H.I.V. and Aging – A Survey in Three San Francisco Area Counties – San Francisco City and County, San Mateo County, Marin County

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in association with the San Francisco Eligible Metropolitan Area (San Francisco, San Mateo, and Marin Counties) HIV Health Services Planning Council.
Introduction

Background

• Over 50% of those living with HIV in San Francisco City/County are age 50+ as of 2012.

• In 2009 an survey was conducted at GMHC (HIV service agency in New York) regarding service utilization by people HIV+ 50+.

• In December 2012- February 2013 the above GHMC survey was replicated (slightly modified for local conditions) in San Francisco (SF), San Mateo (SMC) and Marin Counties.

• SF area survey had good turnout with 160 (GMHC New York, in a much larger city, had 180 analyzed surveys)

• SF area survey included transgender participants (GMHC survey had none)
Methods

• 160 Participants were recruited and data analyzed
• Paper survey in English.
• 12 survey events at 6 social service agencies serving HIV+ and/or older people in SF, San Mateo County (SMC) and Marin
• Stipend was a $20 Safeway grocery store gift card.
Cautions in interpreting/using results

- Agency bias - (survey events held at agencies)
- SES (Socio-economic status) bias – probably participants were overall lower than average SES than all HIV+ 50+ in the geographic area. (However, this may fit well with the Ryan White population).
- Issues identified which have difficulty sorting out
  - Problems related to HIV alone.
  - General aging issues not related to HIV.
  - LGBT (Lesbian Gay Bi Transgender) issues: e.g. stigmatization/youth culture etc..
  - Effects (emotional/trauma) of being long term survivors of a pandemic that killed approx. two thirds of those contracting advanced HIV disease since 1981 (i.e. lost friends, partners, post-traumatic stress).
Figure 1: Gender

- Male (80%)
- Female (11%)
- Transgender MTF (8%)
- Other (1%)
Figure 2: Overall Age Groups

- 50-55 (45%) ("younger")
- 56-60 (27.5%) ("middle")
- 61+ (27.5%) ("older")
Figure 3: Overall Racial/Ethnic Identity

- Hispanic/Latino/a (16%)
- African-American (25%)
- Asian-American (3%)
- Native American (6%)
- Caucasian/White (54%)
- Multi-Race/Other (9%)

Note: Total > 100% because some participants indicated more than one racial/ethnic identification.
Figure 4: County

San Francisco (73%)
San Mateo (19%)
Marin (8%)
Figure 5: Relationship Status
Figure 6: Housing
Figure 7: Overall Highest Education Level

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary</td>
<td>0.6%</td>
</tr>
<tr>
<td>Some High School</td>
<td>5.6%</td>
</tr>
<tr>
<td>GED</td>
<td>7.7%</td>
</tr>
<tr>
<td>High School Graduate</td>
<td>14.1%</td>
</tr>
<tr>
<td>Some College</td>
<td>31.4%</td>
</tr>
<tr>
<td>College Graduate</td>
<td>23.1%</td>
</tr>
<tr>
<td>Grad School</td>
<td>17.3%</td>
</tr>
</tbody>
</table>
Table 1: Illness and Chronic Conditions: Most Frequently Indicated Average Number of Conditions, n = 3.6

- Anxiety (48%)
- Depression (43%)
- Arthritis (36%)
- Dermatological (29%)
- Neuropathy (28%)
- Hepatitis C (19%)
- Impotence (18%)
- Hypertension (15%)
- Hearing Difficulties (15%)
- Diabetes (12%)
- Herpes (11%)
- Vision Difficulties (11%)
- Heart Problem (10%)
- STDs (10%)
- Broken Bones (10%)
Table 2: Illness and Chronic Conditions: Less Frequently Indicated

- Migraine (9%)
- Shingles (8%)
- Nervous Disorder (8%)
- Cancer (8%)
- Pneumonia (7%)
- Hepatitis B (5%)
- Respiratory (4%)
- Staph Infection (4%)
- Syphilis (4%)
- Hepatitis A (3%)
- Stroke (2%)
- Menstrual Problems (1%)
Table 3: Potential Social Network Members

