
AIDS and older persons in the era of ART: Evidence from Thailand

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Why are older persons of interest in relation to the HIV/AIDS epidemic

- Older persons are also at risk of HIV although most **infected** persons are adults under age 50.
- However most adults who are infected have living parents who are in older ages.
- Thus large numbers of older persons are **affected** by the epidemic as parents or relatives of HIV+ persons.
- There are many pathways through which parents of HIV+ adults can be adversely impacted.

Potential pathways to adverse impacts of HIV/AIDS epidemic on parents



Anti-Retroviral Therapy (ART) is changing the epidemic

- Prior to the recent widespread access to ART, HIV led inevitably to death usually preceded by debilitating illness.
- ART restores health of persons living with HIV/AIDS (PLHA)
- To be effective, ART recipients must strictly adhere to treatment requirements.
- Adherence support is part of many treatment programs and typically emphasizes peer assistance from PLHA groups.
- The potential role that family members can play is only occasionally stressed and parents of adults are virtually never specifically mentioned.

Thai setting

- Parents commonly played provided caregiving at the terminal stage as many adults who became seriously ill had no one else to turn to.
- In 2003 Thailand launched a national program to provide free access to ART through government insurance and by 2009 about 75% in need of ART receive treatment.
- Our recent research examines how the spread of ART affects the role of older age parents in the epidemic.

Data collection strategies

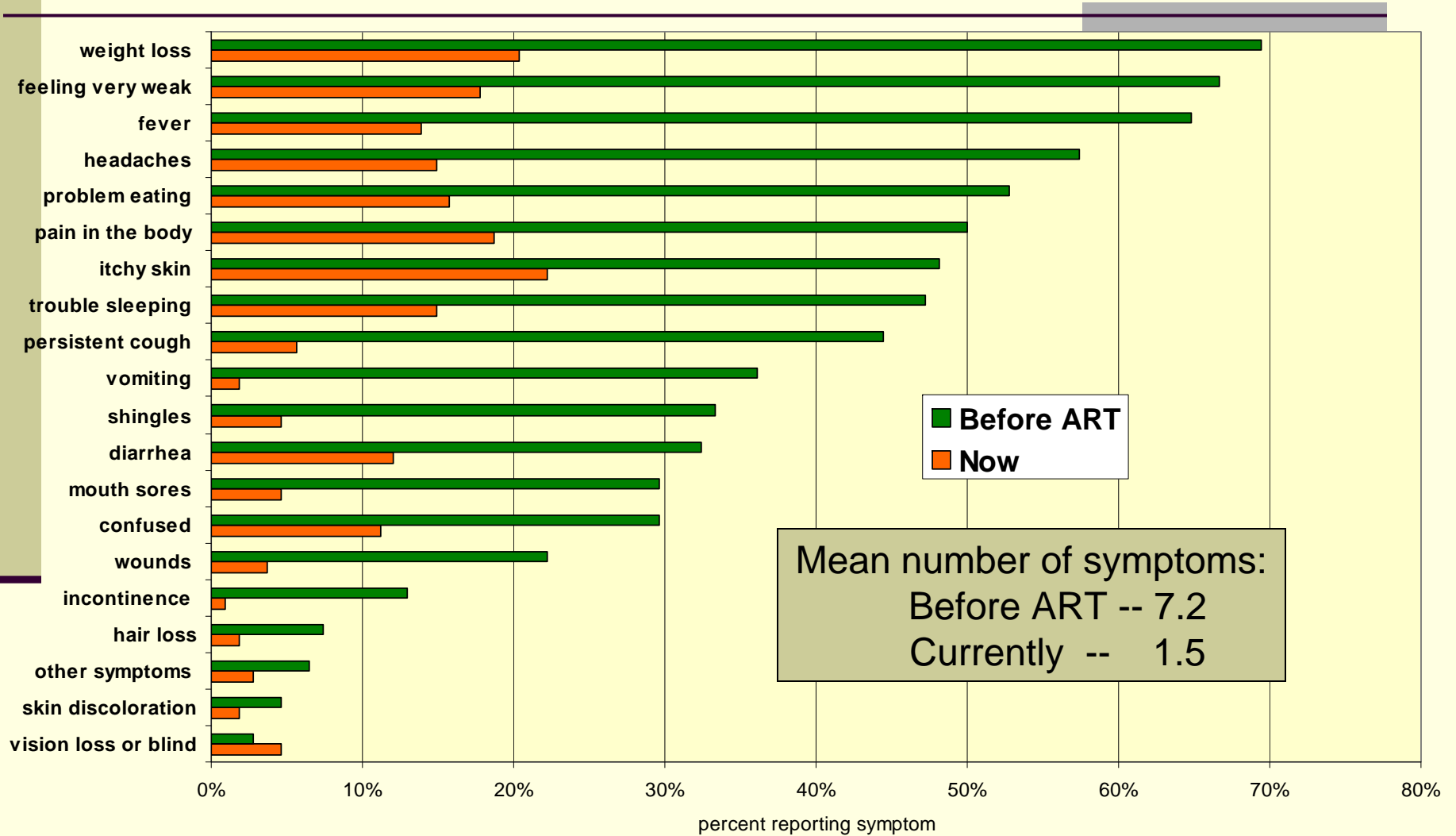
- 1) *ART recipient survey* – 912 adults on ART filled out self-administered one page questionnaires in 2008 when they came for resupply at 2 hospitals in Bangkok and 16 hospitals in 5 provinces around the country. The ART recipient sample is reasonably representative of the national pool of all recipients.
- 2) *Parent Interviews* – 108 face-to-face interviews were conducted in 2008-09 with parents of adults on ART using a structured questionnaire to collect detailed information about their situation before and after their son or daughter started ART treatment. The sample of parents was independent of the ART recipient sample and limited largely to those who lived with or near their child on ART.

