broad base of community support. African American religious leaders, however, opposed needle exchange because it would keep the Black community “chained” to drugs or encourage them to continue behaviors that would be more likely to lead to arrest and incarceration than would similar behavior among White injection drug users. Prevention Point addressed such concerns by diversifying its needle exchange teams. Stoller continues to trace the growth of Prevention Point, focusing on the conflict between the original anarchic model and an emerging hierarchical structure, and emphasizing the contributions of both: effective community organizing and the “linkages and influence” that connect to non-profit funding.

Conclusion

In the midst of such thoughtful analysis, Stoller is often too quick to generalize. For example, in her chapter on the California Prevention Education Project (Cal-PEP), entitled “When Sex Workers Run AIDS Organizations,” Stoller writes, “Despite its idiosyncrasies in the eyes of White public health professionals and bureaucrats, Cal-PEP continues to receive public funding.” But it may be a leap to assume that being White and a bureaucrat will naturally predispose a funder against an organization like this one. Stoller also focuses on sociological factors without acknowledging the psychological factors—multiple loss, relentless change, burnout, and feelings of helplessness or hopelessness—that can take a tremendous toll on an organization’s staff and development.

Despite these shortcomings, Stoller’s book is thought-provoking and a helpful addition to the literature as we continue to ponder our collective history of working in the HIV epidemic. In the end, Stoller is optimistic that the lessons from her exploration can offer us direction and guidance in response to the epidemic.

Authors
Patricia Sullivan, MFCC is a licensed psychotherapist who has worked in the HIV epidemic for over 12 years. She is a former program director for the UCSF AIDS Health Project and is currently working as a private consultant.

Working with clients who have HIV-related neurological impairment can be challenging on a number of levels. Impairment may be subtle or mimic psychiatric symptoms, such as depression, and, as a result, can be difficult to diagnose. HIV-associated cognitive/motor complex, for example, can cause declines in attention, concentration, fine motor skills, verbal fluency, and memory, all of which can interfere with a therapist’s ability to work with a client.

Practitioner’s Guide to the Neuropsychiatry of HIV/AIDS consists of a series of chapters aimed at helping the “non-neurologically trained mental health clinician” become more aware of the ways HIV can affect the brain and providing guidelines for assessing for and working with clients with HIV-related neurological impairment. The result is a comprehensive, up-to-date volume on the research that has been done in this area.

Clear Advice

Many of the chapters toward the end of the book provide clear and helpful advice for clinicians working therapeutically with HIV-infected clients. Stephen Buckingham and Michael Shernoff discuss psychosocial interventions and distinguish between therapeutic techniques that focus on concrete problem-solving and psychoanalytic techniques that assist therapists in working with clients who have HIV-related neurological impairment. Rae-Lynn Benson-Duffy describes specific adaptations for daily activities, such as the use of memory aids. Ian Stulberg and Jill Shapira offer guidelines for educating family members and partners about HIV and AIDS. The last chapter in the book, by Robert Meyer and Susan Leavenworth, includes legal guidelines for determining incapacity due to HIV-related neurological impairment.

The chapters early in the book are highly technical and seem to be written for neuropsychologists, physicians, and pharmacologists. Much of the information is about aspects of care outside the scope of most mental health clinicians’ work. For example, Charles Hinkin, Steven Castellon, Wilfred van Gorp, and Paul Satz suggest which neuropsychological tests to administer and how to interpret the results. Other chapters focus on medical information and include advice about medication doses and decisions. It would be easy for the very readers the book targets to feel overwhelmed by the technical detail in some of these chapters.

Conclusion

While Practitioner’s Guide to the Neuropsychiatry of HIV/AIDS provides extensive information about the interaction of HIV and psychiatry, it offers no summary or synthesis of the information presented throughout the book. As a result, it lacks a thread to bind these diverse elements into a cohesive unit. The various chapters also seem to target a wide array of professionals, including physicians, psychiatrists, neuropsychologists, and other mental health professionals. As a result, any individual reader may find only some of the chapters useful. In general, this book is better suited for neuropsychologists and medical professionals with a training in neurology.

HIV in the Inner City

Gary Grossman, PhD


Psychotherapy and AIDS: The Human Dimension is a compilation of various perspectives on providing psychological services to inner city HIV-infected patients. Each of the 14 authors participates in an HIV service program at a New York university medical center. With its focus on an underserved and often disenfranchised urban population, this volume fills a void in the HIV-related literature.

The book is divided into three sections: HIV Treatment Specialization; Family, Children and Couples; and Specialized Populations, including the chronic mentally ill and substance abusers. Each chapter begins with a brief history of the topic, continues with a description of the given program, and moves on to present technical considerations and clinical vignettes.