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Number (n) who have such a relationship (%)</th>
<th>Mean (n)</th>
<th>Range (n) (percentage within range)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents</td>
<td>54 (34%)</td>
<td>.8</td>
<td>0 (41%) – 2 (19%)</td>
</tr>
<tr>
<td>Children</td>
<td>34 (21%)</td>
<td>2.4</td>
<td>0 (2%) – 14 (1%)</td>
</tr>
<tr>
<td>Grandchildren</td>
<td>17 (11%)</td>
<td>4.7</td>
<td>1 (4%) – 17 (1%)</td>
</tr>
<tr>
<td>Siblings</td>
<td>122 (76%)</td>
<td>3.2</td>
<td>0 (1%) – 12 (2%)</td>
</tr>
<tr>
<td>Other Relatives</td>
<td>124 (78%)</td>
<td>1.8</td>
<td>0 (70%) – 30 (1%)</td>
</tr>
<tr>
<td>Friends</td>
<td>118 (74%)</td>
<td>4.8</td>
<td>0 (8%) – 30 (1%)</td>
</tr>
</tbody>
</table>
Figure 8: Percentage “somewhat” or “very close” with others

Parents (n=56) (32%) (41%)
Children (n=34) (3%) (55%)
Grandchildren (n=17) (11%) (58%)
Siblings (n=122) (33%) (35%)
Friends (n=118) (36%) (57%)

Very Close
Somewhat Close
Figure 9: Family Helpfulness

% Reporting Family was at least somewhat helpful

- Shopping (25.2%)
- Housework (23.2%)
- Driving (25.9%)
- Mail (18.6%)
- Financial (18.6%)
- Advice (42.9%)
- Uplift (cheer up) (53.8%)
- Confiding (51.4%)
Figure 10: Family Upset participant

% Reporting Family Upset Them

- Hesitant to Talk (28.5%)
- Hurt my Feelings (28.7%)
- Refused to help (14.7%)
Figure 11: Friend Helpfulness

% Reporting Friends were at least somewhat helpful

- Shopping (37.7%)
- Housework (23%)
- Driving (36.6%)
- Mail (17.7%)
- Financial (11.7%)
- Advice (52.1%)
- Uplift (cheer up) (63%)
- Confiding (62.6%)
Figure 12: Friend(s) Upset

% Reporting Friend(s) Upset Them

- Hesitant to Talk (30.2%)
- Hurt my Feelings (34.5%)
- Refused to help (19.7%)
Figure 13: Helping One Another: Others Providing More, Receiving More, or Equal help to Participant

- Parents (40%) (27%) (33%)
- Children (50%) (33%) (17%)
- Grandchildren (50%) (10%) (50%)
- Siblings (28%) (53%) (19%)
- Other Relatives (19%) (69%) (12%)
- Partner/Spouse (18%) (55%) (27%)
- Friends (26%) (60%) (14%)

Others Receive more
Equal
Others Provide more

0 10 20 30 40 50 60 70 80 90 100
Figure 14: Provision of Care: past and present

% Participant Receiving/Received Care from...

- Family (6.6%)
- Neighbor (6.6%)
- Volunteer (7.2%)
- Partner (14.5%)
- Paid Helper (14.5%)
- Friend (26.3%)
- No one (9.9%)
Interpreting Tables 4 and 5

1. Greater than (>) is proportional (higher likelihood), not absolute number, not absolute percentage.

2. For example Table 4, Openhouse: a higher proportion of older (age 61+) were more likely to use the service than did younger (age 50-55).