PLHA support group member bringing respondent for interview



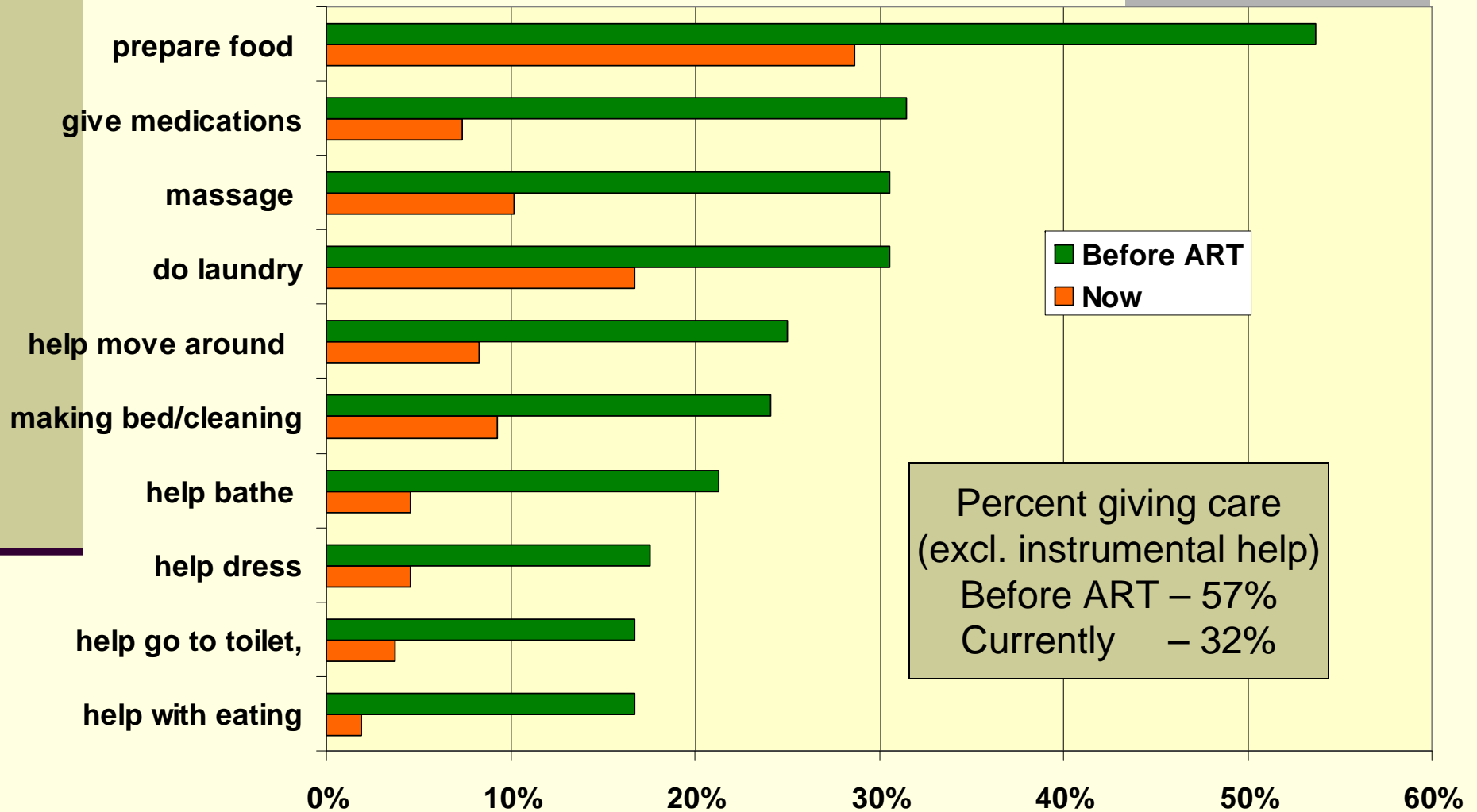
ART greatly improves health of PLHA (% of PLHA with symptom, Thailand)

