

ENGAGING WOMEN EXPERIENCING HOMELESSNESS AND JUSTICE-IMPACTED WOMEN IN THE ADAPTATION OF A TRAUMA-FOCUSED INTERVENTION

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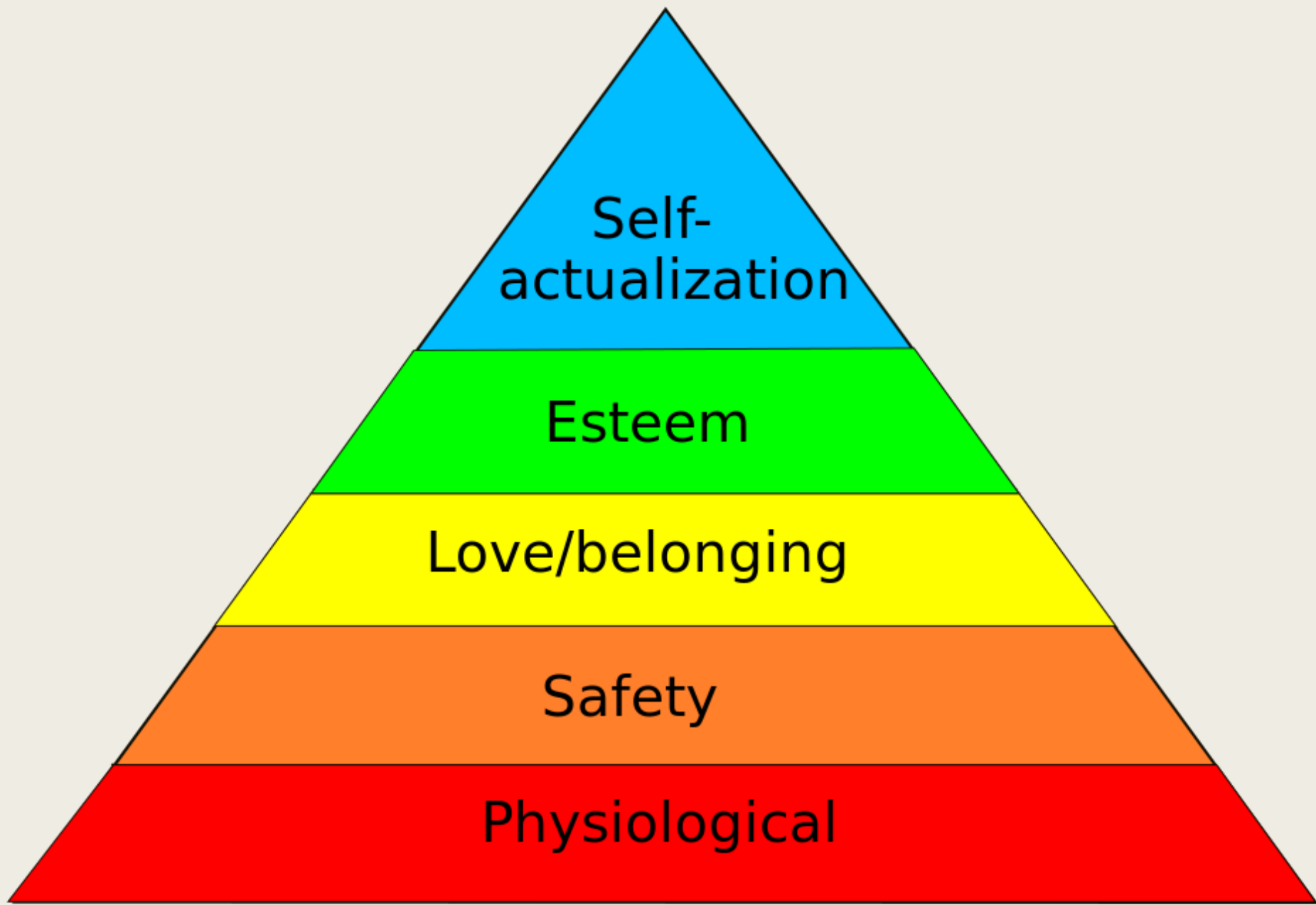
Overview

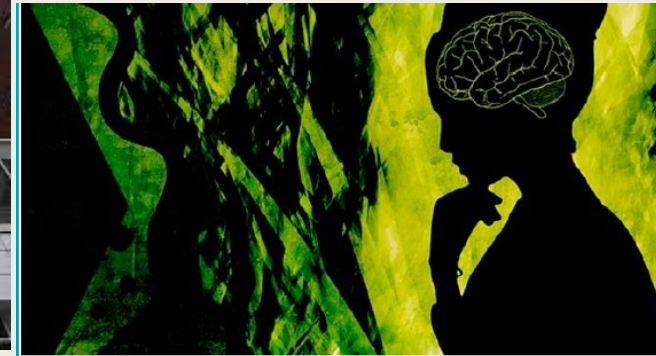


- Women Experiencing Homelessness
 - Narrative Exposure Therapy (NET) Screening and Pilot
 - Systematic Adaptations
- Justice-Impacted Women
 - Narrative Exposure Therapy Screening and Pilot
 - Systematic Adaptations
- Future Directions



Why?





TRAUMA

FLASHBACKS

PTSD

ANXIETY

INSOMNIA

FEAR

ON EDGE

HYPER-VIGILANCE

NIGHTMARES

ABUSE

IMPATIENCE

MEN

WOMEN

VETERAN

KIDS VICTIM

JUMPY

IRRITABILITY

TERRIFYING EVENT

UNCONTROLLABLE THOUGHTS

EMOTIONAL DISTANCE

ALCOHOL ABUSE

POST-TRAUMATIC STRESS DISORDER

NERVOUS

DRUGS ABUSE

MENTAL HEALTH

PSYCHOTHERAPY

WITNESSING TRAUMA



**WOMEN
EXPERIENCING
HOMELESSNESS**

Background

- Trauma exposure near ubiquitous
 - 90%-100%
- Some develop “PTSD”
 - 25%
- Suboptimal care engagement
- Concern for “building block effect”
 - Biopsychosocial consequences

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Research Letter ONLINE FIRST

March 13, 2023

Mortality Trends Among Adults Experiencing Homelessness in Boston, Massachusetts From 2003 to 2018

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Homelessness is a growing public health concern in the US, with an estimated 580 445 people experiencing homelessness on any given night.¹ Prior studies have documented mortality disparities with the general population^{2,3}; however, temporal mortality trends among people experiencing homelessness remain understudied.



Description

**Stakeholder-Driven
Intervention**

Methods

Phase 1

- Semi-structured interviews (n=20)
 - 10 WEH
 - 10 mental health professionals and shelter staff

Phase 2

- Life Events Checklist + PTSD Checklist for DSM-5 (n=35)
 - Screening

Phase 3

- Open feasibility/acceptability pilot (n=8)
 - Pre/post-assessments (change scores)
 - Pre/post-interview (systematic adaptations)

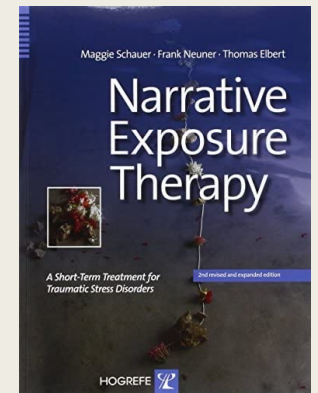
Setting



Intervention

Narrative Exposure Therapy (“NET”)

- Human-rights informed approach to treating complex PTSD
- Internationally lay-counselor delivered
- Behavioral exposure and testimony therapy
- Survivors of multiple traumas (often ongoing)
- Re-shape and integrate fragmentary autobiographical narratives



Schauer, Neuner, Elbert (2005/2011) Narrative Exposure Therapy (NET). A Short-Term Intervention for Traumatic Stress Disorders. Hogrefe & Huber Publishers.

