Subject: Including people aged 50 and over in the DHS - HIV Posted by RachelAlbone on Thu, 03 Apr 2014 13:26:44 GMT View Forum Message <> Reply to Message

As noted by UNAIDS in 2013 an increasingly significant trend in the global HIV epidemic is the growing number of people aged 50 years and older, who are living with HIV. UNAIDS notes that this trend has important implications for HIV responses, yet it remains a largely hidden dimension of the epidemic. It is hidden because of the lack of data available. With DHS the source of data for prevalence estimates and a number of the GARPR indicators, a huge amount of HIV data has been restricted to people between the ages of 15-49.

With growing numbers of people aged 50 and over living with HIV, we now face an ageing epidemic and much more comprehensive data is needed to inform an evidence based and age-appropriate response. Expanding DHS to include men and women over the age of 49 is necessary to achieve this.

In the US it is projected that people aged 50 and over will constitute 50% of people living with HIV by 2015. In sub-Saharan Africa current figures suggest people in this age group already constitute significant proportions of all people with HIV (35% in Madagascar, 24% in Lesotho, 20% in Zambia, 19% in Malawi, Swaziland and Uganda). The 2007 and 2012 Kenya AIDS Indicator Surveys included women and men up to the age of 64. The findings of the 2012 survey show prevalence is highest in the 45-54 year age group. Better data is needed to ensure accurate prevalence estimates and a clearer understanding of older people's risks and access to services and support.

Where HIV data is available on people aged 50 and over it indicates some of the challenges to be addressed and makes the case for more systematic data collection. For example:

1) Data shows older people are less likely to practice safer sex than younger people. For example, in Nigeria 4.7% of men aged 50-59 who had 2 or more partners in the previous 12 months used a condom at last sex, compared with 33.1% of men aged 15-49. Similar differences are seen across numerous countries with data available, and show the need for more targeted education and information with men in their 50s and over.

2) Data shows older people are less likely to go for an HIV test than younger people, and older people are therefore more likely to be diagnosed late with implications for the effectiveness of treatment. When offered an HIV test at home or in a way deemed appropriate to them, older people are willing to test for HIV. Including women and men aged 50 and over in DHS, including in testing for HIV, would help to overcome the challenges of late diagnosis and older people's lack of awareness of their HIV status.

3) Data shows older people are less likely than younger people to express accepting attitudes towards people living with HIV. This indicates the need for more focussed awareness raising with people in older age in order to challenge and overcome stigma and discrimination faced by people living with HIV.

Including people aged 50 and over in DHS and collecting data on their views and experiences in relation to HIV, would provide a vitally needed and strengthened evidence base from which to

ensure HIV responses can meet the needs of all affected populations in an appropriate and effective way.

(see attached for references and additional data)

File Attachments 1) DHS Consultation input - HIV.docx, downloaded 748 times 2) Briefing paper - HIV data.pdf, downloaded 997 times

Subject: Re: Including people aged 50 and over in the DHS - HIV Posted by Dr_Mark_Brennan-Ing on Thu, 03 Apr 2014 16:00:40 GMT View Forum Message <> Reply to Message

We fully support and advocate for the inclusion of people age 50 and older in DHS surveys and reporting. As we begin the fourth decade of the HIV epidemic, deaths due to HIV continue to decrease as the number of older adults (those aged 50 years and older) living with HIV steadily increases. This age shift among those with HIV occurs as more and more people gain consistent access to effective treatment.

In 2001, 17 per cent of people with HIV in the U.S. were age 50 or older; by 2008, that figure had risen to 31 per cent. The CDC projects that by 2015 fully one-half of the those with HIV/AIDS in the U.S. will be age 50 or older.

Similar rapid progression has been predicted for sub-Saharan Africa, where it is estimated over 9 million older people will be living with HIV by 2040, constituting 27 per cent of people with the virus. In South Africa prevalence in women aged 55-59 years has increased from 7.7 per cent in 2008 to 12 per cent in 2012. In Kenya the preliminary results of the AIDS Indicator Survey undertaken in 2012 show a significant demographic shift with the highest HIV prevalence seen in the 45-54 year age group. Prevalence among people of this age increased from 7.8 per cent in 2007 to 9.1 per cent in 2012 while prevalence in the younger age groups declined. These data clearly point to the need for a rapid scale-up in appropriate care and support targeted to meet the complex and distinct needs of older people with HIV.