Source: Parent Interviews



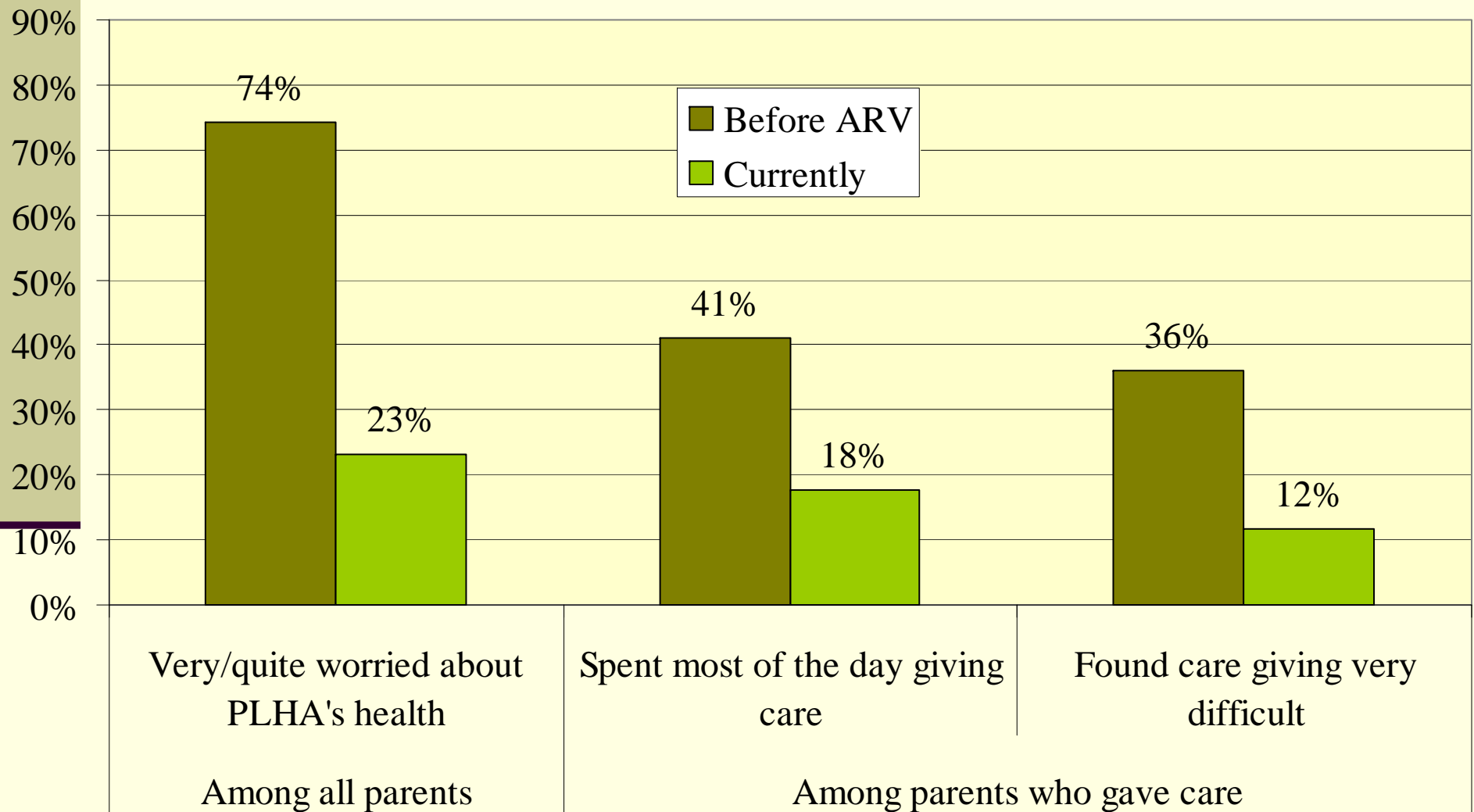
ART reduces demands on parental caregiving (% of parents doing task, Thailand)

Source: Parent Interviews



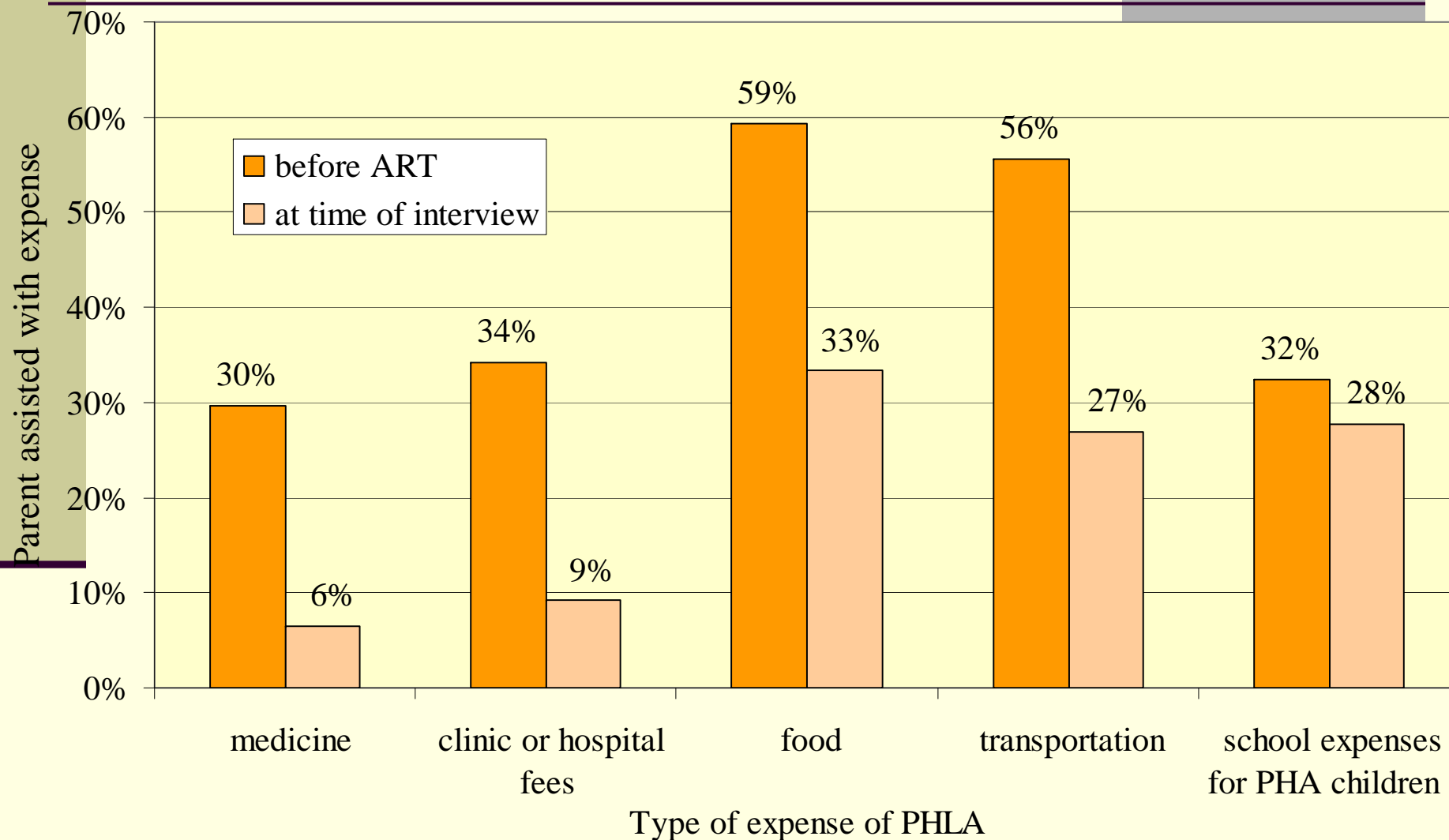
Worry and caregiving time and difficulty decrease for parents after ART