Life Events Checklist

Event	Happened to me	Witnessed it	Learned about it	Part of my job	Not sure	Doesn't apply
1. Natural disaster (for example, flood, hurricane, tornado, earthquake)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Fire or explosion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Transportation accident (for example, car accident, boat accident, train wreck, plane crash)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Serious accident at work, home, or during recreational activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Exposure to toxic substance (for example, dangerous chemicals, radiation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Physical assault (for example, being attacked, hit, slapped, kicked, beaten up)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Assault with a weapon (for example, being shot, stabbed, threatened with a knife, gun, bomb)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Sexual assault (rape, attempted rape, made to perform any type of sexual act through force or threat of harm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Other unwanted or uncomfortable sexual experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Combat or exposure to a war-zone (in the military or as a civilian)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Captivity (for example, being kidnapped, abducted, held hostage, prisoner of war)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Life-threatening illness or injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Severe human suffering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Sudden violent death (for example, homicide, suicide)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Sudden accidental death	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Serious injury, harm, or death you caused to someone else	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PTSD Interview for DSM-5

In the past month, how much were you bothered by:	Not at all	A little bit	Moderately	Quite a bit	Extremely
1. Repeated, disturbing, and unwanted memories of the stressful experience?	0	1	2	3	4
2. Repeated, disturbing dreams of the stressful experience?	0	1	2	3	4
3. Suddenly feeling or acting as if the stressful experience were actually happening again (as if you were actually back there reliving it)?	0	1	2	3	4
4. Feeling very upset when something reminded you of the stressful experience?	0	1	2	3	4
5. Having strong physical reactions when something reminded you of the stressful experience (for example, heart pounding, trouble breathing, sweating)?	0	1	2	3	4
6. Avoiding memories, thoughts, or feelings related to the stressful experience?	0	1	2	3	4
7. Avoiding external reminders of the stressful experience (for example, people, places, conversations, activities, objects, or situations)?	0	1	2	3	4
8. Trouble remembering important parts of the stressful experience?	0	1	2	3	4
9. Having strong negative beliefs about yourself, other people, or the world (for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous)?	0	1	2	3	4
10. Blaming yourself or someone else for the stressful experience or what happened after it?	0	1	2	3	4
11. Having strong negative feelings such as fear, horror, anger, guilt, or shame?	0	1	2	3	4
12. Loss of interest in activities that you used to enjoy?	0	1	2	3	4
13. Feeling distant or cut off from other people?	0	1	2	3	4
14. Trouble experiencing positive feelings (for example, being unable to feel happiness or have loving feelings for people close to you)?	0	1	2	3	4

Diagnostics

Psycho-education

Lifeline

Exposures

Testimony

What is Trauma?

Trauma is simply defined as “a deeply distressing or disturbing experience”. **Traumatic events** include incidents like physical and sexual abuse, child abuse, serious accidents, the unexpected injury or death of a loved one, or natural disasters like fires or earthquakes. Traumatic experiences can cause someone to lose control and can even threaten their life. A traumatic event can be something that happened directly to you or something that you saw happen to someone else. During traumatic events, someone usually does not have control and she may feel very afraid or scared.

Trauma symptoms are a powerful reaction that sometimes happens after someone faces one or more traumatic events. Trauma symptoms can include both emotional and physical responses. Some people who experience traumatic events develop *a lot* of symptoms that last for a long time. Others may develop *very few* if any symptoms. Some people develop symptoms and may not even know it.

Examples of common emotional symptoms include:

- trying to avoid thoughts or memories of the traumatic event(s)
- experiencing flashbacks or feeling as though one is reliving the traumatic event(s)
- being easily startled, jumpy, or “on edge”
- feeling irritable or easily angered
- feeling sad or depressed
- feeling anxious or having difficulty relaxing
- feeling extra “on guard” or watchful
- having difficulty sleeping and/or nightmares



Diagnostics

Psycho
-education

Lifeline

Exposures

Testimony



Diagnostics

**Psycho-
-education**

Lifeline

Exposures

Testimony



Westby C. Narrative Exposure Therapy (KIDNET).
 Word of Mouth. 2020;32(1):13-14.



~2005	"Grandmother dies"	Chicago	Stone/Candle
2005	"Daughter (██████████) goes to college"	New Orleans	Flower
2005/2006	"Pain"	Chicago (shelter)	Stone
2004	"Fell Apart"	Chicago	Stone
2006	"Jumped ██████████"	Cicero	Stone

Exposure: It was sad, but she was sick. She had diabetes, she liked Coca-Cola. I think I was at home – on Lemington. I talked to her – she was in the hospital. I told her "what can I do for you?" – take my grandkids to church. JC was the oldest grandchild. One of the last requests was to take the grandkids to church. I told her I would. I remember talking to her. I think my auntie got a phone call before she died and they wanted us to all go to the hospital and say our goodbyes. Went to hospital. JC doesn't remember it all. There was a lot of us – her daughter, my uncle, brother, her son, 2 more of her grandkids. Remember seeing grandmother on her death bed, told her I love her. It was sad. My brother was going crazy – running around the hospital like he was a damn fool. The police stopped him. Took him outside. Said he was going to shoot the doctor.