3. For example, Table 4, S F Gen. Ward 86: Transgender persons were more likely to use the service than did cisgender (non-transgender) Males or Females.
### Table 4: Community Agcy Service Use

<table>
<thead>
<tr>
<th>Agency</th>
<th>Overall % Usage</th>
<th>Gender</th>
<th>Age</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS Service Org.</td>
<td>49%</td>
<td></td>
<td>Y &gt; O</td>
<td></td>
</tr>
<tr>
<td>HIV Housing Assist.</td>
<td>31%</td>
<td></td>
<td>Y &gt; O</td>
<td>SF, M &gt; SMC</td>
</tr>
<tr>
<td>U of P Dental Clinic (SF)</td>
<td>25%</td>
<td></td>
<td></td>
<td>SF &gt; SMC, M</td>
</tr>
<tr>
<td>Openhouse (SF)</td>
<td>20%</td>
<td></td>
<td>O &gt; Y</td>
<td>SF &gt; SMC, M</td>
</tr>
<tr>
<td>SF Gen. Ward 86</td>
<td>19%</td>
<td></td>
<td>T &gt; M, F</td>
<td></td>
</tr>
<tr>
<td>Edison Clinic (SMC)</td>
<td>12%</td>
<td></td>
<td></td>
<td>SMC &gt; SF, M</td>
</tr>
<tr>
<td>St. Mary Med. Ctr (SF)</td>
<td>10%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health Assn (SMC)</td>
<td>10%</td>
<td></td>
<td></td>
<td>SMC &gt; SF, M</td>
</tr>
<tr>
<td>Willow Clinic (SMC)</td>
<td>9%</td>
<td></td>
<td></td>
<td>SMC &gt; SF, M</td>
</tr>
<tr>
<td>Healthy SF</td>
<td>8%</td>
<td></td>
<td>Y &gt; O</td>
<td></td>
</tr>
<tr>
<td>Marin Health</td>
<td>5%</td>
<td></td>
<td></td>
<td>M &gt; SF, SMC</td>
</tr>
</tbody>
</table>

Legend: Y = younger; O = Older; SMC = San Mateo Co; M = Marin; SF = San Francisco; F = Female; M = Male; T = Transgender.
**Table 5: Overall Support Service Use**

<table>
<thead>
<tr>
<th>Agency</th>
<th>Overall Percent Usage</th>
<th>Gender</th>
<th>Age</th>
<th>Race</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meal/Food/Nutrition</td>
<td>63%</td>
<td>F, T &gt; M</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health</td>
<td>54%</td>
<td></td>
<td></td>
<td></td>
<td>SMC, M &gt;SF</td>
</tr>
<tr>
<td>Case Management</td>
<td>53%</td>
<td>F, T &gt; M</td>
<td>Y &gt; O</td>
<td></td>
<td>SMC, M &gt;SF</td>
</tr>
<tr>
<td>Transportation</td>
<td>50%</td>
<td>F, T &gt; M</td>
<td>Y &gt; O</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal</td>
<td>47%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV Prevention</td>
<td>35%</td>
<td>F, T &gt; M</td>
<td></td>
<td>Afr &gt; others</td>
<td></td>
</tr>
<tr>
<td>Group Svcs Program</td>
<td>30%</td>
<td></td>
<td></td>
<td>Afr &gt; others</td>
<td></td>
</tr>
<tr>
<td>Substance Use Counseling</td>
<td>25%</td>
<td></td>
<td></td>
<td>Afr &gt; others</td>
<td></td>
</tr>
</tbody>
</table>

Legend: F = Female, M = Male, T = Transgender; Y = younger, O = Older; Afr = African American; SMC = San Mateo Co., M = Marin, SF = San Francisco.
Figure 15: Health-Related, Medical Service % Use

- Dental (48%)
- Case Management (33%)
- Mental Health (31%)
- Emergency Room (31%)
- Hospital outpatient (25%)
- Private Clinic (17%)
- Urgent Care (15%)
- Hospital inpatient (15%)
- HMO (14%)
- Home Care (11%)
- Recovery (drug/alcohol) (5%)
- Hospice (5%)
Figure 16: Community-Based Service Organization % Use

- Food Programs (51%)
- Legal (22%)
- Resource referral (20%)
- Self-Help (20%)
- Spiritual (19%)
- Housing (Non-HIV) (16%)
- Employment (11%)
- Senior Services (12%)
Figure 17: Benefits %

- Medicare (56%)
- Medicaid (49%)
- SSD (42%)
- SSI (37%)
- Private Health Ins. (20%)
- Food Stamps (13%)
- County Health (8%)
- VA (6%)
- Private Disability Ins. (6%)
- Long Term Care Ins. (4%)
Figure 18: Barriers to Service Use % (Perceived By Participant) Top 10
Figure 19: Barriers to Service Use % (Perceived By Participant) (Other)