Source: Parent Interviews



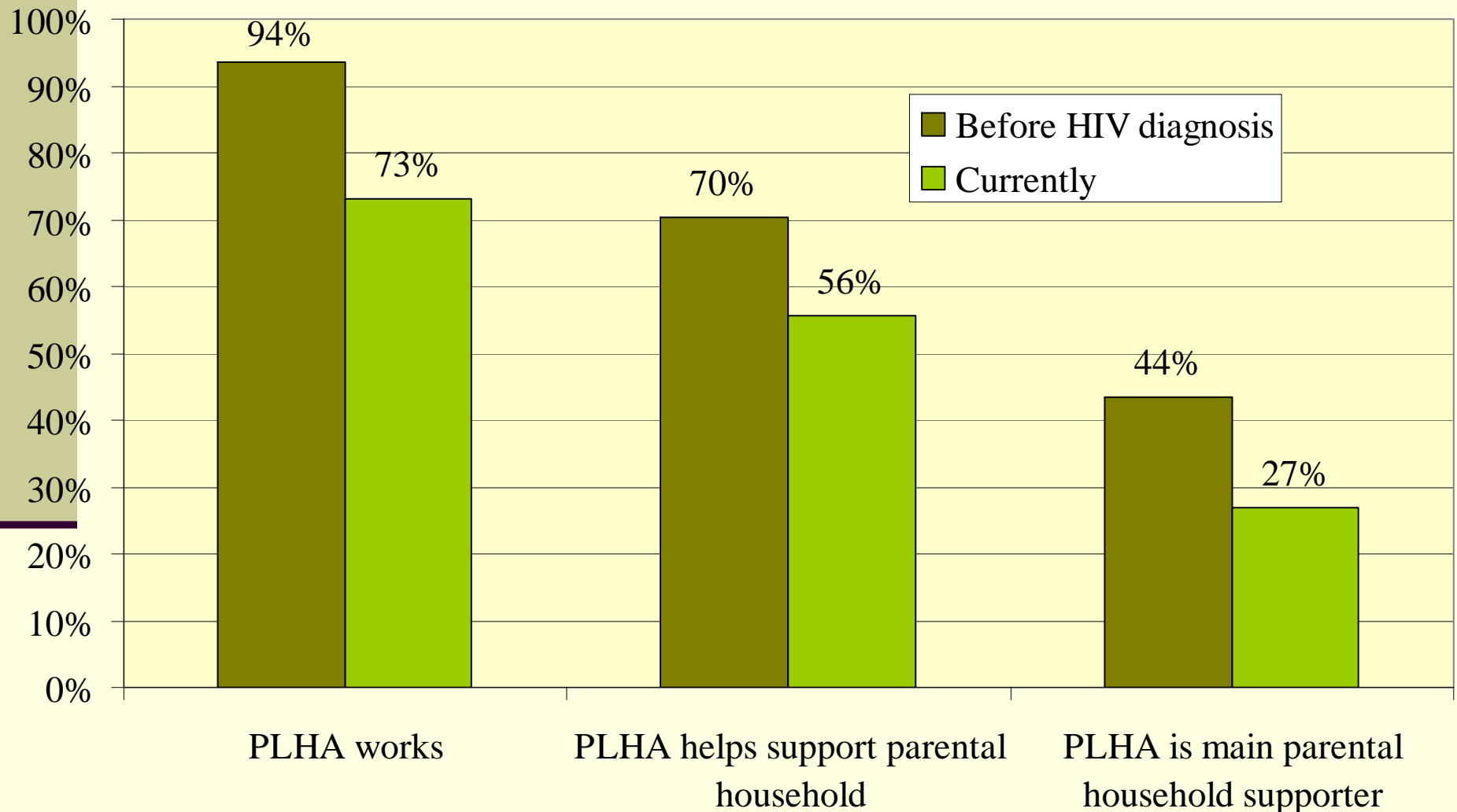
Parental assistance with expenses of PLHA declines after ART