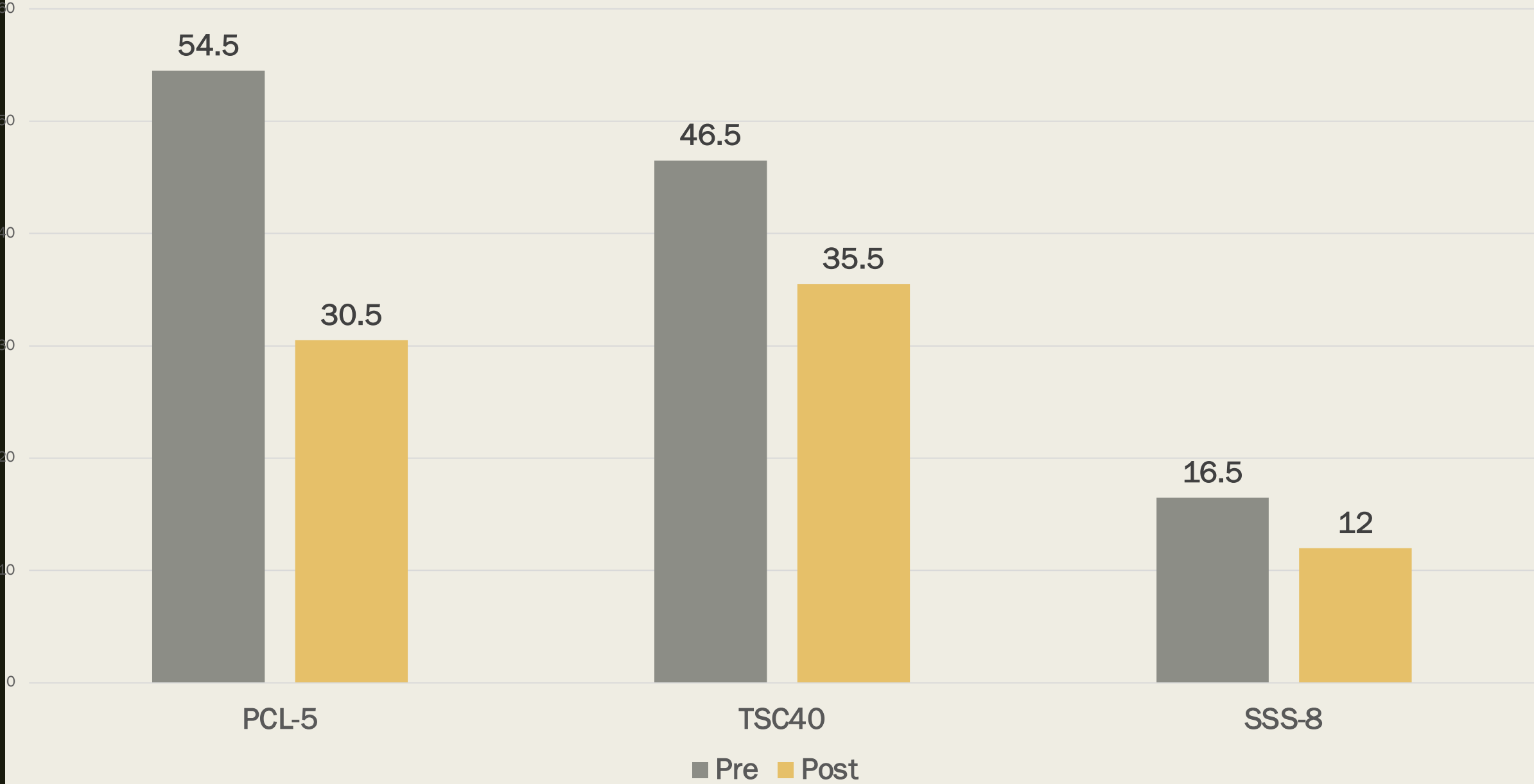
Exposure: 2 Flat, 3 bedroom– 3 boys, Dominique, husband Joe (6 total). Gang banging. ~15/16 years. 2 boys sharing room, Juan on the enclosed back porch, Dominique had her own room, was paying rent. JC and Joe shared bedroom. School had just started, it was the weekend. JC was working overnights as a CNA by Midway airport, Renaissance. Thought little Joe was alright, wasn't aware of gang banging. Just got home from work, he came in and was bleeding. Wearing a white t-shirt, blood all over it, bleeding from the head. Naked in the chair, with blue jeans. "I was fighting." "I panicked, I was taking deep breaths." "Blood everywhere." Goes to MacNeal Hospital. In the ED. JC calls ██████████ and she picks up right away. Quite a few stiches in his head. Scar on his forehead. "I didn't want my son to die." Thought he was going to be braindead. When first saw him, asked him who he was fighting. Friend didn't help because he stayed on the block with the perpetrators, thought they would do something to his family, wouldn't talk with the police. Went into work. He was angry when he came home. "How is nothing wrong and he got hit with a brick?" He began walking around the neighborhood and "pointing his finger like it was a gun." Went to mental health hospital. Age 16/17.



Screened Participants (n=35)	
Qualifiers (<i>PCL-5</i> \geq 28)	32 (91%)
Age, mean (range)	51 (23-75)
Race, n (%)	
Black/African American (AA)	26 (74%)
White	8 (23%)
Asian	1 (3%)
Ethnicity, n (%)	
Hispanic/Latinx	6 (19%)
Life Events, n (%)	
Physical Assault/Abuse	32 (91%)
Sexual Abuse (n=34)	27 (79%)
Violent death	16 (46%)
Witnessed violent death	7 (20%)
Accidental death	18 (51%)
Witnessed accidental death	9 (26%)
PTSD Checklist for DSM-5 (PCL-5), mean (range)	47.5
Black/AA	49.3
White	43.7

NET Participants/Completers (n=8)	
<i>Age, mean (range)</i>	52 (49-61)
Race	
Black/African American	8 (100%)
Educational Attainment	
Less than high school/GED	4 (50%)
High School/GED	1
Some college	3
Relationship Status	
Single, divorced or separated	8 (100%)
Mental Health Diagnosis	6 (75%)
Trauma-related diagnosis	0 (0%)
Physical Health Diagnosis	8 (100%)
Hypertension	7 (87.5%)
Tobacco, Alcohol, Prescription medication, and other Substance use Tool, <i>n</i> (%)	
<i>Tobacco</i>	5 (63%)
<i>Alcohol</i>	1 (13%)
<i>Illicit drugs</i>	2 (25%)
<i>Prescription drugs</i>	2 (25%)

Preliminary Effects



Results

Acceptability

NET Satisfaction	
Process traumatic memories, <i>mean (range)</i>	5 (5)
Address trauma-related symptoms, <i>mean (range)</i>	4.8 (4-5)
Meet life demands, <i>mean (range)</i>	5 (5)
Continue participation, <i>mean (range)</i>	5 (5)
Recommend to family/friend, <i>mean (range)</i>	5 (5)
Overall satisfaction, <i>mean (range)</i>	5 (5)



“Excellent. It gave me a chance to see parts of myself that I had seen in the past, but not actually taking time to examine. I've been able to examine myself and see better qualities than I was aware of or unwilling to look at before. So, I've grown a lot through this process.”

Results

Acceptability



“I enjoyed it thoroughly because I had someone that I could absolutely talk to about things that I've never discussed before in my life and get some honest and objective feedback. And that has been priceless and invaluable to me in life. So, I would say it's extremely, to say beneficial to me doesn't quite cover it.”

“I love it. I love it. Absolutely. A hundred and fifty percent...It brought my memories that I remember. A lot of memories. You touched something but that I had; I didn't had it. I didn't know I had it in me...And I think if you got this out of me, imagine and you many people, you could help them not having a stroke. It's bad you didn't come before me having a stroke...I'm grateful too because my son, my daughter was telling me you need counseling. And I thought it was for crazy people...it's a stress reliever because you help me in a lot of ways that you can't imagine...It is true. I'm not just saying it. I mean that and you helped me get, I didn't know I had all that bottled inside.”



Results

Optimizing Acceptability

Women with Lived Experience (Peers)

“And then, at some point then the people who go through the trauma therapy and do can become trained. Like you said, like peers...good. I think that would make people feel like empowered because then they could see themselves doing that as opposed to...people would feel more empowered and see themselves in that position and that as a possibility, and it would also encourage people to heal like, okay, I want to get better because this is what I want to do...I want to be the peer trauma specialist or whatever. And they say, okay, I want to heal because I want to do that. Then that's it. That makes you want to do more for yourself, then if you just doing it for your life, doing it to have a better relationship with your family or, you know what I'm saying?”



Results

Optimizing Acceptability – Content Modifications

Recognizing Injustice & Inequity

“this study, it helps me, it helped me see that it wasn't my fault, you know, it was his, something was wrong with him, not me. Something was wrong with those people who raped me.”



Results

Optimizing Acceptability – Content Modifications

Acknowledging Religion & Spirituality

“once I finally started talking to people, I felt like, you know, a little lighter. Like I'm not carrying so much around. So, can't nobody judge you anyway no matter what you are going through, nobody but God. So, I just keep the faith, stay prayed up and just try to stay out of harm's way as much as possible.”

