



# Prevention issues for Older Adults

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# Outline

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- Misconceptions about older adults and sex: ageism and stigma
- Older Canadians and HIV: at-risk populations, modes of transmission
- Barriers to HIV screening and diagnosis in older adults
- Strategies for action...

# Who is considered an older adult?

The 'American Association of Retired Persons' study found:

- Of adults between 45 and 59, 50% of women and 55% of men reported sexual activity within the previous six months
- Of those between 60 and 74, one-quarter of women and 31% of men reported sexual activity in the same period

# Ageism, stigma & assumptions

- Ageism: the prejudice against our feared future self
- Stigma: about sexuality and HIV
- Assumptions about and about older adults concerning sex

# How are older people at risk for HIV?

- In the early 1980s, older people who used blood products were at risk for HIV
- Now, risk behaviours for older people are the same as for other populations:
  - Practicing unprotected sex
  - Sharing syringes with others (to a lesser degree)

# Older Canadians and HIV

- Older Canadians accounted for approximately 9% of people living with HIV/AIDS in Canada up to 2007
- HIV incidence has increased since 2002 (11% of reported cases) to 15% in 2007
- Sexual contact was the main mode of transmission

(Source: HIV/AIDS in Canada: An environmental scan, CATIE (2009))

# Who are older people living with HIV?

- Many are long-term survivors of HIV
- Others have been diagnosed at a later age

The challenge is to reach older people at-risk for HIV with educational programs and messaging, and those who have HIV but have not been diagnosed.

# So, why don't they just wear condoms like everyone else?

Older people are less likely to wear a condom because:

- There's no worry about getting pregnant
- Few older adults were educated that condoms should be part of their lives
- They don't consider themselves to be at risk for STIs



# Transmission and older women

- After menopause, women's vaginal tissues thin and natural lubrication decreases
- Males have a shorter lifespan than their female counterparts. The higher ratio of women to man may create relations of power.

# Transmission risks for older MSM

Older men who have sex with men (MSM) face a unique set of challenges when it comes to HIV prevention:

- They may experience greater stigma about their sexuality
- Loss of partners and friends, condom fatigue and treatment optimism may put them at risk
- Potential for social isolation may lead to drug use and increased risk-taking.

# Newly diagnosed older adults

- Studies have found untreated, older HIV-positive persons are twice as likely to die than their younger, untreated counterparts
- However, once HAART is initiated, they respond well to treatment
- It is therefore important to screen and test older adults at-risk for HIV

# Barriers to diagnosis

- HIV/AIDS symptoms resemble those of other chronic illnesses which tend to develop in older adults
- Health care providers rarely think to test for HIV in the older adult
- Many medical providers:
  - don't review sexual histories with the older patient
  - don't educate about safer sex practices

# HIV stigma among older adults

- The risk of HIV transmission is marked by a lack of knowledge of how HIV is transmitted
- Talking about sex may be considered a social taboo
- Many older adults are reluctant to initiate discussions with their health-care providers about their sexual lives

# Strategies for action...

- HIV prevention for seniors can only happen if we bring a coalition of community and service providers together
- It is important to realize the various factors that contribute to HIV in older populations
- Prevention programs and messaging should take these factors into account in developing older age-specific HIV education campaigns

# Strategies for action...

- Develop guidelines for testing and assessing risk
- Implement and evaluate models for HIV education for older adults

**Thank you!**