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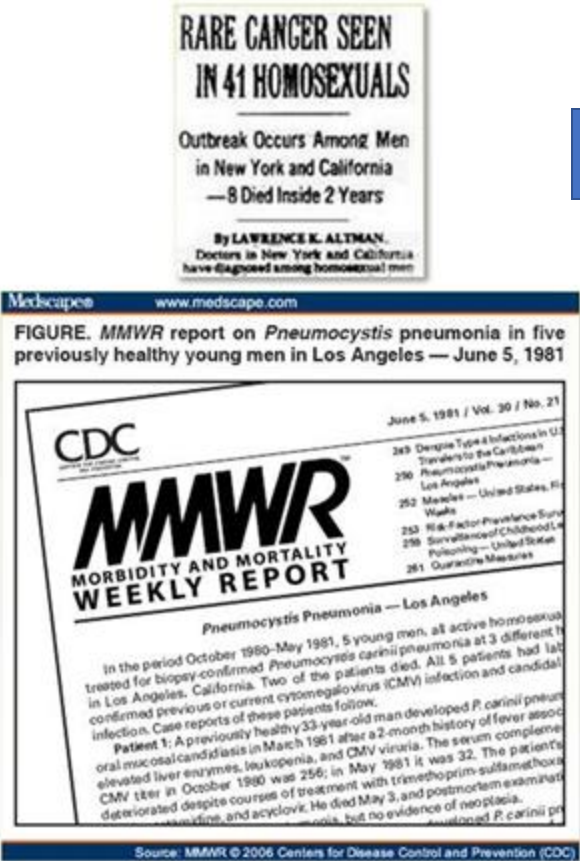
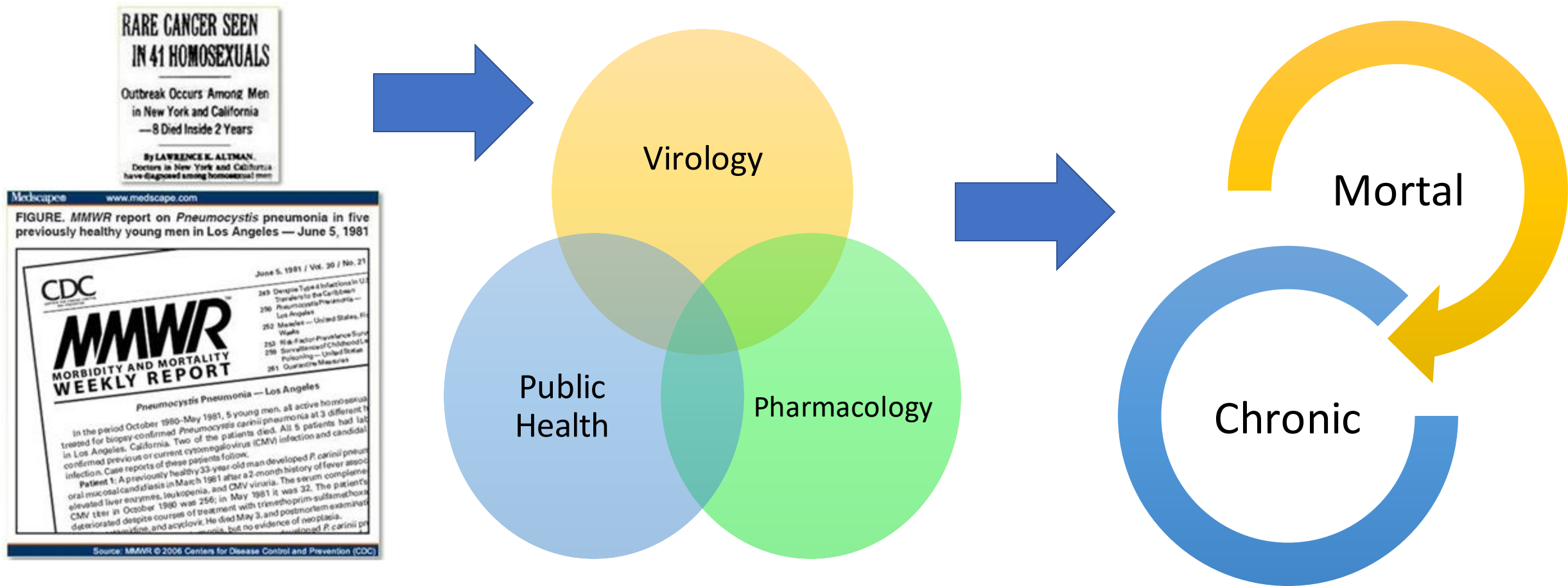
THE EXPERIENCE OF AGING LIVING WITH HIV IN SPAIN: *A Phenomenological Study*