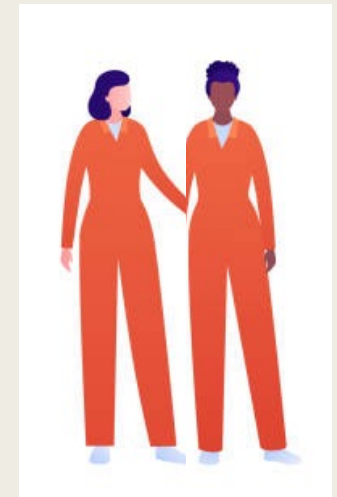


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JUSTICE-IMPACTED WOMEN

Background

- Fastest growing contingent of incarcerated population
 - Over 800% in ~50 years
- High rates of traumatic victimization
- Mental and behavioral health conditions
 - 70% dependent on ≥ 1 substance
 - Over 200% increase in drug-related arrests
- Link between trauma and substance involvement
- Unmet need within the correctional system
 - Reduced recidivism, family impact





Department of Corrections Partners

Methods

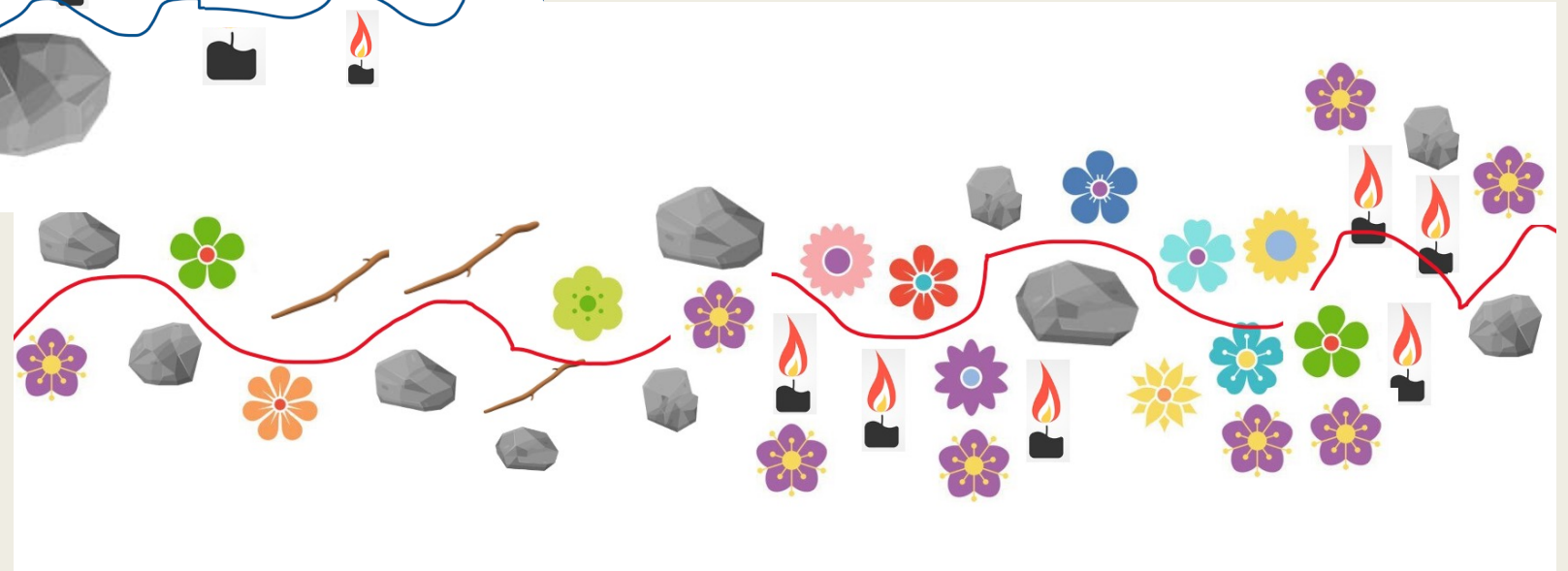
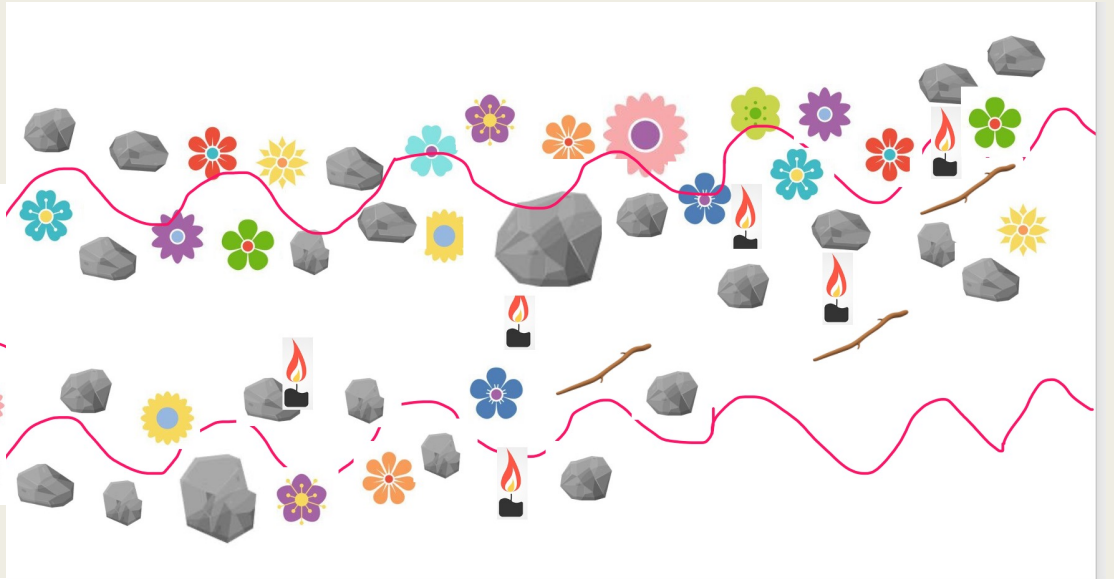
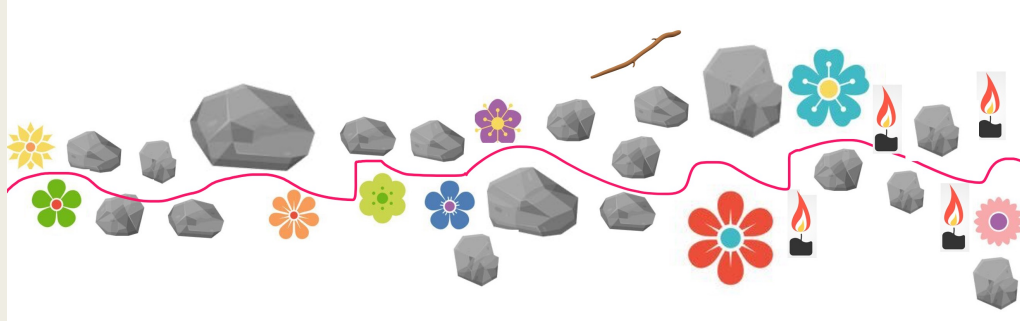
Phase 1