Editor Lucy Wicks, Director of HIV Mental Health Services at Columbia Presbyterian Medical Center, sets the tone in her introduction by emphasizing the importance of attending to the psychological needs of clients and of undertaking a multidisciplinary approach to mental health services.
Her psychodynamic orientation is notable in her discussion of the therapeutic benefits of understanding an individual's beliefs and fantasies about death, as well as in her assertion that childhood beliefs always color adult experiences. This is a welcome contrast to the trend in mental health toward psychobiological and pharmacological methods, excluding the psychological meaning of psychiatric symptoms.

Important but Flawed Contribution

Because of its sensitivity to the individual client's cultural needs, its emphasis on a multidisciplinary approach, and its presentation of various treatment modes, *Psychotherapy and AIDS* is an important contribution to the HIV psychological literature. The writing, however, is uneven in quality and does not address the needs of the book's intended audience. There are chapters that are well-organized and clearly written. For example, Carlos Almeida and John Sash's "General Principles of HIV Psychopharmacology" and John Budin's "Understanding Neuropsychiatric and Psychological Symptoms in HIV illness" provide valuable information to clinicians.

Several other chapters, however, seem to demonstrate inexperience in scholarly writing. For example, in "Psychotherapy with Substance Abusing Inner City HIV Positive Patients," Joan Storey uses psychoanalytic terms associated with specific therapists without including citations or definitions. Her reliance on jargon diminishes the authority of her contribution.

The volume also fails to identify its target audience. In the introductory chapter, Wicks states that the book is aimed at experienced clinicians working in medical centers and private practice. However, most of the chapters are written for clinically naive readers, and much of the space is devoted to describing basic principles of psychotherapeutic technique. Experienced clinicians are likely to find this alienating, if not condescending.

By striving to provide an inclusive, multi-perspective volume on working with inner city HIV-positive patients, Wicks sacrifices attention to specific topics and leaves the more seasoned reader frustrated. For example, in her introductory chapter, Wicks gives only brief attention to a wide range of issues, such as pain management, bereavement, death and dying, and suicide. For topics as complex as these, such brevity results in more questions than insights.

Conclusion

Because of its focus on underserved populations, this book is an important addition to the literature. But its flaws make it better suited as a textbook for beginning therapists rather than as a compilation for experienced professionals.

---

**Social Interaction**

George Harrison, MD


Marshaling research on the effects of HIV on the social being, *HIV and Social Interactions* proposes that observation of changes in relationships provides a deeper understanding of the HIV experience. The nine core chapters of the book present information and research on a variety of topics, including stigma, gay men's social identity, the meaning of AIDS for gay African American men, and forms of social support. The chapters—varying in presentation from a journalistic format to a description of study design and results—discuss the given topic and related research.

**A Broad Spectrum**

In the initial chapter the editors present their "social interactional model" with the goal of developing an understanding of "the issues faced in one's social life as one copes with HIV." The model suggests that a seropositive person's experience is filtered through socially determined stigma that affect function in several spheres of identity, personal coping, and interpersonal coping. This construct focuses the care plan on a client's current or future abilities, but since it overlooks other aspects of social behavior, it offers only a partial understanding of the client experience.

The final chapter by Kathryn Green and Julianne Serovich has the ambitious task of summarizing each topic in the book, applying the model to it, and discussing treatment implications and future research. The authors persuasively present a clear formulation of the topics and their synthesis and direct the reader's attention to the social and interpersonal implications.

Other chapters are effective in exploring individual topics—even if they do not extend the book's thesis. A particularly interesting chapter looks at helpful and unhelpful forms of social support. This

The contributors . . . have provided us with rich theoretical material and vivid case studies. Resting on the premise that a modified version of analytically informed psychotherapy can serve patients well in all phases of HIV illness, the authors demonstrate a finely-tuned flexibility in their thinking and in their uses of themselves . . .

The value of Hope and Mortality lies in its integration of newer theories about therapy as a co-creation of meanings and affects, in which therapist self-disclosure in the moment may become a major part of the therapeutic action. On the other hand, this book is top-heavy in its attention to unsafe sex and the issue of disclosure . . . Overall, I found that the [book] more “experience near” than other recent books on AIDS.


This work has been eagerly awaited by HIV activists and researchers alike, given the respect and admiration which many in the community have for Ariss’s intelligence and analytical skills. I am sure that it will not disappoint . . . [Ariss] look[s] at the way gay men as a marginalised and previously pathologised group have interacted with the forces of the medical, drug research, and political worlds . . . The most compelling parts of the book for me are when Ariss combines some of the personal narratives from the more than 200 people with HIV/AIDS he interviewed . . . with his observations and analysis.


This book is a collection of very personal tales written by some well-known and not so well-known gay widowers . . . In my reading of this well-written and well-edited book, I witnessed the power of these men’s stories. I recognized once again the individuality of the developmental process for each person. I also recognized the themes and choices that are here for us as gay men and the themes and choices that are universal to grief and mourning of a partner regardless of orientation or other differences . . .