Source: Parent Interviews

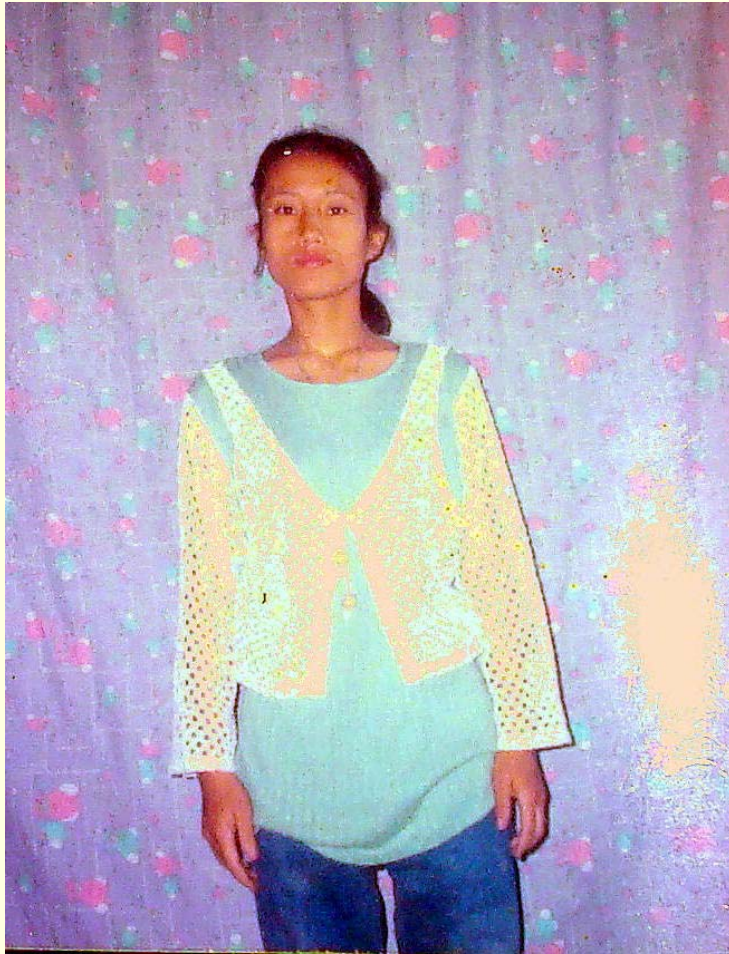


Many ART recipients are able to work and help support parental household

(Source: Parent Interviews)



In Brief: ART not only helps the PLHA but can also be blessing for the parents



Before ART



After ART

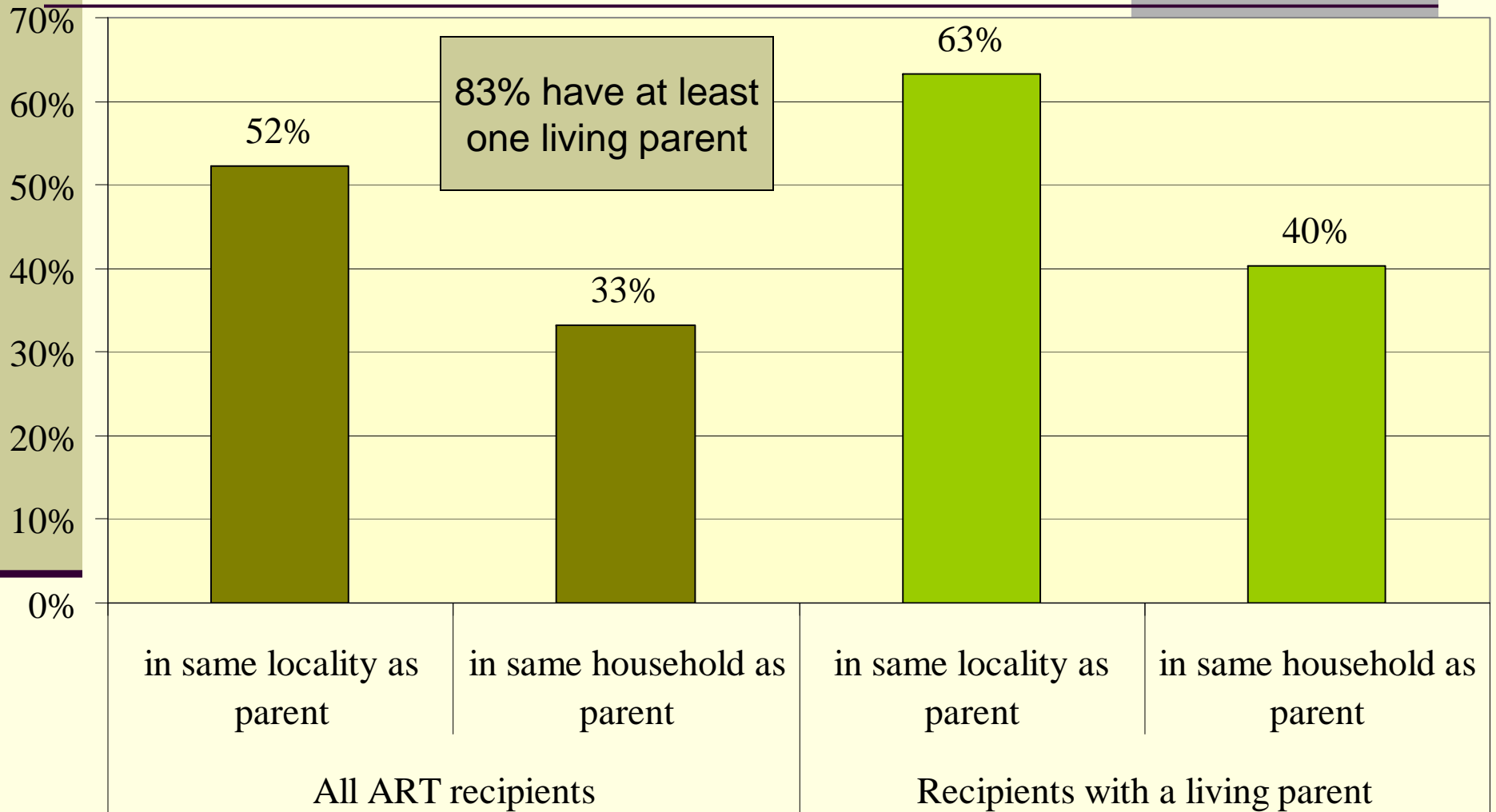


Changing Contribution of Parents

(Results from ART Recipient Survey)