- Transportation Difficulties (13%)
- Outing, HIV Status (11%)
- Appointment Problems (11%)
- Caregiving Responsibilities (11%)
- Language Problems (9%)
- Childcare Responsibilities (7%)
- Friends/Family Against Services (5%)
- Other (4%)
Key Findings

- Most participants had access to H.I.V. medications and had their H.I.V. well managed.
- Most in the group are long term survivors (93% have had HIV 10 years or longer).
- 79% were LGB (Lesbian Gay Bi).
- 80% were male.
- A significant number were not emotionally close to and about half did not have their physical and emotional needs supported by their families - more true for younger participants (age 50 - 55).
- Most participants were relying on informal friend networks and agencies.
- Almost 10% (9.9%) of those who said they required regular assistance because of HIV or other illness, disability or frailty now or in the past, reported that they had no one to provide such care.
- State, local and federal programs are generally used for financial help.
- The high cost of living in the San Francisco area, social isolation, housing, economic security, and transportation are key social considerations among this population.
- The top 10 concerns about barriers to service with percentage of participants who indicated them:
  - Service Not Free (39%), Don't Know Where to Get Svc (37%), Cost of Service (34%), Don't Know Service Exists (33%), Red Tape (31%), Service Wait Times (31%)
  - Staff Not Helpful (23%), Providers Don't Like Participant (23%)
  - Communication Problems (16%), Fear Won't be Treated (16%)
References

(See report for full citations)(in chronological order):

1. ACRIA ROAH Study (2006)(AIDS Community Research Initiative of America) (Research on Older Adults) (New York).


4. San Francisco Department of Public Health epidemiological HIV statistics (ongoing).
Acknowledgements

The authors wish to gratefully acknowledge assistance from AIDS Community Research Initiative of America (ACRIA) New York, notably Stephen Karpiak, Ph. D. and especially Mark Brennan-Ing, Ph. D. of ACRIA for loaning the survey instrument used in the New York GHMC Survey, the original coding guidelines and providing direct support in terms of meeting with the authors of this report and answering their detailed questions. The authors also wish to thank the San Francisco Eligible Metropolitan Area (San Francisco, San Mateo and Marin Counties) H.I.V. Health Services Planning Council for financial and logistical support, including providing incentives to 160 participants ($20 Safeway gift cards), copying and printing of survey forms, consent forms and filing, the time and logistical support of Planning Council Executive Director Mark Molnar and Council Staff persons Ali Cone and T.J. Lee, also the assistance of many members of the Planning Council Consumer and Minority Affairs Committee who gave valuable advice and support to the adaptation of the survey to the San Francisco area, notably John Andrews. Also Brian Brophy of the AIDS Legal Referral Panel and Kenneth Hornby, Planning Council member, why served as logistical assistants at the survey events in San Francisco. The authors wish to thank the venues which allowed the researchers to enter their facilities recruit and conduct the surveys, including, ACRC Redwood City (formerly AIDS Community Resource Consortium), Shanti (San Francisco), Openhouse (San Francisco), San Francisco AIDS Foundation, Catholic Charities (San Francisco), and Marin AIDS Project (San Rafael). Also countless agencies and programs who put out e-mails and fliers for the surveys, including a transgender service group, Asian Pacific Wellness, BCA – Black Coalition on AIDS, as well as the Bay Area Reporter San Francisco LGBT newspaper, which ran three announcements about the study. In addition, thanks go to The LGBT Community Partnership and the Institute on Aging (San Francisco), Rick Appleby, the San Francisco LGBT Aging Policy Task Force of the San Francisco City and County Human Rights Commission, and the informal San Mateo area H.I.V. e-mail list for putting out the word via their newsletters and e-mail lists.
Survey website and contact information for the authors:

For more information on the study, a copy of the full report, and future developments, please join/follow the Study website (Yahoo group):

http://health.groups.yahoo.com/group/hivaging

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