This book, brought forth out of pain and healing, is an important first step toward making our stories [as gay men] part of the collective unconscious.

Brief Reviews


The contributors . . . have provided us with rich theoretical material and vivid case studies. Resting on the premise that a modified version of analytically informed psychotherapy can serve patients well in all phases of HIV illness, the authors demonstrate a finely-tuned flexibility in their thinking and in their uses of themselves . . .

The value of Hope and Mortality lies in its integration of newer theories about therapy as a co-creation of meanings and affects, in which therapist self-disclosure in the moment may become a major part of the therapeutic action. On the other hand, this book is top-heavy in its attention to unsafe sex and the issue of disclosure . . . Overall, I found that the [book] more “experience near” than other recent books on AIDS.


This work has been eagerly awaited by HIV activists and researchers alike, given the respect and admiration which many in the community have for Ariss’s intelligence and analytical skills. I am sure that it will not disappoint . . . [Ariss] look[s] at the way gay men as a marginalised and previously pathologised group have interacted with the forces of the medical, drug research, and political worlds . . . The most compelling parts of the book for me are when Ariss combines some of the personal narratives from the more than 200 people with HIV/AIDS he interviewed . . . with his observations and analysis.


This book is a collection of very personal tales written by some well-known and not so well-known gay widowers . . . In my reading of this well-written and well-edited book, I witnessed the power of these men’s stories. I recognized once again the individuality of the developmental process for each person. I also recognized the themes and choices that are here for us as gay men and the themes and choices that are universal to grief and mourning of a partner regardless of orientation or other differences . . .

This book, brought forth out of pain and healing, is an important first step toward making our stories [as gay men] part of the collective unconscious.
Internet Update

The Internet can provide quick and easy access to the latest information about HIV disease, but navigating the vast array of HIV-related web sites can be difficult.

The Centers for Disease Control and Prevention’s (CDC) National AIDS Clearinghouse Guide to Selected HIV/AIDS Links (http://www.cdcnac.org/hivlink.html) is a good way to begin searching for information. With more than 100 links organized in 20 categories, this site offers an extensive Internet directory of HIV. This month, the CDC’s National AIDS Clearinghouse becomes the CDC National Prevention Information Network (NPIN), containing information about not only HIV disease but also other sexually transmitted diseases and tuberculosis. The CDC also produces the AIDS Daily Summary—a news update service—available online (http://www.cdcnac.org/daynews.html) or through e-mail. (To subscribe, send a blank e-mail message to preventionnews-subscribe@cdcnpin.org.)

Critical Path AIDS Project (http://www.critpath.org), a Philadelphia organization for people with HIV disease, provides another on-line source for the latest news in HIV disease, prevention, research, clinical trials, and treatments. The publication’s hotlink leads to a directory of AIDS-related publications.

Managing Desire: HIV Prevention Counseling for the 21st Century (http://www.managingdesire.org) targets the HIV test counseling community as well as the general consumer. The site is produced by Nicolas Sheon, the Prevention Editor of the HIV Insite web site of the UCSF Center for AIDS Prevention Studies (http://hivinsite.ucsf.edu) and an HIV test counselor at the Berkeley Free Clinic. Managing Desire includes categories on training, advice, and research, as well as an opportunity for patrons to disclose their sexual behaviors in the “Confess Your Safer Sex Sins” chat section.

The Body: An HIV and AIDS Information Resource (http://www.thebody.com) features information about HIV prevention, treatment, and upcoming conferences. A section called “Quality of Life” discusses everyday issues such as diet and nutrition, mental health, financial and legal matters, art, and spirituality. The Body recently began posting the full text of POZ Magazine: Health, Hope & HIV, a publication for people living with HIV.


• The Bulletin of Experimental Treatment on AIDS (BETA) (http://www.sfaf.org/beta.html), published by the San Francisco AIDS Foundation, is free on-line.

• Journal of AIDS/HIV (http://www.ccspublishing.com/j_aids.htm) offers free current issues on-line; back issues are accessible to subscribers only.

• Treatment Issues (http://www.gmhc.org/aidslib/ti/ti.html), published by the Gay Men’s Health Crisis, provides free access to issues dating back to 1995.

Next Month

The 12th World Conference on AIDS in Geneva included dozens of papers on adherence to antiviral drug regimens. In the January 1999 issue of FOCUS, Cassy Workman, MD, Associate Director of AIDS Research Initiatives in Sydney, discusses her individualized approach to working toward adherence with her patients.

Also in the January issue, Tim Teeter, BSN, Treatment Support Supervisor at the San Francisco AIDS Foundation, offers a perspective on adherence among underserved populations such as the homeless.