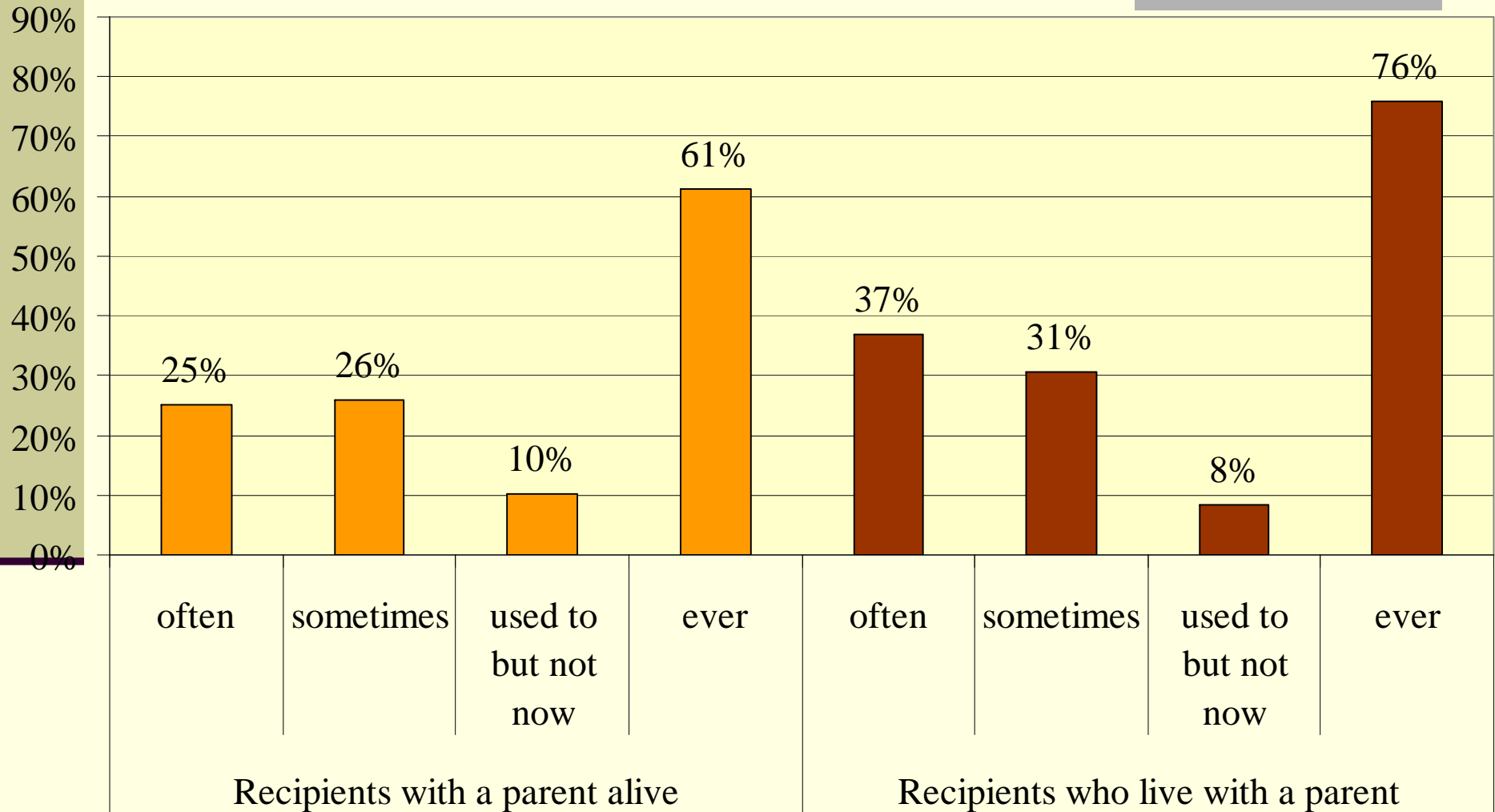
Location of ART recipients and parents

(Source: ART Recipient Survey)

