TuSalud

People With HIV in Africa Are Aging Too. Have Health Campaigns Noticed?

HIV prevention and treatment campaigns are not targeting the growing population of older adults with HIV in sub-Saharan Africa.

June 26, 2025 By Laura Schmidt

Despite the growing rate of people ages 50 and older living with HIV in Africa, prevention and treatment campaigns are not adequately targeting this population, according to a study published in The Lancet Healthy Longevity.

Thanks to effective antiretroviral treatment that enables people to live longer and heathier lives, the HIV population is aging. But older people with HIV in Africa face some special challenges, including a lack of tailored awareness and treatment campaigns.

Between 2000 and 2016, the number of people 50 and older living with HIV in sub-Saharan Africa doubled, according to a Wits University news release. What's more, about 25% of people living with HIV in Africa will be 50 and older by 2040.

For the study, Luicer Olubayo, PhD, a researcher at the Sydney Brenner Institute for Molecular Bioscience at Wits University, aimed to investigate HIV in older people living in Kenya and South Africa and uncover people's perceptions about HIV, such as who they believe is at risk of acquiring it.

"We often think of HIV as a disease of younger people," Olubayo said in the release. "It doesn't help that intervention campaigns are mainly targeted at the youth."

The study found that older adults were less likely to believe that they can get HIV. What's more, rates of HIV testing were poor among older adults. Researchers highlight the pervasiveness of HIV stigma and the need to develop awareness campaigns that center older adults.

“We know that there is significant social stigma related to HIV infection. This is why understanding HIV-related stigma in older adults remains crucial as a way to inform interventions to support older people’s mental health and overall well-being,” Olubayo said.

The study also found that age, education, gender and location all affect an individual’s HIV risk. For example, despite increased access to treatment, older adults living in rural areas face significant challenges in preventing HIV, such as low education levels.

Researchers posit that because the rate of chronic illnesses, such as hypertension, diabetes and obesity, have greatly increased in sub-Saharan Africa, especially among older people, HIV should be managed alongside these conditions in the health care system.

In 2023, 39.9 million people were living with HIV worldwide, 1.3 million people were newly diagnosed and 630,000 people died of AIDS-related causes, according to a UNAIDS report.

Nearly 30.7 million people with HIV are on antiretroviral therapy, but that still leaves 9.3 million not on treatment. UNAIDS estimates that in 2023, 86% of people with HIV knew their status, 89% of people diagnosed were on treatment and 93% of those had viral suppression. The global 95-95-95 targets call for all three metrics to reach 95% by 2030.

“Our study is beneficial in that older populations are underrepresented, and not much is known about them over time. What changes are occurring? We have to answer these kinds of questions. With longitudinal data, we can look at the effectiveness of antiretroviral therapy coverage in older people,” said study coauthor F. Xavier Gómez-Olivé, MSc, PhD, an associate professor at the MRC/Wits-Agincourt Research Unit.

In related news, the theme of NMAC’s 2025 United States Conference on HIV/AIDS (USCHA) is “Aging and HIV.” Held September 4 through 7 in Washington, DC, the conference aims to honor people growing older with HIV, examine their challenges and learn from their lived experiences.

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