- Life Events Checklist + PTSD Checklist for DSM-5 (n=51)
 - Screening

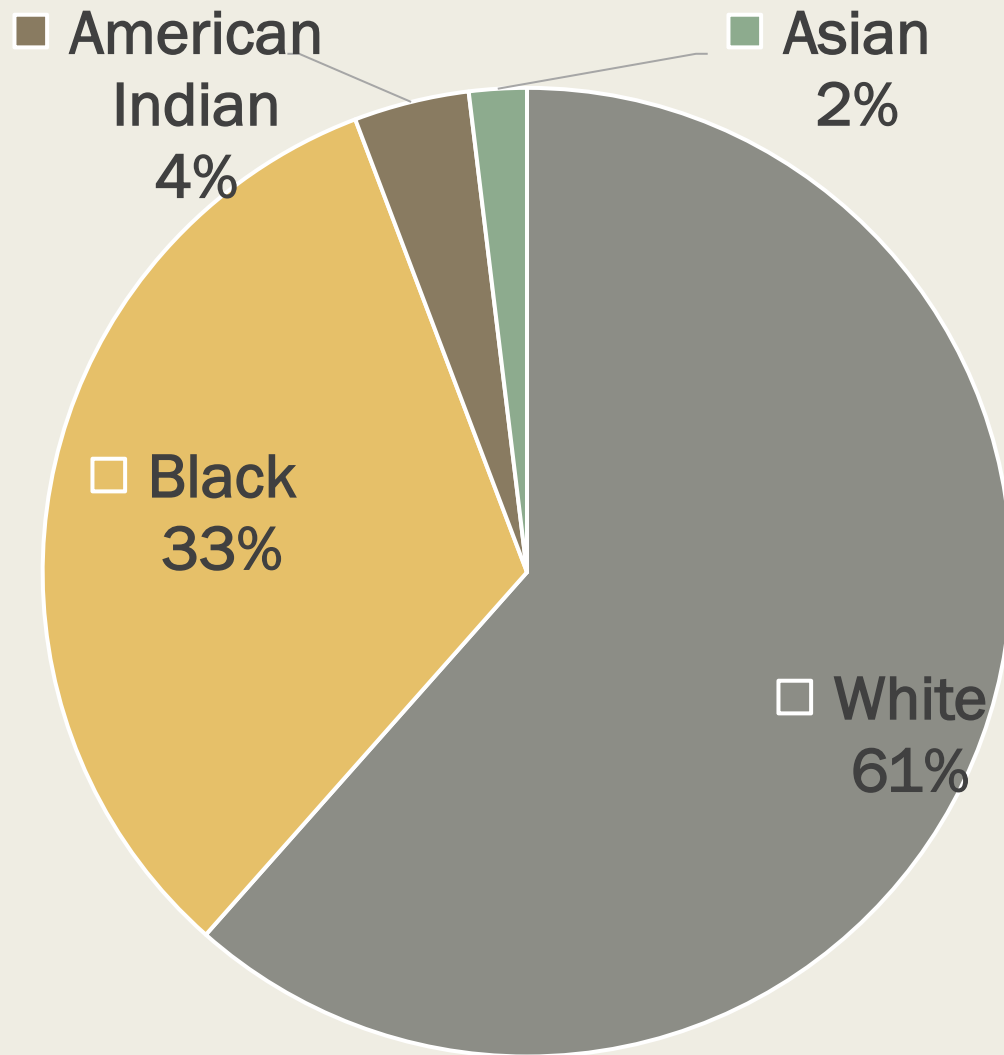
Phase 2

- Open feasibility/acceptability pilot (n=8)
 - Pre/post-assessments (change scores)
 - Pre/post-interview (systematic adaptations)

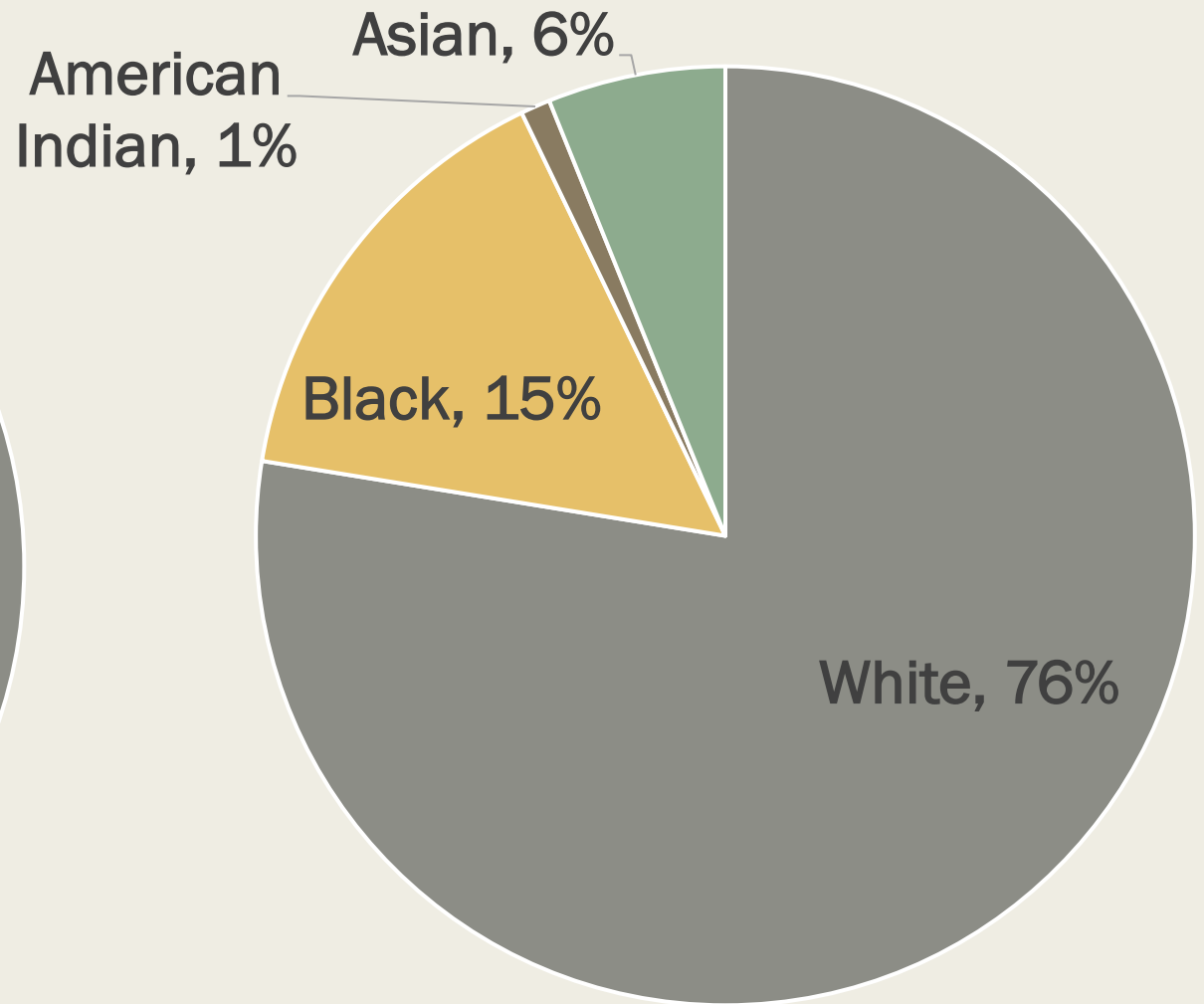
Virtual Adaptations



Screened Participants (n=51)	
Qualifiers (PCL-5 \geq 28)	49 (96%)
Age, mean (range)	42 (22-68)
Race, n (%)	
Black/African American (AA)	17 (33%)
White	32 (63%)
Asian	1 (2%)
Unknown	1 (2%)
Ethnicity, n (%)	
Hispanic/Latinx	6 (12%)
Previously Incarcerated, n (%)	16 (31%)