The DHS survey is the key source of data for prevalence estimates and the GARPR indicators. Thus, expanding the survey templates to include people over the age of 49 is crucial to ensuring both a more comprehensive data set that reflects the whole of the HIV epidemic and the evidence base for designing programs and services to meet the prevention and care needs of a burgeoning older population with HIV around the world.

Subject: Re: Including people aged 50 and over in the DHS - HIV Posted by bostongeron on Thu, 03 Apr 2014 16:40:30 GMT View Forum Message <> Reply to Message

I support the expansion to include people aged 50 and older. As members have previously posted, the shifting demographic among people with HIV/AIDS provides a unique opportunity to

understand how aging and HIV affect one another to inform clinical interventions and policy. Most HIV/AIDS data with older adults contains smaller sample sizes that are are not representative. The expansion of the DHS and AIS templates to include

older adults aged 50 and over will provide a more comprehensive understanding of the epidemic. This will inform funding allocations and research priorities.

Kristen E. Porter PhD Candidate University of Massachusetts Boston

Subject: Re: Including people aged 50 and over in the DHS - HIV Posted by brian.rice on Fri, 04 Apr 2014 07:32:22 GMT View Forum Message <> Reply to Message

Potential supportive evidence for change. At Public Health England (previously Health Protection Agency) we have conducted a body of analysis of HIV among people aged 50 years or over (often referred to as older adults). These analysis have highlighted that the overall number of HIV diagnoses in the UK among older adults more than doubled in recent years, and that almost half of older adults diagnosed with HIV acquired their infection when aged 50 years or over (Smith, 2010). In 2012, older adults accounted for one in four people seen for HIV care in the UK in 2012 (Aghaizu, 2013). In 2003, the proportion was one in eight. A key finding of our analysis is that older adults are significantly more likely to be diagnosed late with HIV and to die within a year of diagnosis than younger adults (Smith, 2010; Aghaizu, 2013; Rice, 2014).

Recent relevant publication:

 Aghaizu A, Brown AE, Nardone A, Gill ON, Delpech VC & contributors. HIV in the United Kingdom 2013 Report: data to end 2012. November 2013. Public Health England, London.
 Rice B, Elford J, Yin Z Croxford S, Brown A, Delpech V (2014). Trends in HIV diagnoses, HIV care and uptake of antiretroviral therapy among heterosexual adults in England, Wales and Northern Ireland. Sex Transm Dis 41(4): 257-65.

3. Davis DHJ, Smith RD, Brown AE, Rice BD, Yin Z, Delpech V (4th author) (2013). Early diagnosis and treatment of HIV infection: magnitude of benefit on short-term mortality is greatest in older adults. Age Ageing 42 (4):520-6.

4. Smith RD, Kall MM, Rice BD, Delpech V (2011). Increasing HIV infection among adults aged 50 years and over: A call for heightened awareness. Therapy 8 (2):201-205.

5. Smith R, Delpech V, Brown A, Rice BD (2010). HIV transmission and high rates of late diagnoses among adults aged 50 years and over. AIDS 24 (13): 2109-2115.

Subject: Re: Including people aged 50 and over in the DHS - HIV Posted by UNAIDSSIM on Fri, 04 Apr 2014 10:55:32 GMT View Forum Message <> Reply to Message

UNAIDS estimates 3.6 (3.2-3.9) million people aged 50 and older living with HIV. Given the increased HIV prevalence among population 50 years and older we would also support inclusion of this age group in the survey. I have attached the special supplement of the UNAIDS report on

global AIDS epidemic 2013 entitled HIV and Aging in support of this proposal.

File Attachments
1) 131101_ADDRESSING_HIV_IN_OLDER_POPULATIONS.pdf, downloaded
1694 times

Subject: Re: Including people aged 50 and over in the DHS - HIV Posted by Janet Seeley on Mon, 07 Apr 2014 12:10:03 GMT View Forum Message <> Reply to Message

I fully support the suggestions to include people of 50. The number of people in Uganda (where I work) -- and other parts of sub-Saharan Africa as noted in other posts -- living with HIV and over 50 is rapidly increasing. The DHS could be an invaluable source of information on these many different people. We are noticing HIV-incidence among people aged over 65 -- which underlines that we are not only looking at a population on long-term treatment.

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