CDUHR FACT SHEET

HIV and Aging: HIV-related health issues among Gay, Bisexual and other MSM

Purpose of the study

It is estimated that by 2015 50% of adults living with HIV in the US will be over the age of 50 and a significant portion are gay, bisexual, and other MSM. This study aimed to better understand health challenges and factors affecting HIV+ sexual minority men who are age 50 and older.

How was the study conducted and who was involved?

Project GOLD was a mixed methods study (using a quantitative survey and in-depth interviews) that included 199 sexually active gay, bisexual, and other MSM ages 50 and over who were HIV+ and lived in the New York City metro region. Description of the participants:

- Average age of participants was 55
- Averaged 18.4 years living with HIV
- 70% are long-term survivors (diagnosed before 1996)
- 93% identified as gay or bisexual

- 76% non-White
- 75% had an undetectable viral load
- 48% had a CD4 count of 500 or more

What were some of the findings?

Syndemics theory (which states that epidemics are overlapping and synergistic and are heightened by psychosocial burdens) was used to examine the well-being of older HIV+ MSM. The findings uphold syndemics theory as there is a complex synergy between health states, specifically sexual risk taking, substance use, and mental health burdens.

Although 96% of study participants reported currently taking HIV meds, adherence rates were considerably lower:

- >48% failed to take their medications on schedule
- 1 in 5 reported missing at least one dose in the past 4 days, and this was associated with depression, HIV-related stigma, and sexual compulsivity

Mental health, substance abuse, and sexual behavior risks among older HIV+ MSM 40% 35% 38% 30% 25% 26% 20% 15% 20% 20% 5% Unprotected R USTA Mariiuana depression illicit anal intercourse symptoms drug use with HIV+ partner

What might this mean for policy makers and funders who plan HIV/substance abuse prevention efforts?

Health issues for older adults living with HIV are complex and multifaceted. Care must be directed holistically to address the multiple health issues faced in this population, as well as the psychosocial states that fuel them. Attention must also be paid to the differences in life experiences and health states for older adults who are long-term survivors as compared to those who seroconverted later in life. Individuals diagnosed prior to 1996 not only have been living with HIV before the implementation of highly effective antiretroviral therapy but have also lived to older adulthood with the stress and trauma of the HIV epidemic before there were any truly effective treatments. Providers should continue to address the psychosocial needs of this population, including stigma related to their HIV diagnosis and social stressors in their lives that may compromise their health.

Where can you find more information about these findings?

Halkitis PN, Perez-Figueroa RE, Carreiro T, Kingdon MJ, Kupprat S, & Eddy J (2014) Psychosocial burdens negatively impact HIV antiretroviral adherence in gay, bisexual, and other men who have sex with men aged 50 and older. *AIDS Care*, 26(11): 1426-34.

Halkitis PN, Kupprat SA, Hampton MB, Perez-Figueroa RE, Kingdon MJ, Eddy JA, Ompad DC (2012) Evidence for a Syndemic in Aging HIV-positive Gay, Bisexual, and Other MSM: Implications for a Holistic Approach to Prevention and Healthcare. *Annals of Anthropological Practice*, 36(2): 365-386.

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