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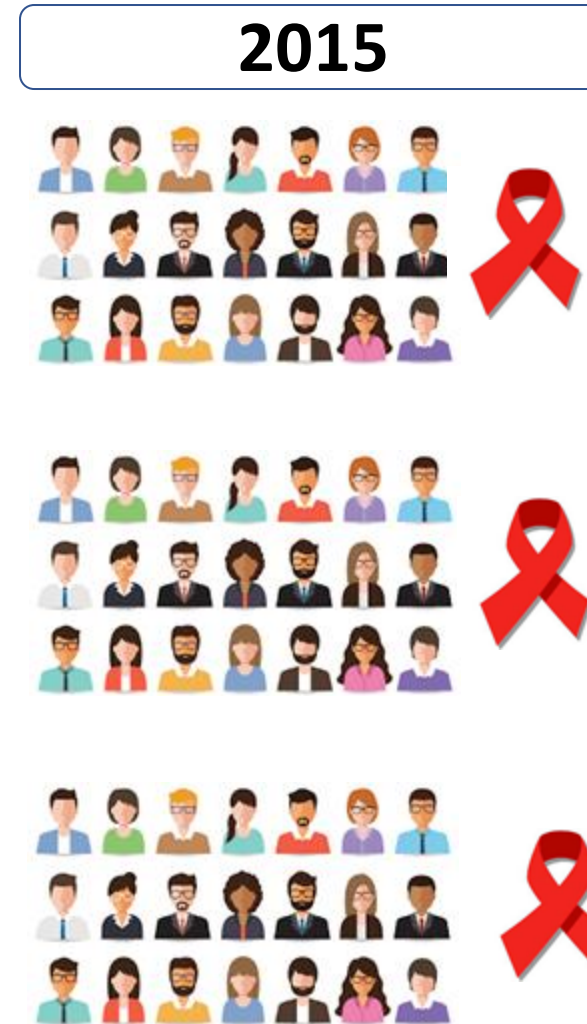
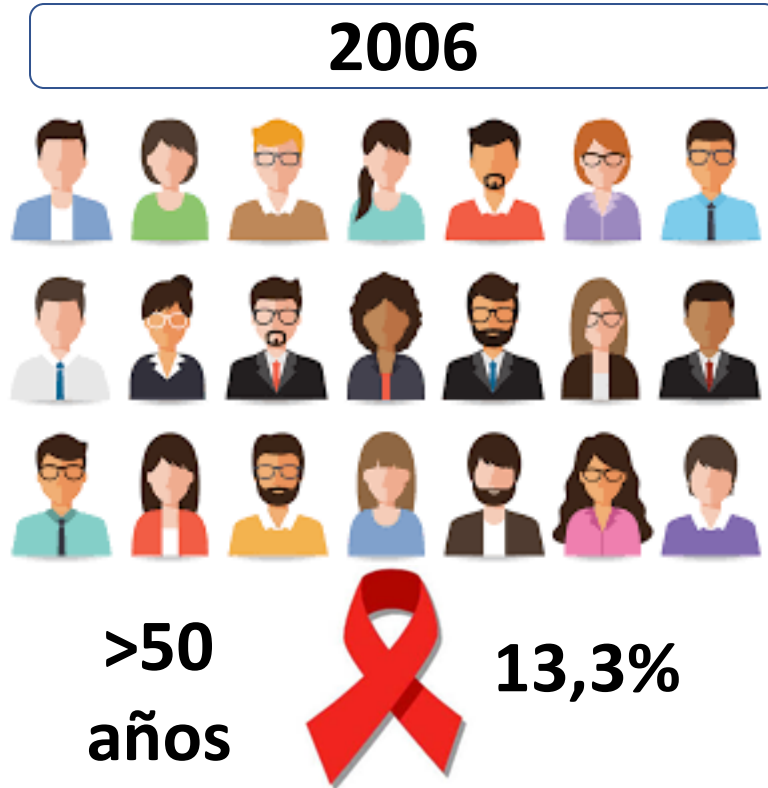
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INTRODUCTION



INTRODUCCIÓN



- Manzanares, F., Herrando, I., del Amo, J., Diaz, A., & Grupo de Trabajo de la Encuesta Hospitalaria de Pacientes con VIH. (2016). Caracterización del paciente con VIH de 50 o más años. Resultados de la encuesta hospitalaria, 2006-2015. In *VIII Congreso Nacional GeSIDA* (p. Poster 127).

