



Needs of Older People With HIV Are Going Unmet

The U.S. is not on track to meet 2025 goals for self-rated health, mental health services, employment, adequate food or stable housing.

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The needs of older people living with HIV are going unmet, and the United States is unlikely to reach five goals for improving quality of life for those ages 50 and older by 2025, according to a Centers for Disease Control and Prevention (CDC) analysis published in [Morbidity and Mortality Weekly Report](#).

Thanks to effective treatment, people with HIV in the United States are living longer, and [more than half are now ages 50 and older](#). Like the general population, HIV-positive people are more prone to comorbidities as they age, and they may face challenges such as cognitive decline, reduced mobility and financial instability. Needs may also change as people transition to Medicare.

The U.S. National HIV/AIDS Strategy has set goals for improving the quality of life of people with HIV by 2025, with indicators for self-rated health, unmet need for mental health services, unemployment, hunger or food insecurity and unstable housing or homelessness. These indicators were adopted in late 2022, leaving less than two years to implement changes.

Linda Beer, PhD, of the CDC's Division of HIV/AIDS Prevention, and colleagues assessed progress toward these goals specifically for older individuals living with HIV. They analyzed data collected through the CDC's Medical Monitoring Project, an annual survey of a sample of U.S. adults diagnosed with HIV. Data were obtained from interviews and medical records, and progress was evaluated both overall and by age group. Nearly 13,500 people ages 50 and older participated between 2017 and 2022.

Self-Rated Health

The 2025 goal calls for 95% of older people with HIV to rate their health as good or better. During 2018, 66% of older adults reported good or better health, falling slightly to 65% in 2022. This means the current level would have to increase by 46% to reach the goal.

Mental Health Services

The 2025 goal calls for 91% of older HIV-positive people to have access to mental health services,

leaving 9% with unmet need. But in 2017, 19% reported unmet need, rising to 22% in 2022. Thus, the current level of unmet need is 56% above the goal. There was little change in the proportion of people with symptoms of depression or anxiety disorder during 2017–2022.

Unemployment

The 2025 goal calls for just 6% of older people with HIV to be unemployed. Unemployment declined from 12% in 2017 to 8% in 2022, but still leaving this metric 26% higher than the goal. Unemployment was lower among people ages 65 and older compared with those ages 50 to 64, suggesting the former group was more likely to be retired or otherwise not seeking work.

Food Insecurity

The 2025 goal calls for 91% of older people with HIV to have adequate food, leaving 9% experiencing hunger or food insecurity. The rate of food insecurity fell from 18% in 2017 to 14% in 2022, a level 36% above the goal. Unmet need for food assistance or food stamps and food or meal delivery did not change much during 2017–2022. However, the goal of substantially reducing hunger or food insecurity in the 65 and older age group was the only goal that was reached by 2022.

Unstable Housing or Homelessness

The 2025 goal calls for 93% of older people with HIV to be stably housed, leaving 7% with unstable housing or homeless. In 2018, the rate of unstable housing or homelessness was 15% falling to 13% in 2022, still 41% higher than the goal. Over time, people ages 65 or older were less likely to be homeless or have unstable housing compared with those ages 50 to 64.

Overall, the five quality-of-life indicators changed little during 2017–2022. In general, quality-of-life estimates were more favorable for people ages 65 and older than for the 50 to 64 age group. The magnitude of improvement required suggests that, if recent trends continue, none of the quality-of-life goals are likely to be met by 2025, according to this analysis.

“Multisectoral strategies to improve access to housing, employment, food and mental health will be needed to meet National HIV/AIDS Strategy 2025 goals for quality of life among older people with HIV,” the study authors concluded.

“Structuring HIV care delivery for older people with HIV to encompass comprehensive management of chronic diseases and disabilities, including programs that support living with health challenges, might improve self-rated health and decrease unmet need for mental health services,” they wrote.

However, “improving quality of life and addressing social determinants of health requires a multisectoral approach that moves beyond clinical care,” they added. Addressing unemployment can include delivery of skill-building and job-seeking services tailored to older PWH, who might face barriers to employment because of age-related disability and discrimination, as well as family caregiving responsibilities...Addressing housing insecurity among older people with HIV might require additional efforts, such as ensuring that federal housing resources are allocated according

to need.”

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