

# Social ties, sexuality, economic situation and health status among PLWHA aged 50 and older: results from a qualitative study in France

## Introduction

Ageing among PLWHA becomes a subject of rising interest for society and social sciences, since the number of PLWHA aged 50 and older is significantly increasing. This new reality generates questions and concerns that must be studied in order to anticipate and put in practice policies and activities implemented by health institutions and HIV/Aids organizations.

In 2011, **AIDES, a French HIV/Aids community-based organization, launched a qualitative study**, funded by the health insurance *AG2R La Mondiale*, aiming to describe the current psychosocial and economic situation and identify the current and future needs of PLWHA aged 50 and older who are catered for at AIDES.

## Method

The qualitative study was based on a **community-based research** approach:

- The study was launched to answer concerns of PLWHA who are over 50 in contact with AIDES. At that time, no studies were conducted on this topic in France ;
- HIV positive people were included during the whole process, from the construction of the project to the discussion of results ;
- A “community consensus conference” was organized in April 2013, with PLWHA and professional experts (from HIV or ageing areas, researchers, politicians, etc.), to build recommendations based on the findings and the testimonials.

**52 PLWHA >50 years were interviewed** during 2012. All the interviews were registered and transcribed. An interview guide was created “ad hoc” in order to collect information regarding a wide range of topics. A textual data analysis of the *corpus* was conducted.

30 women and 22 men were interviewed. Median age of respondents was 53 (range 50-71). 34 people declared being heterosexuals, 16 MSM and 2 declared being bisexuals. 38 people were diagnosed before 1996. Concerning their economic situation, 32 lived below the poverty line.



## Results

As for the content analysis, **four main issues emerged**: solitude, lack of sexuality, poverty and poor health status. All these subjects could be common to other populations who are getting older, nevertheless, we could recognize on the discourse of PLWHA, the **particular impact that HIV had had on their lives and on the way of experiencing ageing**.

Thus, it must be noted that HIV appears for some respondents as a worsening element in a life already disjointed or characterizes an “after”, a break point in comparison with their previous life. In other cases, HIV was described as having little influence on life or on the contrary producing a radical and positive change.

### SOCIAL TIES

Not having children, being homosexual, being a migrant, being discriminated against and bereavement appeared as factors related to feeling isolated and lonely. On the other hand, being close to an association appeared as an effective way of (re)creating social bonds.

### SEXUALITY

Sexuality appeared to be strongly altered because of aging and HIV. Loss of libido, change of physical appearance and fear to transmit HIV are obstacles to a sexual life. People tell of rejection because of their serological status and thus anticipate further rejection. This situation reinforces feelings of loneliness.

### ECONOMIC SITUATION

Financial difficulties of respondents came out when PLWHA expressed their current and future worries, since these difficulties weaken their standard of life, the quality of care (e.g. some drugs are not affordable), and are very likely to get worse. Concerns arose about the accessibility of housing for seniors and all these economic issues limit social activities.

### HEALTH STATUS

Respondents stated multiple health problems (e.g. tiredness, pain, cancers and cardiovascular diseases). For all these issues, it is unclear what can be allocated to ageing, HIV and/or HIV treatment. It appears difficult to fight against without knowing what the cause is and without response from medical staff. Poor health of many PLWHA>50 prevents them from anticipating the future and developing social activities.

## Discussion

Ageing constitutes a new phase in an ongoing process in a generation that hardly thought to survive. It is a step which has not been anticipated by both PLWHA and authorities: **collective responses are necessary to improve the quality of life of this weakened population and for further generations. These results allowed to identify the needs of PLWHA>50 years in order to jointly build adequate responses to this complex and multi-factorial reality: this was the objective of the “community consensus conference” which proposed a set of operational actions.**

French documents related to the study available on [www.aides.org](http://www.aides.org)  
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