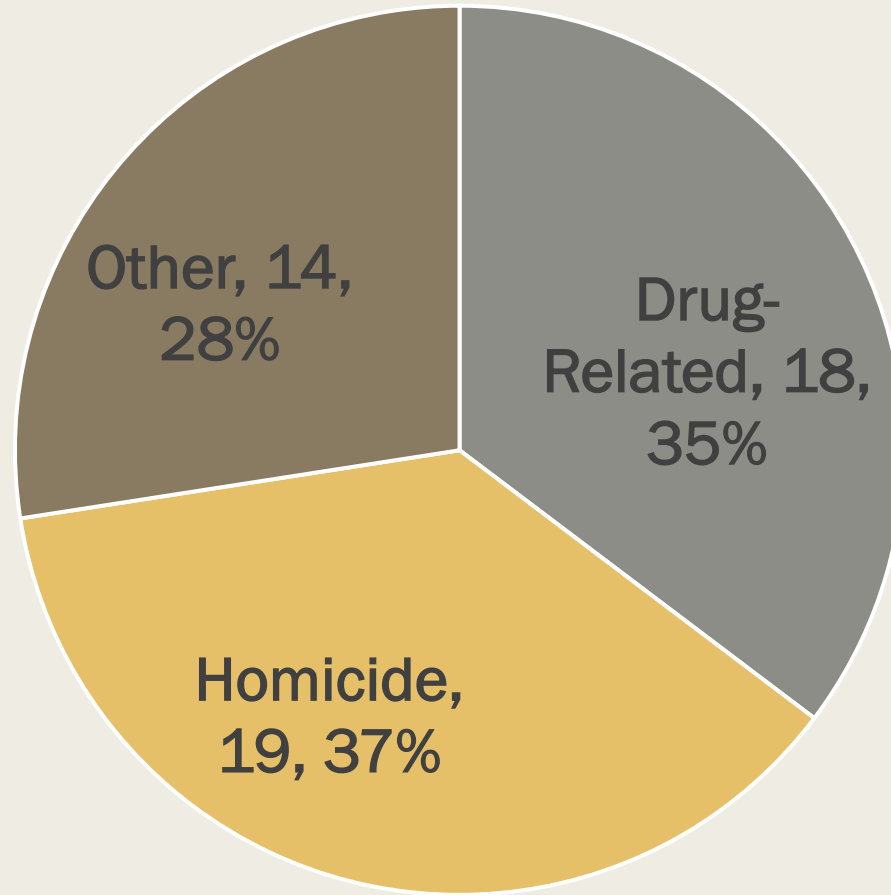
Study Sample



Illinois Population

Screened Participants (n=51)	
Life Events, <i>n</i> (%)	
Physical Assault/Abuse	50 (98%)
Sexual Abuse	38 (75%)
Violent death	46 (90%)
Witnessed violent death	25 (49%)
Accidental death	40 (78%)
Witnessed accidental death	25 (49%)
PTSD Checklist for DSM-5 (PCL-5), <i>mean</i> (range)	50.2 (7-74)
Black/AA	51.9 (29-72)
White	48.1 (7-72)

Offense Type

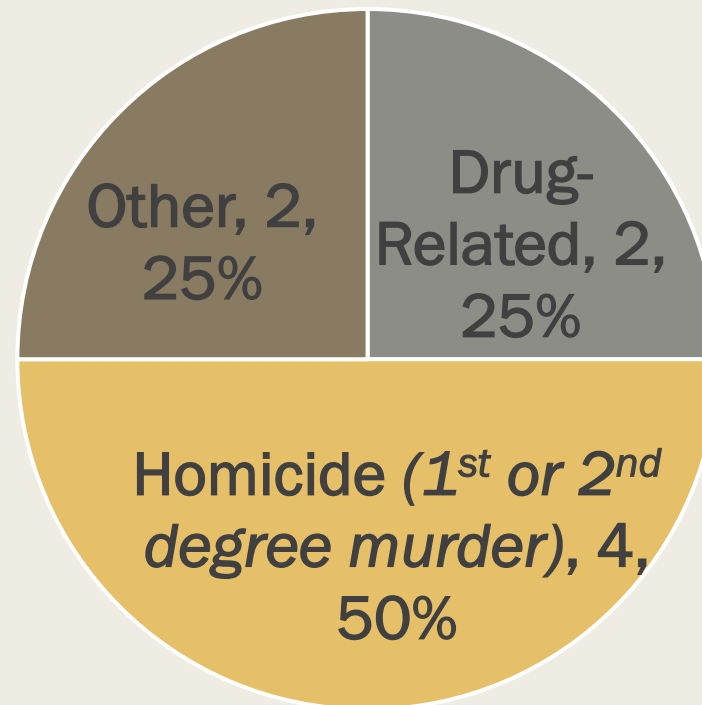


NET Participants/Completers (n=8)	
Age, mean (range)	37 (22-48)
Race	
Black/African American Non-Hispanic/Latinx	5 (62.5%)
White Hispanic/Latinx	2 (25%)
White Non-Hispanic/Latinx	1 (12.5%)
Educational Attainment	
High School/GED or less	4 (50%)
Some college	1 (12.5%)
Associate's Degree or higher	3 (37.5%)
Relationship Status	
Single, divorced or separated	6 (75%)