AIMS

1. To describe the experiences of aging while living with HIV in Spain.
2. To detect unmet care needs.
3. To identify coping mechanisms

METHODOLOGY

- Qualitative
- Descriptive phenomenology
- Purposive sampling (>50 years old & >10 years living with HIV)
- Semi-structured interviews 2017
- Data saturation
- IRB approval
 - Anonymous, confidential, voluntary, informed consent.
- Data analysis: 7 steps Colaizzi method.

Table 2. Participant Characteristics

Key Informants (n = 24)	M (SD)
Age	$\bar{x} = 55.08$ years (5.1)
Years living with HIV	$\bar{x} = 26.58$ years (6.3)
Key Informants (n = 24)	n (%)
Sex	
Male	17 (70.83)
Female	7 (29.16)
Sexual identity	
Men who have sex with men	11 (45.83)
Heterosexual	10 (41.66)
Not available	3 (12.5)
Financial situation	
Retired	17 (70.83)
Employed	6 (25)
Unemployed	1 (4.16)

Marital Status

Single	12 (50)
Widowed	4 (16.66)
Engaged	4 (16.66)
Divorced	3 (12.5)
Not available	1 (4.16)

Children

Yes	18 (75)
No	6 (25)

City of residence

Valencia	5 (20.83)
Madrid	3 (12.5)
Cartagena	3 (12.5)
Bilbao	3 (12.5)
Gijón	3 (12.5)
Seville	3 (12.5)
Barcelona	2 (8.33)
Burgos	2 (8.33)

Note. SD = standard deviation.

FINDINGS

1. TOMORROW IS HERE

- Survivors
- New worries
- Loneliness
- Aging as a natural process
- Specialized care demands

“I did not expect to live so long, and look at me, I am 53 and I am still here” (Adam, male)

“I feel enormous loneliness and also a lack of love and affection. I have a solitary life. I would say that I am almost totally alone” (Abel, male)

“Very few interventions are specifically designed for us nowadays. We are a lot o people living with HIV for so many years; we are getting old” (Ángel, male)

FINDINGS

2. WE WERE DYING

- Death watermark
- Frail health
- 1st ART
- Non-regular adherence

“My friends with HIV were dying, all of them. This keeps you in a permanent state of fear” (Adela, female)

“I was like a dragon spitting fire out out my mouth” (Agustín, male)

“I stopped ART for three months and when I went to see the doctor, I screwed it! My viral load was very high again!” (Alejo, male)

FINDINGS

3. THE OTHERS

- Family (- Vs +)
- NGO's
- Society
- Health care providers

*“When I said it at home... my mother kept being my mother, and so did my father, my brother and my sister”
(Amadeo, male).*

*“When I came out of the doctor's office my parents told me that if I had it they did not want to see me again. They did not give me any support. Anything was the same again”
(Adolfo, male)*

FINDINGS

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“Doctors’ attention is excellent. Their human quality is just excellent. They are very involved with the cause” (Agustín, male)

“There are still doctors that have bad reactions when they treat a person with HIV” (Adela, female)

“I am nurse assistant. I can’t say ‘I am HIV+’ because they will not accept it. HIV is ... something classified (Alba, female)

FINDINGS

4. SELF-CARE

- Hope
- Emotional relief
- New ARTs
- Care strategies
- Normalization

“Now you just take a pill and it makes everything easier. You some hope” (Agustín, male)

“Everything has its own phases... I didn’t say it before but when I felt ready I asked myself ‘Why should I hide?’ If I am HIV+, I am, full stop” (Alba, female)

CONCLUSIONS

1. Aging living with HIV means to face intense vital experiences which threaten emotional, physical and social health.
2. Participants learnt to face it spontaneously, with lay care.
3. Analysis and discussion is needed to face new social and health care demands for old people living with HIV
4. Loneliness and its impact on patient's life must be systematically assessed in older people living with HIV
5. More research is needed

THANK YOU
MUCHAS GRACIAS

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