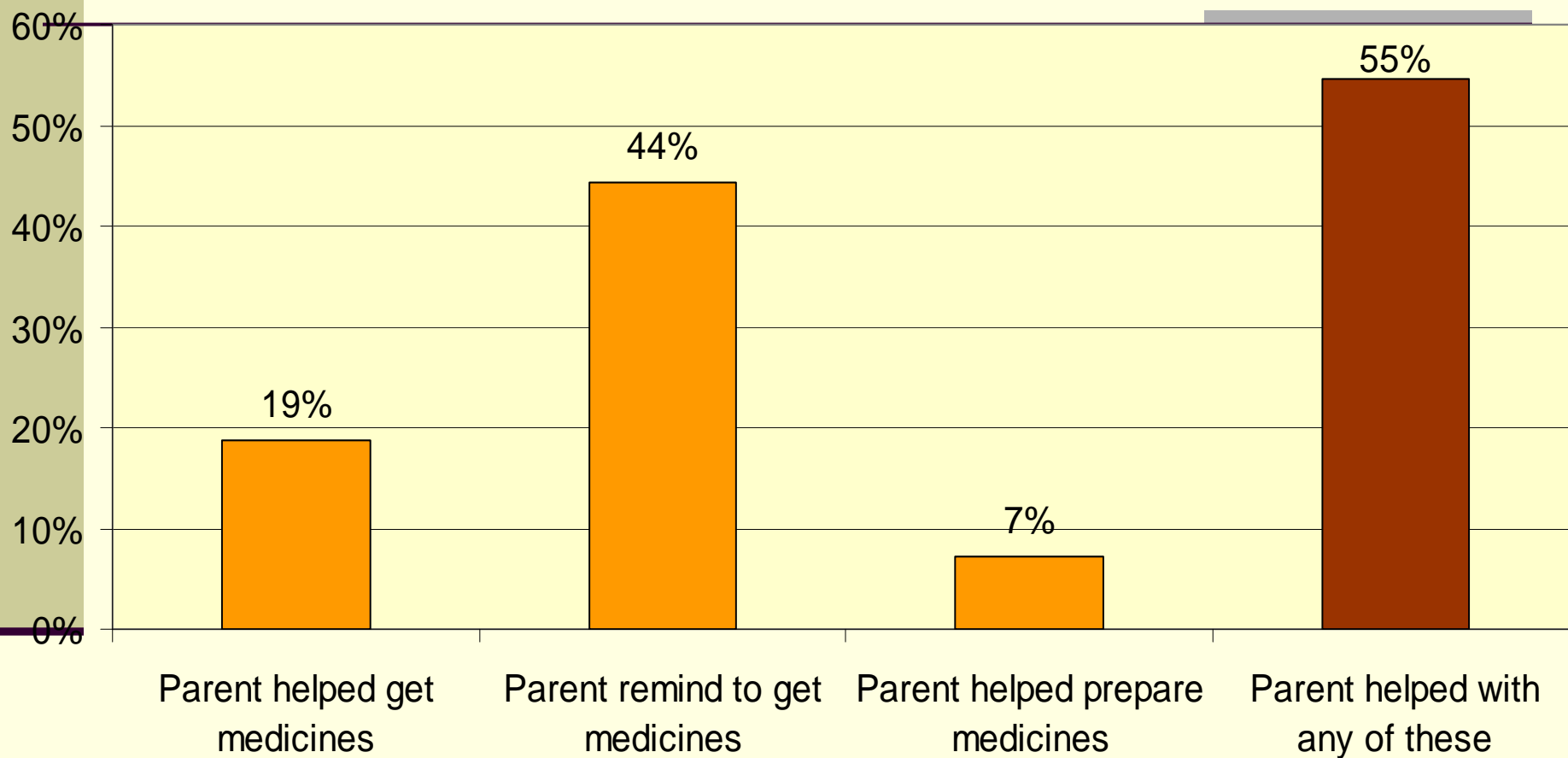


Percent of recipients who are reminded to take ART medications on time by parents

(Source: ART Recipient Survey)



Help with getting and preparing medicines by parents among those with living parent (ART Recipient Survey)