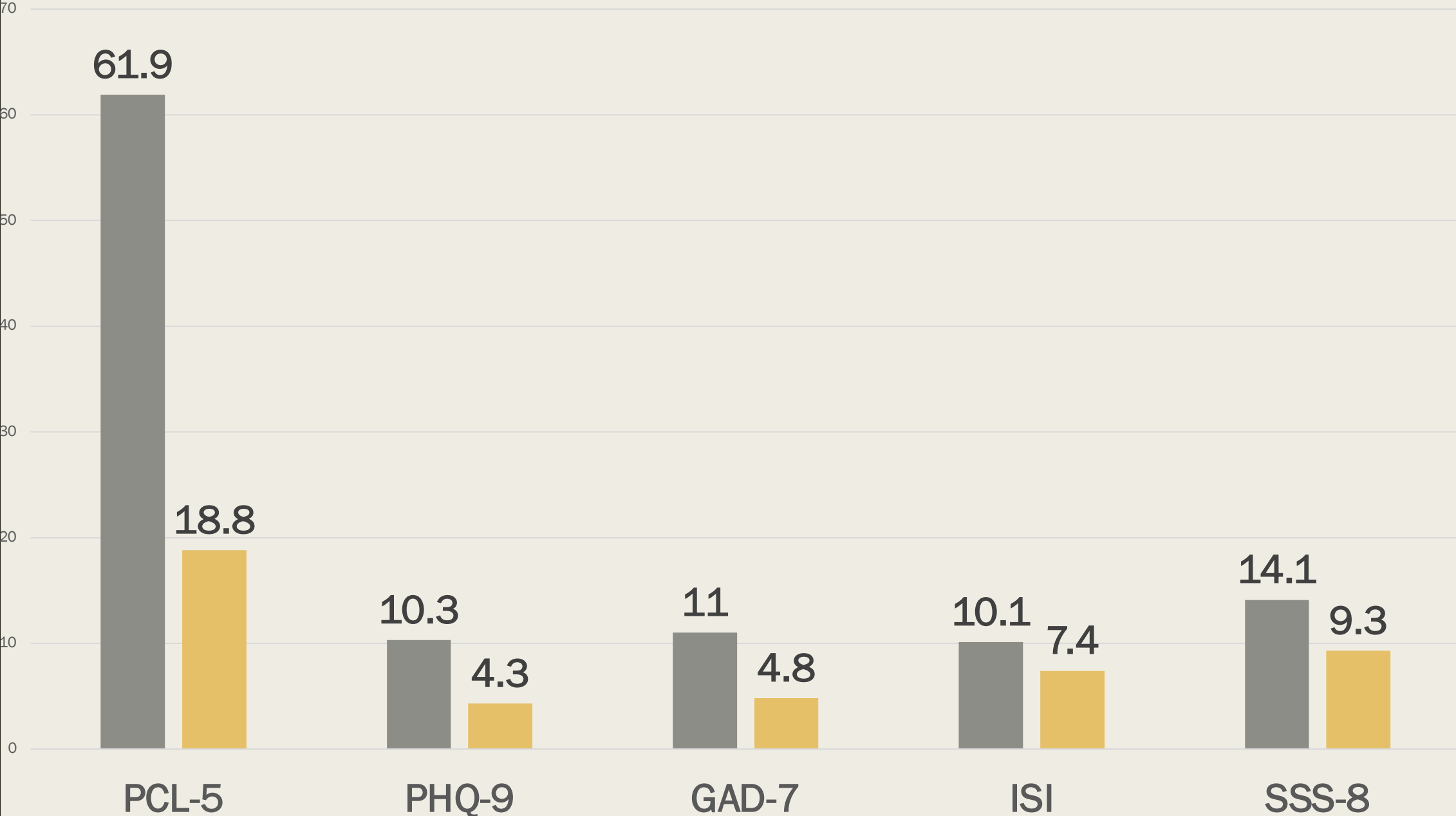
NET Participants/Completers (n=8)	
Prior Homelessness	7 (87.5%)
Mental Health Diagnosis	7 (87.5%)
Trauma-related diagnosis	4 (50%)
Physical Health Diagnosis	7 (87.5%)
Cardiometabolic Disorder	6 (75%)
Hypertension	5 (62.5%)
Tobacco, Alcohol, Prescription medication, and other Substance use Tool, <i>n</i> (%)	
<i>Tobacco</i>	2 (25%)
<i>Alcohol</i>	6 (75%)
<i>Illicit drugs</i>	5 (62.5%)
<i>Prescription drugs</i>	2 (25%)

NET Participants/Completers (n=8)	
Sentence Duration (<i>range</i>)	3-70 years
Previously Incarcerated	3 (37.5%)

Offense Type



Pre-Post Change



Results

Acceptability

NET Satisfaction	
Process traumatic memories, <i>mean (range)</i>	5 (5)
Address trauma-related symptoms, <i>mean (range)</i>	5 (5)
Meet life demands, <i>mean (range)</i>	5 (5)
Continue participation, <i>mean (range)</i>	5 (5)
Recommend to family/friend, <i>mean (range)</i>	5 (5)
Overall satisfaction, <i>mean (range)</i>	5 (5)

Results

Optimizing Acceptability

- Adverse Childhood Experiences (ACEs)
- Intimate Partner Violence
- Intergenerational Trauma Transmission
- Substance Use
- Parenting/Mothering

Results

Optimizing Acceptability

- Women with Lived Experience/“Peers”
- Community Re-Entry
- Emotional Management Skills
 - Self-improvement, love, acceptance

Results



Optimizing Acceptability

“So how do I put, how do I put an action that I have no words for into words? Although in initially it may seem impossible, honestly, it's quite simple. Shame, defeat, worthlessness, incapability. All these words are pronounced in a way that is determined to make you feel. Love, needed, deserving, protected, all the words your abusers use is to justify leaving you broken and bruised, guilty, confused, hurt, denial, justification. All the words that the victim ascribes to themselves and their abusers. It just had to be something I've done. I shouldn't have said or done that if I would've just left it alone. They didn't mean it. It was just an accident. All these things and so much, mobile through your mind, how to get out crosses your mind. But sometimes you're so defeated, or you feel so stuck that you just can't leave. So, then you begin to do things that you never would've done to prove that you'll worth their love. Drugs, alcohol, prostitution, robbery, whatever it takes to save your own life. If they say do it, you don't question it. Believing that if you comply, the beating and the forced sexual acts will stop, the result of the baby that you have just to receive the unconditional love that you so desire. Never mind you been, you've just introduced another innocent victim to an already hopeless situation that it becomes generational...

Results

Optimizing Acceptability

...My mom watched it happen to her mom. I watched as it happened to my mom, my sister watched as it happened to me. And now my nieces stand by helplessly as it happens to their mom. How do you break the curse when you're taught that this is normal, beaten, bloody, bruised, confused, misused, praying for a solution, too afraid to talk to anyone, not wanting to be or become the subject of others' conversation. You slowly find yourself in isolation and still with devastation, taught that whatever happens in this house stays in this house. So, you already know not to run your mouth broken, lonely, dehumanized. You've fallen for all the lies, and you've managed to get yourself into a trap that you can't see no way out of. The words that are spouted at you in a moment of anger and rage, seem to ring true, no longer sure of what is and what's not, or how to make it stop. Now you find yourself in an even tighter spot. The solution is now either you or them, and you have no idea which decision will ring true. Screams, shouting, yelling, sirens. It's all like a bad dream that you can't seem to wake up from. You find yourself stuck in this tiny room feeling the oxygen, slowly leak from your lungs. What do you do? What do you say? Where's your abuser? All questions that scroll through your mind but are too far away to seem logical. Joy, peace, self-love, self-esteem, freedom, confidence. All the things I gained through our forced separation. You really messed up because you let me find God. All the things I gained through our forced separation. You let me find God. Now that I know who I am and whose I am, all of your lies have been exposed. I saw you for what you truly were. You are a distraction to keep me from my destiny. The love I found without you, I'll never go back. I can never be your sad, useless punching bag. Finally, I can look you in your eyes and say, look what you made me do. Kind of funny that the tables are turned. Wiser, better, stronger, all the things I need to say to you, I am now defined by God and no longer by you" (P3).

Limitations

- Small-study effects
- Practice effects
 - Measurement-based care
- Social desirability bias
- Investigator bias
- Blinding



