HIV/AIDS & Aging: Myths & Realities

Tuesday, September 18, 2012 is the 5th Annual observation of National HIV/AIDS Aging and Awareness Day (NHAAAD). The AIDS Institute created NHAAAD in 2007 to shed light on the challenging issues the U.S. aging population faces with regards to HIV prevention, testing, care and treatment.

Dispelling Myths to Talk HIV With Older Adults

In 2009, nearly one fourth (23%) of people diagnosed with AIDS in the United States were ages 50+. The Centers for Disease Control and Prevention (CDC) estimate that by 2015 that figure will double*. Yet, older adults—especially Latino seniors who are at a disproportionate risk—are often disconnected from and overlooked in the HIV/AIDS dialogue. One of the ways to observe NHAAAD is by replacing myths with realities when talking HIV with older adults. Among common myths and perceptions seniors may have:

Myth: HIV is a contagious disease, like a flu or common cold.
Reality: HIV is not transmitted through saliva, sneezes, or sweat. Casual contact (shaking hands, sharing utensils, or kissing) doesn’t transmit the virus either.

Myth: People infected with HIV look unhealthy.
Reality: People living with HIV (PLWH) look no different from any other person for several years after being infected with the virus, and may continue infecting others. If untreated after 8 to 10 years, then AIDS will develop, a deadly complication of HIV. On the other hand, those who get treated as soon as possible can have a good quality of life and potentially never develop AIDS.

Myth: Once you are infected with HIV, you will get AIDS right away.
Reality: Those who get tested early, start getting treated upon learning their HIV-positive status, and stick to the treatment, can potentially live the rest of their lives without developing AIDS. Once infected it may take 8 to 10 years to develop AIDS, a deadly complication of HIV.

Myth: Older adults are immune to HIV.
Reality: Anyone can get infected with HIV at any age. In fact, nearly 25% of people diagnosed with AIDS in the United States were ages 50+ in 2009.

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Myth: There is no point in getting treated for HIV, I will die anyways.
Reality: PLWH who are under treatment can keep their virus (load) count very low, and live their lives with HIV as a chronic disease. In addition, there is evidence that people whose HIV is well controlled with anti-viral medications are also less likely to transmit HIV to others. Therefore, treatment is also a way to prevent the spread of HIV.

Why Latino Families Should Talk HIV
The Latino community is disproportionately affected by HIV/AIDS. Hispanics accounted for an estimated 20% of new HIV infections in 2009 despite representing only 16% of the general U.S. population\(^3\). In fact, Latinos are three times as likely to get infected with HIV than non-Hispanic whites\(^4\).

How To Act Against AIDS
As one of three national Hispanic/Latino partners of the CDC's Act Against AIDS Leadership Initiative (AAALI) works to encourage an intergenerational, stigma-free dialogue within the Hispanic community by leveraging the influence and respect Latino seniors command in their families:

- Get the Facts: Visit the resource pages below to learn more about HIV/AIDS.
- Get Tested: Visit www.hivtest.org to find your closest testing site, or text your five-digit ZIP code to 566948 (KNOWIT).
- Get Involved: Start a conversation at home or online, volunteer for a local organization, be a part of a campaign.

Resources
National Hispanic Council on Aging – www.nhcoa.org/ActAgainstAIDS
The AIDS Institute – www.nhaaad.org
Act Against AIDS – www.actagainstaids.org
Centers for Disease Control and Prevention (CDC) – www.cdc.gov/hiv
Latino Commission on AIDS – www.latinoaids.org

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\(^4\) Idem