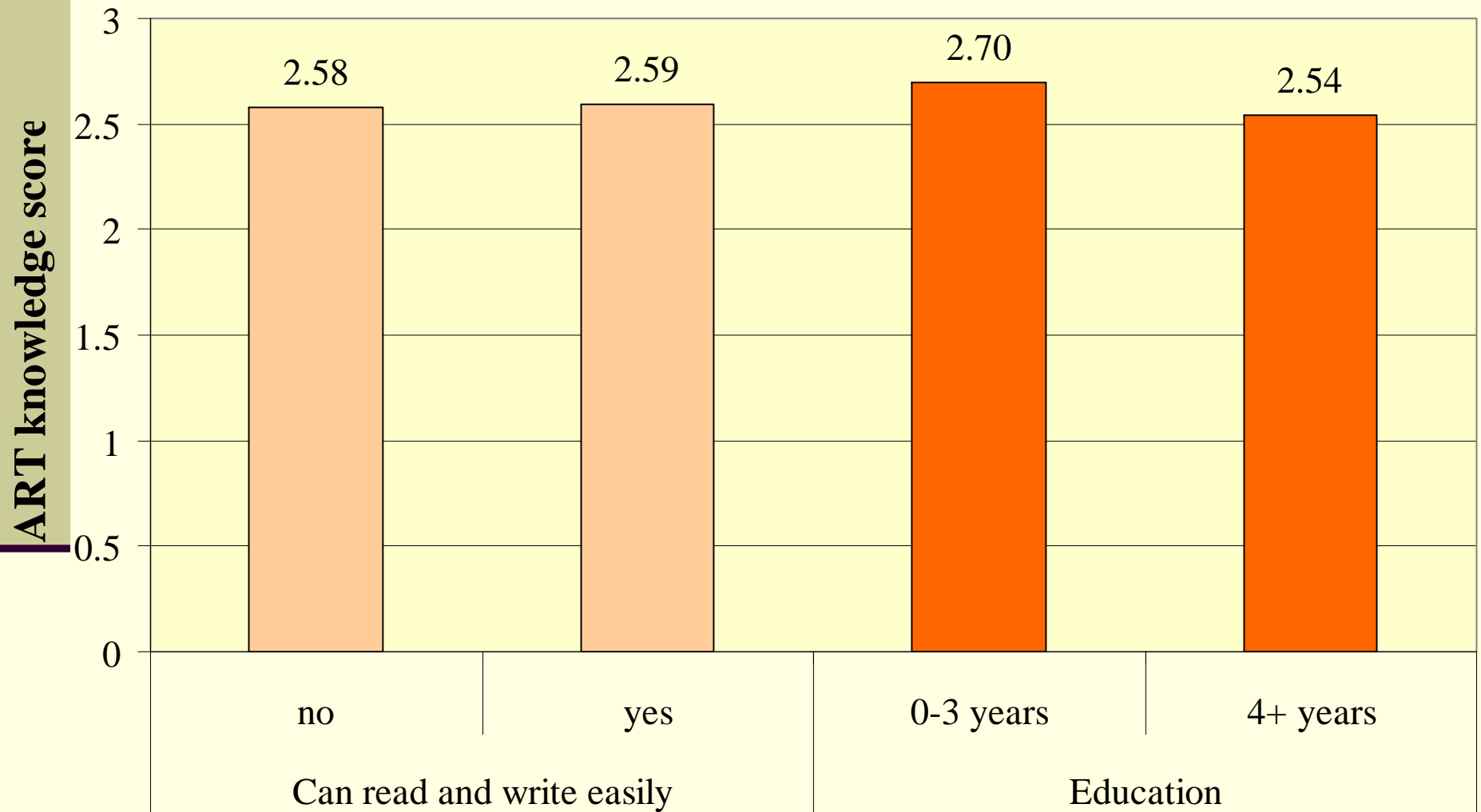


ART knowledge

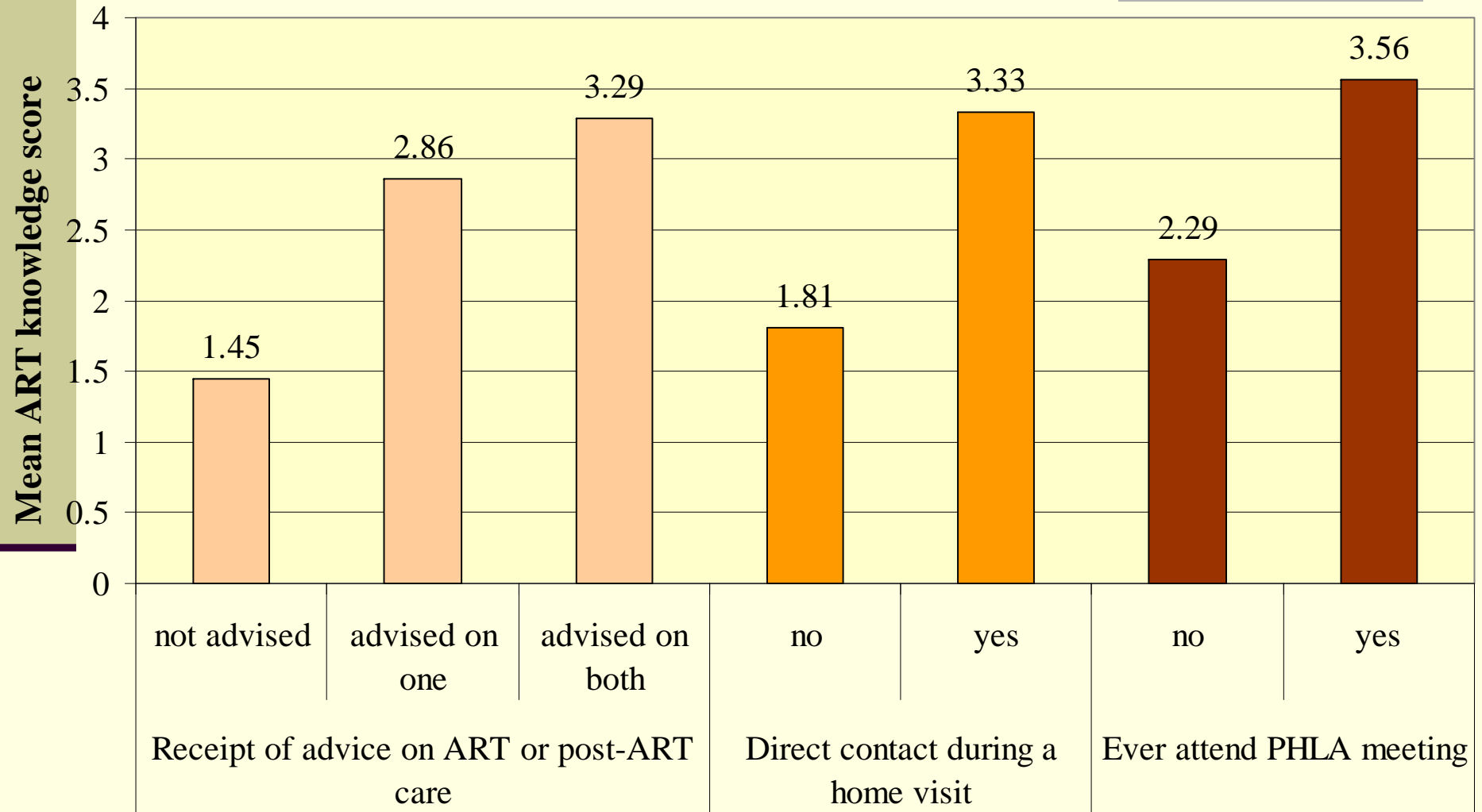
(from parent interviews)

- To be effective in assisting with treatment adherence, parents need to have a basic understanding of ART requirements.
- An ART knowledge score was calculated for each respondent based on answers to 5 questions about the frequency and timing of taking medications, where and when to get resupply, and awareness of what CD4 counts are.

ART knowledge shows little relation to literacy and education for parent



Contact with treatment services is associated with better knowledge



Summary & Conclusions

- The success of ART requires strict adherence to the medication regime including taking medications on time, getting resupplies, and monitoring progress through appropriate tests.
- ART recipients typically live in households with or near other family members, including older age parents, who are thus well positioned to routinely encourage adherence.
- These family members typically have a strong wish for the person on ART to improve and sustain good health.
- Many ART recipients indicate that family members, including their older age parents, do assist with treatment adherence.

Conclusions (continued)

- To better harness and improve the effectiveness of this useful (and free) treatment assistance, ART programs need to recognize the contribution of family members, including older age parents, and to ensure that they are well informed about the nature and requirements of successful treatment.
- Health staff and PLHA support group peers can play an important role in providing this information.

Thanks for your attention and thanks to the Thai investigators who made the research possible