Future Directions

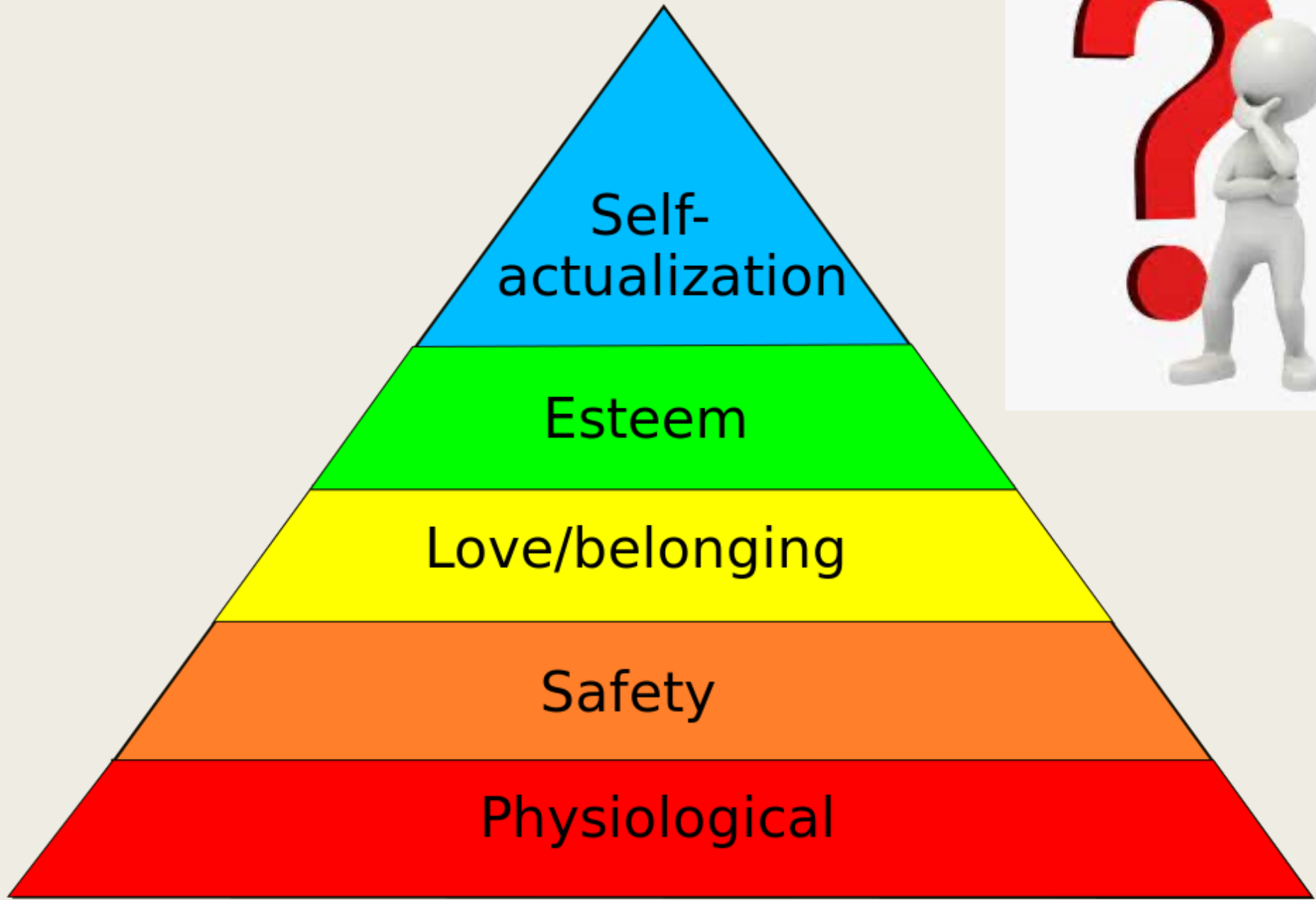
Waitlist randomized controlled trial

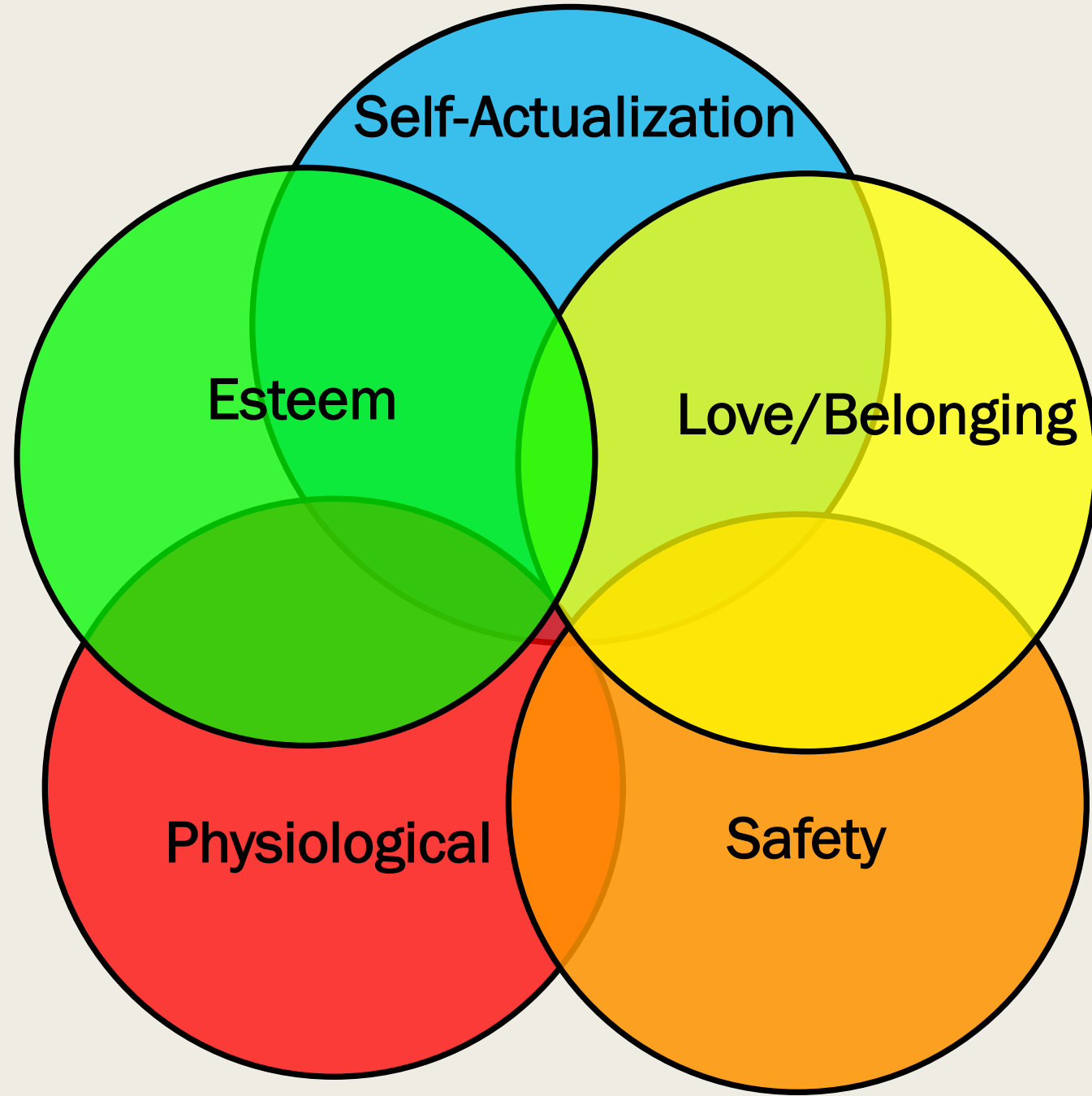
- Expanding team and community partnerships
 - Research Assistants
 - Inclusion of women with lived experience (“peers”)
- Mindfulness-based Cognitive Behavioral Therapy (CBT)
- Biopsychosocial Outcomes
 - Substance use, cardiovascular disease, children/families
- Critical Time Intervention
 - Shelter → housed
 - Correctional settings → community re-entry

Conclusions

- Trauma disproportionately affects women experiencing homelessness,
justice-impacted women
- Diagnosis and treatment disparity
- NET as a low-cost, feasible strategy
- Stakeholder recommendations
- Biopsychosocial health equity







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- Illinois Department of Corrections
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- DAISY Health Equity Research Grant
- Institute for Translational Medicine
Chicago KL2
- Chicago Chronic Condition Health Equity
Research Pilot Grant
- Rush Center to Transform Health and
Housing
- Chicago Homelessness & Health
Response Group for Equity
- Mentorship and Study Team



CHaT Lab