

OLDER ADULTS LIVING WITH HIV/AIDS ON THE RISE IN CANADA

Canadian AIDS Society

The number of older Canadians living with HIV has spiked over the past decade and a half. The reason for this trend is two-fold. First, increased access to improved antiretroviral therapy allows people currently living with HIV to live longer lives and age with HIV. Secondly, more and more Canadians are now receiving an HIV diagnosis in later stages of life.¹

According to the Public Health Agency of Canada report, *HIV/AIDS Among Older Canadians*, over one in four newly reported AIDS cases were among older Canadians in 2011. Early diagnosis of HIV is important at any age, but early detection for seniors is critical as the disease progresses quicker in those with weaker immune systems, such as the elderly.¹

The World Health Organization demonstrated in a 2009 study that seniors are less likely to be tested for HIV.² Additionally, past research on late diagnosis of HIV infection from the *American Journal of Medicine* showed that older patients were more likely than younger patients to be diagnosed during hospitalization and to receive an AIDS diagnosis at the time HIV was detected.³



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“It is more important than ever for our current health care delivery models to address and adapt to the complex issues associated with HIV and aging,” said Monique Doolittle-Romas, the Chief Executive Officer at the Canadian AIDS Society.

Health care providers often assume older patients are at a lower risk of acquiring HIV, and typically tend to be less vigilant when it comes to their sexual health. Traditionally, conventional HIV prevention programs have excluded the older adults out of the policy dialogue on HIV/AIDS as they were not considered to be part of the at-risk population.

Importantly, changes to policy should include knowledge dissemination alongside medical intervention. According to a 2012 Canadian survey conducted by Ekos Research Associates, seniors are generally misinformed about modes of HIV transmission. In fact, merely 57 percent of survey participants between the ages of 55 and 64 were aware that HIV transmission could occur through unprotected sex among heterosexual couples, and less than 50 percent of them knew that unprotected sex between two men could serve as a means for HIV infection.⁴

In addition to facing potential ageism from health care providers, older Canadians living with HIV often confront multiple forms of stigma and intolerance, including HIV-related phobia, sexism, racism and homophobia. Gay men and men who have sex with men (MSM) represent the largest proportion of older Canadians living with HIV today. Often, gay men and MSM may choose to conceal their HIV-positive status within social support settings, such as retirement homes, for fear of encountering homophobic attitudes and HIV-related phobia.¹

Other demographics are also impacted by the stigma associ-

ated with HIV. Older Canadians living with HIV from Aboriginal and ethnocultural communities may also face HIV-related phobia and homophobia within their own communities. This exacerbates the racism they encounter when they attempt to access a range of care and support outside their cultural circles.¹

When it comes to HIV prevention and positive health, it is imperative that older Canadians become part of the HIV/AIDS discourse. Part of the solution lies in recognizing that older Canadians may be at risk of acquiring HIV, adapting HIV prevention efforts to the specific needs of different populations, and actively engaging older adults living with HIV/AIDS.

“We cannot afford to ignore the needs of older Canadians any longer,” said Monique Doolittle-Romas. “The current HIV prevention and support initiatives must include targeted efforts to reach older Canadians who deserve to make informed choices when it comes to their health, and live full and active lives.”

References:

1. “HIV and Aging in Canada: An Introduction.” 2013 Updated HIV and Aging Fact Sheets. Ottawa: Canadian AIDS Society, 2013. [http://www.cdnaids.ca/files.nsf/pages/hiv_aging_1-introduction-fact-sheet/\\$file/HIV_aging_1-Introduction-FactSheet.pdf](http://www.cdnaids.ca/files.nsf/pages/hiv_aging_1-introduction-fact-sheet/$file/HIV_aging_1-Introduction-FactSheet.pdf)
2. George P Schmid and others. “The Unexplored Story of HIV and Aging.” *Bull World Health Organ.* 2009 March; 87(3): 162.
3. Mugavero MJ, Castellano C, Edelman D et al. “Late diagnosis of HIV infection: the role of age and sex,” *Am J Med.* 2007; 120(4):370-73.
4. Ekos Research Associates. 2012 HIV/AIDS Attitudinal Tracking Survey. Prepared for PHAC. 2012. http://epe.lac-bac.gc.ca/100/200/301/pwgsc-tpsgc/por-ef/public_health_agency_canada/2012/072-11/report.pdf